Campaign Finance Report

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

Filer Identificat	tion	20073	306			Repor Filed I	-	CANDI	DATE	COM	IMITTEE	✓	LOBI	BYIST	
Name of Filing	Committee	, Candida	ate or Lo	bbyist:			-	FRIENDS	OF FOR	SENATE					
Street Address	:														
City:	WILLI	AMSPOR	Т					State:	PA		Zip Co	de: 17	701-0	000	
TYPE OF REPORT	6TH TUES			2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIM		POST-	3.	AMENDI REPORT		Yes	No	· 🗸
(place X to the right of	6TH TUES			2ND FRIDA ELECTION	y pre	E- 5.	30 D ELEC	AY F CTION	POST-	6.	TERMIN REPORT		Yes	No	° √
report type)	ANNUAL	REPORT	7. X	Year 2014				NG METHO CHECK O			PAPER		\checkmark	DISK	ETTE
Name of Office	Sought by	Candidat	e:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
CENATOR IN T								мо	DAY	YEAR	23	STS	REP	,	41
SENATOR IN 1	THE GENER	AL ASSE	MBLY					11		4 201	4	(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		and	мо	DAY	YEAR	2		мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY	
Expenditure	s from:		1	1 25	2	014 T	0	12	3	1 201	4				
A. Amount Bro	ought Forw	ard From	ı Last Re	eport			\$	5		38,186.7	5				
B. Total Mone	B. Total Monetary Contributions And Receipts (From Schedule I						\$	5	4,200.00						
C. Total Funds	C. Total Funds Available (Sum Of Lines A and B)						4	5		42,386.70	5				
D. Total Expe	D. Total Expenditures (From Schedule III)						4	5		1,704.04	ŧ				
E. Ending Cas	h Balance (Subtract	Line D F	rom Line	C)		4	5		40,682.72	2				
F. Value Of In	-Kind Cont	ributions	Receive	d (From S	chedu	le II)	4	5		0.00)				
G. Unpaid Deb	ots And Obl	ligations	(From S	chedule IV	')			5		57,829.00)				
					AFF	IDAVI	T SE	ECTION							
PART I - If this		-	•	-					• •		-				
I swear (or affirn correct and comp		eport, inclu	laing the	attached sci	neaule	s filed on	paper	or by elect	ronic me	dium, are to	o the best o	от ту кпоч	viedge	and bei	ler , true
Sworn to and sub	scribed befo day of	ore me this		20						Signatu	re of Perso	on Submitt	ing Rep	oort	
		Signatur	e				_				Prir	nted Name			
My Commission I	Expires	_					_				Ema	ail			
	r	мо	DA	Y	YR				Are	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	s a report	of a cand	idate's a	authorized	Comn	nittee, C	Candio	date shall	sign he	re.					
I swear (or affirm No 320) as amend		e best of m	y knowle	dge and beli	ef this	olitical	com	nittee has n	ot violat	ed any prov	isions of th	ie act of Ju	ine 3,1	937 (P.I	L. 1333,
Sworn to and subs	cribed before day of	e me this		20							Signature	of Candida	ite		
							_				Print	ed Name			
My Commission Ex		ignature					_				Ema	ail			
	_	мо	DA	Y	YR	2	-		Area C	Code	D	aytime Te	elephon	e Numi	per

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** YAW, GENE FRIENDS OF FOR SENATE From: <u>11/25/2014</u> **To:** 12/31/2014 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 1,400.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 1,400.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 1,000.00 1,800.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 2,800.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 4,200.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Candidat	Name of Filing Committee or Candidate				Period						
				:	То:						
		DATE AMOUNT									
Full Name of Contributing Committee	м	10	DAY	YEAR							
Mailing Address							\$	0.00			
City	State	Zip Code (Plus 4	•)								
								PAGE TOTAL			
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								0.00			

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										
Name of Filing Committee or Candio YAW, GENE FRIENDS OF FOR SEN			From:	-						
			From.			2014 To	,. 	<u>12/31/2014</u>		
Full Name of Contributor					DATE			AMOUNT		
Full Name of Contributor Dan Glunk				0	DAY	YEAR				
Mailing Address							\$	150.00		
City Williamsport	State	Zip Code (Plus 4)	11	29	2014				
	PA	17701								
Full Name of Contributor			м	o	DAY	YEAR				
Jan Fisher Mailing Address							\$	150.00		
City Wellsboro	State	Zip Code (Plus 4)	11	29	2014	4	150.00		
Full Name of Contributor					DAY	YEAR				
Kenneth B Young			M	•						
Mailing Address		1					\$	250.00		
City Williamsport	State	Zip Code (Plus 4)	11	29	2014				
	PA	17701	_	_						
Full Name of Contributor			м	ο	DAY	YEAR				
Charles Santangelo			_							
Mailing Address City Williamsport	State	Zip Code (Plus 4	<u>,</u>	11	29	2014	\$	150.00		
	PA	17701	, 							
Full Name of Contributor	•	•	м	0	DAY	YEAR				
Robert E Kane										
Mailing Address					20	2014	\$	150.00		
City Williamsport	State PA	Zip Code (Plus 4 17701)	11	29	2014				
Full Name of Contributor				_						
Ronald Reynolds			M	0	DAY	YEAR				
Mailing Address		_					\$	150.00		
City Montoursville	State	Zip Code (Plus 4)	11	29	2014				
	PA	17754		_						
Full Name of Contributor			м	0	DAY	YEAR				
Staci Covey										
City Athens	Mailing Address City Athens State Zip Code (Plus 4)				29	2014	\$	150.00		
	PA	18810		11						

