Campaign Finance Report

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

Filer Identificati Number :	on 20	220295			Rep File			CANDI	DATE		СОМ	ITTEE	√	LOBI	BYIST		
Name of Filing C	Committee, Cand	idate or L	obbyist:	i	FRIE	ND:	S OF	ANNA TH	IOMAS								
Street Address:	3325 DARII	N RD															
City:	BETHLEHEM -	l						State:	PA			Zip Cod	de: 18	.8020			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY F PRIMARY	PRE-	2		30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	•	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5	j.	30 DA ELECT	• •	POST-	6.		TERMINA REPORT		Yes	No	•	
report type)	ANNUAL REPOR	7. X	Year 2024					NG METHO				PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candi	late:	•					DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Count Code	y
								МО	DAY	YE	AR	137	STH	DEN	1	48	
REPRESENTATI	VE IN THE GEN	ERAL ASS	SEMBLY					11		5	2024		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
•	Receipts and	МО	DAY Y	EAR				МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY		
Expenditures	from:		11 26	20)24	T	0	12		31	2024						
A. Amount Bro	ught Forward Fr	om Last R	eport				\$	-		6,3	32.72						
B. Total Moneta	ary Contribution	s And Rec	eipts (From S	che	dule :	I)	\$			1	40.77						
C. Total Funds	Available (Sum	Of Lines A	and B)				\$			6,4	173.49						
D. Total Expend	ditures (From S	hedule II	I)				\$			4	98.49						
E. Ending Cash	Balance (Subtra	act Line D	From Line C)				\$			5,9	75.00]					
F. Value Of In-	Kind Contribution	ns Receiv	ed (From Sche	edul	e II))	\$			1,1	78.87						
G. Unpaid Debt	ts And Obligation	ns (From	Schedule IV)				\$				0.00						
			Д	\FF	IDA	VI	T SE	CTION									
PART I - If this is	s a Committee r	eport, trea	ısurer sign hei	re. I	f this	s is	a Can	ndidate r	eport, o	candi	date sig	jn here.					
I swear (or affirm) correct and comple		ncluding th	e attached sched	lules	filed	on	paper (or by elect	ronic m	edium	, are to t	the best o	f my knov	wledge	and belie	ef , tru	e.
Sworn to and subs	cribed before me t day of	his	20							S	ignature	of Perso	n Submit	ting Rep	ort		-
	Signa	ture					-					Prin	ted Name	•			-
My Commission Ex	cpires						_					Ema	il				
	МО	D	AY	YR					Are	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	authorized Co	mm	ittee	e, Ca	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge and belief	this	politi	cal	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L	1333	,
Sworn to and subsc		is	20								s	ignature (of Candid	ate			-
	day of						-					Printe	ed Name				-
	Signatur	e					-					Ema	iı				-
My Commission Exp	oires											Ema					
	МО	D	AY	YR			-		Area	Code		D	aytime T	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF ANNA THOMAS	From:	11/26/20	<u>24</u> To:	12/31/2024
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J Period	(1)	\$	140.77
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	g Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	j Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	140.77

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	e or Candidate		Re	porting I	Period			
			Fro	om:		To	1	
		·			DATE			AMOUNT
Full Name of Contributing (Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					

PAGE TOTAL
0.00

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

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.

Name of Filing Comr	nittee or Candidate	R	Reporting F	Period			
		F	rom:		To	o:	
		I		DATE			AMOUNT
Full Name of Contribut	or		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
-							
							PAGE TOTAL

5/9/2025 2:34:05 PM

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			Reporting	Period					
			From:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				МО	DAY	YEAR		0	00
Mailing Address							+	0.	00
City	State	Zip Code	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.0	0

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			Rep	orting Pe	riod			
			Fror	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	on 3.		:	\$	PAGE TOTAL 0.00

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 of	or Candidate		Report	ing Peri	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)				
Receipt Description	•	•					
Enter Grand Total of Part I	on Schodulo I. Dotailed	Summary Dage	Soction	4			PAGE TOTAL
cincer Granu Total Of Part I	on Schedule 1, Detalled	Summary Page,	Section	4.			\$ 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 Per	iod							
FRIENDS OF ANNA THOMAS	From:	<u>11/26/2024</u> To:	12/31/2024						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)									
TOTAL for the Reporting Pe	eriod (2)	\$	50.60						
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)									
TOTAL for the Reporting Pe	eriod (3)	\$	1,128.27						
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,	•	\$	1,178.87						

