

Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number :		20200203		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF ANN FLOOD												
Street Address: 2157 WEST DELL ROAD												
City: BATH						State: PA			Zip Code: 18014-9649			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2024		FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR	REP			
						11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		9	17	2024		10	21	2024				
A. Amount Brought Forward From Last Report						\$ 47,725.70						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 12,690.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 60,415.70						
D. Total Expenditures (From Schedule III)						\$ 30,838.56						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 29,577.14						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 101.48						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 0.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Signature

Printed Name

My Commission Expires

Email

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF ANN FLOOD	From: <u>9/17/2024</u> To: <u>10/21/2024</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 265.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 100.00
All Other Contributions (Part B)	\$ 1,575.00
TOTAL for the Reporting Period (2)	\$ 1,675.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 7,950.00
All Other Contributions (Part D)	\$ 2,800.00
TOTAL for the Reporting Period (3)	\$ 10,750.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.00

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 12,690.00
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PART A
CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES
\$50.01 TO \$250.00

**Use this Part to itemize only contributions received from political committees
with an aggregate value from \$50.01 to \$250.00 in the reporting period.**

Name of Filing Committee or Candidate FRIENDS OF ANN FLOOD	Reporting Period From: <u>9/17/2024</u> To: <u>10/21/2024</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee HUMANE PA			MO	DAY	YEAR	\$ 100.00
Mailing Address 2484 SWEET GUM CIRCLE			9	30	2024	
City YORK	State PA	Zip Code (Plus 4) 17406				

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL
\$ 100.00

PART B
ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

**Use this Part to itemize all other contributions with an aggregate value from
\$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A)**

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF ANN FLOOD	From: <u>9/17/2024</u> To: <u>10/21/2024</u>

DATE				AMOUNT
Full Name of Contributor	MO	DAY	YEAR	\$ 200.00
THE GREAT AMERICAN REAL ESTATE CO.				
Mailing Address 178 EPPS STREET				
City WIND GAP	State	Zip Code (Plus 4)	9 3 2024	
	PA	18091		
Full Name of Contributor	MO	DAY	YEAR	\$ 100.00
DEPUE PROPERTY MGMT				
Mailing Address 1033 CONSTITUTION AVE				
City PEN ARGYL	State	Zip Code (Plus 4)	9 3 2024	
	PA	18072		
Full Name of Contributor	MO	DAY	YEAR	\$ 100.00
DEPUE PROPERTY MGMT				
Mailing Address 1033 CONSTITUTION AVE				
City PEN ARGYL	State	Zip Code (Plus 4)	9 10 2024	
	PA	18072		
Full Name of Contributor	MO	DAY	YEAR	\$ 125.00
MICHAEL SHAFER				
Mailing Address 5025 DRUMMOND CIR				
City CENTER VALLEY	State	Zip Code (Plus 4)	9 10 2024	
	PA	18034		
Full Name of Contributor	MO	DAY	YEAR	\$ 100.00
CRAIG DALLY				
Mailing Address 422 SCHOENECK AVE				
City NAZARETH	State	Zip Code (Plus 4)	9 10 2024	
	PA	18064		
Full Name of Contributor	MO	DAY	YEAR	\$ 250.00
FAUST CAPOBIANCO IV				
Mailing Address 3631 WESTWOOD DRIVE				
City EASTON	State	Zip Code (Plus 4)	9 16 2024	
	PA	18045		

Full Name of Contributor LEWIS D RONKA			MO	DAY	YEAR	\$ 250.00
Mailing Address CLEARFIELD ROAD			9	16	2024	
City NAZARETH	State PA	Zip Code (Plus 4) 18064				

Full Name of Contributor MATT & MARGIE FLOWER			MO	DAY	YEAR	\$ 100.00
Mailing Address 2648 W. SCENIC DR			10	5	2024	
City DANIELSVILLE	State PA	Zip Code (Plus 4) 18038				

Full Name of Contributor KERRY & JENNIFER FRANK			MO	DAY	YEAR	\$ 250.00
Mailing Address 1560 BUSHKILL CENTER RD			10	11	2024	
City BATH	State PA	Zip Code (Plus 4) 18014				

