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 2011	090				port		CANE	DID	ATE		СОММ	IITTEE	✓	LOBE	SYIST		
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		FRIE	END	S FOF	R JUDY	SCH	HWAN	IK							
Street Address:	P O BOX 1242	24																
City:	READING							State:	P	PA			Zip Cod	le: 19	9612			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	/ PRE	-	2.	30 DA		РО	ST-	3. X		AMENDM REPORT?		Yes	No		\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	/ PRE	≣-	5.	30 DA		РО	ST-	6. TERMINATION Yes REPORT?					No	•	\
report type)	ANNUAL REPORT	7.	Year 2014					NG METI CHECK					PAPER		/	DISKE	TTE	
Name of Office S	- Sought by Candida	te:						DATE	OF	ELEC	TIO	N	District Number	Office Code	Par	ty Code	Coun	
								МО	D	DAY	YE	AR			•			
								1	1		4	2014		(SEE IN	STRUCTIO	ONS FOR (CODES)
	Receipts and	МО	DAY	YEAR	ł			МО	C	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		5 6	2	014	Т	0		6		9	2014						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				63,3	356.30						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	ı)	\$				3,8	320.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				67,1	76.30						
D. Total Expend	ditures (From Sch	edule II	I)				\$				13,3	01.14						
E. Ending Cash	Balance (Subtract	t Line D	From Line (E)			\$				53,8	75.16						
F. Value Of In-	Kind Contributions	Receive	ed (From So	hedu	le II	()	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$	0.00										
				AFF	IDA	۱۷۶	T SE	CTION	J									
	s a Committee rep	-	_						-	-		_						
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sch	edule	s file	d on	paper	or by ele	ctro	nic me	dium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ue.
Sworn to and subs	cribed before me this day of	i	20						_		s	ignature	of Perso	1 Submit	ting Rep	ort		_
	Signatu	ra					- -		-				Prin	ted Name	•			-
My Commission Ex	_								_				Emai	il				-
	мо	D	AY	YR						Are	a Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	didate's	authorized	Comn	nitte	e, C	andid	ate sha	II si	gn he	re.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and belie	ef this	polit	tical	comm	ittee has	not	violate	ed an	y provisi	ons of the	e act of J	une 3,19	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this								-			Si	gnature o	f Candid	ate			-
	day of 						_		_				Printe	d Name				-
	Signature						_		_									_
My Commission Exp	_												Ema	il				
	МО	D	AY	YR	l		-		-	Area C	Code		Da	ytime T	elephon	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

-				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS FOR JUDY SCHWANK	From:	<u>5/6/201</u> 4	<u>4</u> То:	<u>6/9/2014</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	20.00
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	Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	3,300.00
All Other Contributions (Part D)			\$	500.00
TOTAL for the Reporting	Period	(3)	\$	3,800.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	3,820.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	Name of Filing Committee or Candidate			porting				
		From:			То	:		
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

PAGE TOTAL
\$ 0.00

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 From: To:				
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	1					

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

PAGE TOTAL \$0.00

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	me of Filing Committee or Candidate Ro							
FRIENDS FOR JUDY SCHWANK			From:	<u>5/</u>	6/2014	То:	6/9/2014	
				DA	TE		AMOUNT	
Full Name of Contributing Committee PENNSYLVANIA RURAL ELECTRIC ASSO	OC .			МО	DAY	YEAR		
Mailing Address PO BOX 1266							\$ 500	0.00
City HARRISBURG	State PA	Zip Code 17108	e (Plus 4)	5	18	2014		
Full Name of Contributing Committee ARIPPA				МО	DAY	YEAR		
Mailing Address 2015 CHESTNUT STE	State PA	Zip Code 17011	e (Plus 4)	5	27	2014	\$ 300	0.00
Full Name of Contributing Committee PA AUTOMOTIVE ASSOCIATION		-		МО	DAY	YEAR		
Mailing Address 1925 N FRONT ST P City HARRISBURG	O BOX 2955 State PA	Zip Code 17105	e (Plus 4)	5	27	2014	\$ 500	0.00
Full Name of Contributing Committee PENNSYLVANIA SOCIETY OF ANESTHES	SIOLOGIST			МО	DAY	YEAR		
Mailing Address 50 S PROVIDENCE R City MEDIA	State PA	Zip Code 19063	e (Plus 4)	5	27	2014	\$ 500	0.00
Full Name of Contributing Committee BIKEPAC				МО	DAY	YEAR		
Mailing Address PO BOX 564							\$ 500	0.00
City MECHANICSBURG	State PA	Zip Code 17055	e (Plus 4)	6	4	2014		