50.60

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Can	didate	ı	Reporting Period					
FRIENDS OF ANNA THOMAS			From:	11/	<u>/26/2024</u>	To: 12/31/2024		
		•		DATE			AMOUNT	
Full Name of Contributor PA STANDS UP STATE PAC			МО	DAY	YEAR		F0.60	
Mailing Address PO BOX 3199)5		12	2	2024	\$	50.60	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191040695			2024			
Description of Contribution: S	TAFF TIME	†	-	•				
Enter Grand Total of Part F or Section 2.	Schedule II, In-Ki	nd Contributions Detail	ed Sumi	mary Pag	je,		PAGE TOTAL	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candida	ate			Re	portin	ıg Po	eriod			
FRIENDS OF ANNA THOMAS				Fro	om:		11/26/202	<u>24</u> To:	4 To: <u>12/31/2024</u>	
							DATE			AMOUNT
Full Name of Contributor PENNSYLVANIA WORKING FAMILIE	S PARTY				мо		DAY	YEAR		
Mailing Address 276 S 60TH ST					1	12	8	2024	\$	819.27
City PHILADELPHIA	State PA		Zip Code(Plus 4) 191393847							
Employer of Contributor N/A	•				Оссі	upat	tion N _/	/A		
Employer Mailing Address/Principal Place of Business			ty	Stat	e Z	Zip C	Code(Plus 4)	Description of Contrib		
Full Name of Contributor RUN FOR SOMETHING					мо		DAY	YEAR		
Mailing Address PO BOX 33079					1	12	5	2024	\$	309.00
City WASHINGTON	State DC		Zip Code(Plus 4) 200330079							
Employer of Contributor N/A			•		Оссі	upat	tion N _/	/A		
Employer Mailing Address/Principal Place of Business City				Stat	e Z	Zip C	Code(Plus 4)	CONSU	JLTING	of Contribution G SERVICES, DMOTION
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed						PAGE TOTAL				
Summary Page, Section 3.							1,128.27			

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting F	Period		
FRIENDS OF ANNA THOMAS	From	11/26/2024	То:	12/31/2024

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
CANVA			140		ILAK		
Mailing Address 110 KIPPAX ST			12	27	2024	\$	15.00
City SURRY HILLS	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		2010	GRAPHI	C DESIGN	SUBSCR	IPTION	
To Whom Paid			МО	DAY	YEAR		
BP			1.10		I Z / LIK		
Mailing Address LOPATCONG BP 11	.85		12	5	2024	\$	32.01
City PHILLIPSBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	NJ	08865	MILEAG	Ε			
To Whom Paid			мо	DAY	YEAR		
PRESSABLE INC			1.10		12/11		
Mailing Address 110 E HOUSTON S	т		11	27	2024	\$	25.00
City SAN ANTONIO	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	TX	782052990	SUBSC	RIPTION			
To Whom Paid			МО	DAY	YEAR		
STRIPE			140		ILAK		
Mailing Address 354 OYSTER POIN	T BLVD		12	31	2024	\$	7.16
City SOUTH SAN FRANCISCO	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	CA	940801912	STRIPE	MERCHAN	T FEE		
To Whom Paid			мо	DAY	YEAR		
ACTBLUE, LLC			1.10		12/11		
Mailing Address 366 SUMMER ST			12	31	2024	\$	2.27
City SOMERVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	МА	021443132	ACTBLU	IE FEES			
To Whom Paid			мо	DAY	YEAR		
BELLA BEAN COFFE SHOP			1.10		LAK		
Mailing Address 6 S BROAD ST STE	101		11	27	2024	\$	14.40
City NAZARETH State Zip Code (Plus 4)) Description of Expenditure					
	PA	180642197	FOOD				

							7.62 12
To Whom Paid			МО	DAY	YEAR		
NGP VAN				DAT	TEAR		
Mailing Address 655 15TH ST NW STE 650			12	3	2024	\$	339.20
City WASHINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	DC	200055738	SUBSCRIPTION				
To Whom Paid			мо	DAY	YEAR		
UNITED STATES POSTAL SERVICE			MO	DAT	TEAR		
Mailing Address 3232 EASTON AVE			11	26	2024	\$	10.45
City BETHLEHEM	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	180204258	PRIORITY MAIL				
To Whom Paid AUTOMATTIC INC.			мо	DAY	YEAR		
Mailing Address 60 29TH ST # 343			12	3	2024	\$	13.00
City SAN FRANCISCO N	State	Zip Code (Plus 4)	Description of Expenditure				
	CA	941104929	EMAIL SUBSCRIPTION				
To Whom Paid PRESSABLE INC			мо	DAY	YEAR		
Mailing Address 110 E HOUSTON ST			12	30	2024	\$	25.00
City SAN ANTONIO	State	Zip Code (Plus 4)	Description of Expenditure				
	TX	782052990	SUBSCRIPTION				
To Whom Paid CANVA			мо	DAY	YEAR		
Mailing Address 110 KIPPAX ST			11	26	2024	\$	15.00
City SURRY HILLS	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		2010	GRAPHIC DESIGN SUBSCRI			IPTION	
							PAGE TOTAL
Enter Grand Total of Expenditure	es on Page 1, Re	eport Cover Page, Item D).			\$	498.49