Full Name of Contributor LISA & GREG AMY			MO	DAY	YEAR	\$ 100.00
Mailing Address 413 CHERRY HILL RD			9	20	2024	
City NAZARETH	State PA	Zip Code (Plus 4) 18064				

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL

\$ 1,575.00

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate FRIENDS OF ANN FLOOD	Reporting Period From: <u>9/17/2024</u> To: <u>10/21/2024</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
WASTE MANAGEMENT EMPLOYEES BETTER GOVT FUND				9	10	2024	
Mailing Address701 PA AVE. NW SUITE 590							
CityWASHINGTON	StateDC	Zip Code (Plus 4)20004					
Full Name of Contributing Committee				MO	DAY	YEAR	\$450.00
PA AMERICAN WATER PAC				9	16	2024	
Mailing Address852 WESLEY DRIVE							
CityMECHANICSBURG	StatePA	Zip Code (Plus 4)17055					
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
THE PA INSURANCE PAC				9	10	2024	
Mailing Address409 N 2ND ST SUITE 202							
CityHARRISBURG	StatePA	Zip Code (Plus 4)17101					
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
PA REALTORS PAC							
Mailing Address500 N. 12TH ST							
CityLEMOYNE	StatePA	Zip Code (Plus 4)17043					
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
HIGHMARK PAC				9	24	2024	
Mailing Address1800 CENTER ST							
CityCAMP HILL	StatePA	Zip Code (Plus 4)17089					
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
CONSTELLATION ENERGY CORP (CEPAC)				9	24	2024	
Mailing Address250 MA AVE. NW STE 760							
CityWASHINGTON	StateDC	Zip Code (Plus 4)20001					

Full Name of Contributing Committee PA COMMITTEE FOR AFFORDABLE HOUSING			MO	DAY	YEAR	\$ 500.00
Mailing Address 205 GRANDVIEW AVE. STE 207			9	25	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011				
Full Name of Contributing Committee PCG - STATE			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 645 HAMILTON ST SUITE 900			9	28	2024	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18101				
Full Name of Contributing Committee WOJDAK FOR THE COMMONWEALTH PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 30 N. THIRD ST SUITE 950			9	30	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee CPA PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 500 N. 3R ST. SUITE 200A			10	5	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee CITIZENS FOR GROVE			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1854 ASH COMBE DR			10	10	2024	
City DOVER	State PA	Zip Code (Plus 4) 17315				
Full Name of Contributing Committee ESSENTIAL UTILITIES INC. PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 762 W. LANCASTER AVE						
City BRYN MAWR	State PA	Zip Code (Plus 4) 19010				
Full Name of Contributing Committee CAPITAL BLUE PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 60710			9	20	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17106				

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL

\$ 7,950.00

PART D
ALL OTHER CONTRIBUTIONS
OVER \$250.00

**Use this Part to itemize all other contributions with an aggregate value of
over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C.)**

Name of Filing Committee or Candidate FRIENDS OF ANN FLOOD	Reporting Period From: <u>9/17/2024</u> To: <u>10/21/2024</u>
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				DATE	AMOUNT		
Full Name of Contributor ROBERT S. TAYLOR ESQ.				MO	DAY	YEAR	\$ 300.00
Mailing Address PO BOX 6349				8	19	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17112					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		
Full Name of Contributor CHARLES V BALTIC III				MO	DAY	YEAR	\$ 500.00
Mailing Address 971 LAUREL HILL RD				9	10	2024	
City MOUNT BETHEL	State PA	Zip Code (Plus 4) 18343					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		
Full Name of Contributor FRANK IMPECIATI				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 331 LUCCA DRIVE				9	10	2024	
City NAZARETH	State PA	Zip Code (Plus 4) 18064					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		
Full Name of Contributor JM ULIANA & ASSOC, LLC				MO	DAY	YEAR	\$ 500.00
Mailing Address 2571 BAGLYOS CIRCLE B20				10	2	2024	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18020					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

Full Name of Contributor CHARLES & IVANA BALTIC			MO	DAY	YEAR	\$ 500.00
Mailing Address 971 LAUREL HILL RD			9	20	2024	
City MT. BETHEL	State PA	Zip Code (Plus 4) 18343				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State		Zip Code (Plus 4)	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 2,800.00

PART E OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Reporting Period
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS
DURING THE REPORTING PERIOD.**