Full Name of Contributing Commit PA MEDICAL PAC	МО	DAY	YEAR			
Mailing Address PO BOX 8820	6			\$ 500.00		
City HARRISBURG State PA 2ip Code (Plus 4) 171058820				4	2014	
Full Name of Contributing Commit	ttee	<u>'</u>	МО	DAY	YEAR	
_		1	MO	DAY 4	YEAR 2014	\$ 500.00

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

PAGE TOTAL \$ 3,300.00

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	-				orting Pe	riod			
FRIENDS FOR JUDY SCHWANK				Fror	n:	<u>5/6/2</u>	<u>014</u> То	To: 6/9/2014	
					D/	ATE		Α	MOUNT
Full Name of Contributor PPL-PEOPLE FOR GOOD GOVERNMENT					мо	DAY	YEAR		
Mailing 2 NORTH 9TH STREET Address 2 To Code (Plus 4)							2014	\$	500.00
City ALLENTOWN	State Zip Code (Plus 4)		4)	6	4	2014			
	PA	18	3101						
Employer Name		•			Occupat	ion		•	
Employer Mailing Address/Principal Plac Business	ce of		City		•	State		Zip Cod	le (Plus 4)
Enter Grand Total of Part C on Scho	edule I, Detai	led Sumn	mary Page,	Section	on 3.		4		500.00

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 or	Candidate		Report	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	-	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z</i>	Section				\$	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 FOR JUDY SCHWANK	From:	<u>5/6/2014</u> To:	6/9/2014
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidat	:e		Reporting	g Period				
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL	
Section 2.	iedule II, III-KII	ia Contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	me of Filing Committee or Candidate				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Parastina Pariad					
Name of Filing Committee or Candidate FRIENDS FOR JUDY SCHWANK			Reporting Period					
			From <u>5/6/2014</u> To:				<u>6/9/2014</u>	
			•		DATE			AMOUNT
To Whom Paid BERKS ENCORE			МО	DAY	YEAR			
Mailing Address 40 NORTH 9TH STREET			5	20	2014	\$	125.00	
City READING	State	z	(Plus 4)	Description of Expenditure BOOTH FEE				
	PA		19601					
To Whom Paid UNITED LABOR COUNCIL OF READING AND BERKS COUNTY			МО	DAY	YEAR			
Mailing Address 116 NORTH FIFTH STREET			5	20	2014	\$	50.00	
City READING	State PA	1	lip Code (Plus 4) 19601	Description of Expenditure HOLE SPONSOR				
To Whom Paid CENTRE PARK HISTORIC DISTRICT			МО	DAY	YEAR			
Mailing Address 705-707 N 5TH ST			5	28	2014	\$	46.00	
City READING	State	Z	(ip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA		19601	FUNDRAISER				
To Whom Paid DEMOCRATIC STATE SENATE CAMPAIGN COMMITTEE			мо	DAY	YEAR			
Mailing Address P.O. BOX 3792			5	29	2014	\$	12,000.00	
City HARRISBURG	State PA	1	Cip Code (Plus 4) 17105	Descrip ASSESN	I Ition of Exp MENT	enditure		

GREATER READING MENTAL HEALTH A	LLIANCE		МО	DAY	YEAR		
Mailing Address 1234 PENN AVE			6	1	2014	\$	50.00
City WYOMISSING	State PA	Zip Code (Plus 4) 19610	Description of Expenditure SPONSORSHIP				

							- 13
To Whom Paid BERKS COUNTY IRISH AMERICAN FRATERNAL ORGANIZATION				DAY	YEAR		
Mailing Address PO BOX 1	5102		6	4	2014	\$	100.00
City READING	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19612	CELTIC OYSTER FEST				
To Whom Paid STARS FOR OUR TROOPS			мо	DAY	YEAR		
Mailing Address PO BOX 3	01		6	4	2014	\$	50.00
City TROY	State NY	Zip Code (Plus 4) 12182	Description of Expenditure STARS/VETS CERTS				
To Whom Paid WILLIAM WAGNER			МО	DAY	YEAR		
Mailing Address 5104 PENN AVE			6	5	2014	\$	38.00
City WERNERSVILLE	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	19565	HISTORICAL BOOK				
To Whom Paid BCIU		·	МО	DAY	YEAR		
Mailing Address 1111 COMMONS BLVD PO BOX 16050			6	7	2014	\$	842.14
City READING	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	19612	TRANSPORTATION				
Fatan Canada III da	- dia						PAGE TOTAL
Enter Grand Total of Expe	naitures on Page 1, Re	port Cover Page, Item D	-			\$	13,301.14