Detailed Summary Page

Name of Filing Committee or Candidate		Reporting Period	
FRIENDS OF ANN FLOOD		From: <u>9/17/2024</u> To: <u>10/21/2024</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 101.48
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 101.48

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate FRIENDS OF ANN FLOOD	Reporting Period From: <u>9/17/2024</u> To: <u>10/21/2024</u>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	
MELANIE WHITELEATHER						\$ 101.48
Mailing Address 4208 GLORIA DRIVE			9	9	2024	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017				
Description of Contribution: PRINTED INVITATIONS & ENVELOPES						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 101.48

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF ANN FLOOD	From <u>9/17/2024</u> To: <u>10/21/2024</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
ANN FLOOD				
Mailing Address 2157 WEST DELL ROAD	6	5	2024	\$ 56.44
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CELL PHONE - JUNE	
To Whom Paid	MO	DAY	YEAR	
H R C C				
Mailing Address PO BOX 556	6	5	2024	\$ 500.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure ANNUAL ROUND UP EVENT	
To Whom Paid	MO	DAY	YEAR	
ANN FLOOD				
Mailing Address 2157 WEST DELL ROAD	7	1	2024	\$ 56.44
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CELL PHONE - JULY	
To Whom Paid	MO	DAY	YEAR	
ANN FLOOD				
Mailing Address 2157 WEST DELL ROAD	8	1	2024	\$ 56.44
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CELL PHONE - AUGUST	
To Whom Paid	MO	DAY	YEAR	
H R C C				
Mailing Address PO BOX 556	8	19	2024	\$ 1,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure DONATION	
To Whom Paid	MO	DAY	YEAR	
ANN FLOOD				
Mailing Address 2157 WEST DELL ROAD	8	20	2024	\$ 73.00
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure STAMPS FOR FUNDRAISER	

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 56.44
Mailing Address 2157 WEST DELL ROAD			9	1	2024	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CELL PHONE - SEPTEMBER			

To Whom Paid H R C C			MO	DAY	YEAR	\$ 1,000.00
Mailing Address PO BOX 556			9	5	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure SAUCON VALLEY COUNTRY CLUB FUNDRAISER			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 404.00
Mailing Address 2157 WEST DELL ROAD			9	5	2024	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CANDY FOR PARADE			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 42.40
Mailing Address 2157 WEST DELL ROAD			9	11	2024	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CAMPAIGN PINS			

To Whom Paid KEMMERER GRAPHICS			MO	DAY	YEAR	\$ 1,590.00
Mailing Address PO BOX 131			9	16	2024	
City WIND GAP	State PA	Zip Code (Plus 4) 18091	Description of Expenditure CAMPAIGN SIGNS			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 52.99
Mailing Address 2157 WEST DELL ROAD			9	24	2024	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure HELIUM			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 942.18
Mailing Address 2157 WEST DELL ROAD			9	24	2024	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure FUNDRAISER - WANDERLUST			

To Whom Paid H R C C			MO	DAY	YEAR	\$ 343.00
Mailing Address 500 N. THIRD STREET			10	12	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure INVITATIONS			

To Whom Paid OLD TOWN DELI			MO	DAY	YEAR	\$ 59.63
Mailing Address 512 NORTH 3RD STREET			10	12	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure FUNDRAISER			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 73.00
Mailing Address 2157 WEST DELL ROAD			10	12	2024	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure STAMPS			

To Whom Paid H R C C			MO	DAY	YEAR	\$ 9,200.00
Mailing Address 500 N. THIRD STREET			10	17	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure PRINTED MAILER/POSTAGE			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 33.76
Mailing Address 2157 WEST DELL ROAD			10	19	2024	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure DINNER FOR VOLUNTEER			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 242.40
Mailing Address 2157 WEST DELL ROAD			10	19	2024	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CANDY FOR PARADE			

To Whom Paid H R C C			MO	DAY	YEAR	\$ 15,000.00
Mailing Address 500 N. THIRD STREET			10	9	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure DONATION			

To Whom Paid ANN FLOOD			MO	DAY	YEAR	\$ 56.44
Mailing Address 2157 WEST DELL ROAD			10	1	2024	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CELL PHONE - OCTOBER			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 30,838.56