Full Na	ll Name of Contributor			мо	DAY	YEAR		
Richard	l Bennett				DAT	ILAK		
Mailing	Address						\$	150.00
City	Sayre	State	Zip Code (Plus 4)	11	29	2014		
		PA	18840					
Full Na	Full Name of Contributor			мо	DAY	YEAR		
Carolyr	n Doolittle				DAT			
Mailing	Address						\$	100.00
City	Friendsville	State	Zip Code (Plus 4)	11	29	2014		
		PA	18818					
								PAGE TOTAL
En	Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							1,400.00

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 (ame of Filing Committee or Candidate				g Period					
YAW, GENE FRIENDS OF FOR	SENATE		From:	<u>11/2</u>	25/2014	То:	<u>17</u>	2/31/2014		
				D	ATE		A	MOUNT		
Full Name of Contributing Con	nmittee			мо	DAY	YEAR				
НАРАС							\$	500.00		
Mailing Address					29	2014				
City Harrisburg	State	Zip C	Zip Code (Plus 4)							
	PA	1710	15							
Full Name of Contributing Con	nmittee			мо	DAY	YEAR				
NFG PAPAC (NATIONAL FUEL	GAS)						\$	500.00		
Mailing Address				12	4	2014				
City ERIE	State	Zip C	ode (Plus 4)	12		2014				
	PA	1650)1							
								PAGE TOTAL		
Enter Grand Total of Part C	C on Schedule I, Det	tailed Summary	Page, Sectio	on 3.			\$	1,000.00		

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	me of Filing Committee or Candidate				Rep	orting Pe	riod					
YAW, GENE FRIENDS OF	FOR SENATE				Fror	n:	<u>11/25/2</u>	<u>014</u> 1	Го:	-	12/31/2014	
						DA	ATE			AM	OUNT	
Full Name of Contributor						мо	DAY	YEAF	,	<i>*</i>	F00.00	
Steve Johnson							DAI		•	\$	500.00	
Mailing Address						11	29	201	4			
City Cogan Station		State	Zi	p Code (Plus	4)							
		PA	l 17	728								
Employer Name Susque	hanna Health					Occupat	tion	on President and CEO				
Employer Mailing Address	/Principal Plac	e of Business		City			State		Z	Zip Code	(Plus 4)	
				Williamspo	ort		PA		1	17701		
Full Name of Contributor						мо	DAY	YEAF	,	+		
William McCauley					МО	DAT		`	\$	300.00		
Mailing Address				11	29	201	4					
City Williamsport		State	Zi	p Code (Plus	4)		29					
		PA	l 17	701								
Employer Name Susque	hanna Health					Occupat	tion	Physic	ian	/EVP/CM	10	
Employer Mailing Address	/Principal Plac	e of Business		City			State		Z	Zip Code	(Plus 4)	
				Williamspo	ort		PA			17701		
Full Name of Contributor												
Michael O'Keefe						мо	DAY	YEAF	2	\$	1,000.00	
Mailing Address							20	201				
City Lewisburg		State	Zi	p Code (Plus	4)	11	29	201	4			
		PA	₁₇	737								
Employer Name Evangel	lical Communit	y Hosp				Occupat	ion	Hospit	al A	Admin Pr	res/CEO	
Employer Mailing Address/Principal Place of Business City					State		-		(Plus 4)			
				Lewisburg			PA			17737		
								Γ		PA	GE TOTAL	
Enter Grand Total of Pa	nter Grand Total of Part C on Schedule I, Detailed Summary Page, Sect				Sectio	on 3.			¢		1 000 00	
									\$		1,800.00	

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 Candidat	e		Report	orting Period					
			From:		То:				
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description						•	-		
			o					PAGE TO	TAL
Enter Grand Total of Part E on Sche	duie I, Detailed	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 Perio	d	
YAW, GENE FRIENDS OF FOR SENATE	From:	<u>11/25/2014</u> то:	<u>12/31/2014</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate			Reporting 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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	e,		PAGE TOTA	<u>، ۱</u>	
						\$		0.00	

PAGE 11

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate			porting l	orting Period				
			Fro	om:		То:			
					DATE		AMOUNT		
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$ 0.00		
City	State	Zip Code(Plus 4)						
Employer of Contributor	•	•		Occupa	ation		·		
Employer Mailing Address/Principal Plac	e of Business	City	Stat	e Zip	Code(Plus 4)	Descri	ption of Contribution		
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kin	d Contributions I	etaile	ed			PAGE TOTAL 0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committe	ee or Candidate			Reporti	ng Period				
YAW, GENE FRIENDS O)F FOR SENATE			From	<u>11/2</u>	<u>5/2014</u>	То:	<u>12/31/2014</u>	
					DATE			AMOUNT	
To Whom Paid				мо	DAY	YEAR			
Gene Yaw									
Mailing Address				12 23 2014 \$ 1,069.2					
City Montoursville		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
PA 17754					reimburse stamps, christmas gifts and cards, storage unit rental fee				
To Whom Paid	o Whom Paid				DAY	YEAR			
Gene Yaw				мо	D A.	1 SAN			
Mailing Address				12	4	2014	\$	625.00	
City Montoursville		State	Zip Code (Plus 4)	Description of Expenditure					
		PA	17754	reimbur	se for gifts	5			
To Whom Paid				мо	DAY	YEAR			
USPS									
Mailing Address				12	4	2014	\$	9.80	
City Williamsport State Zip Code (Plus 4)			Descrip	tion of Exp	enditure	•			
		PA	17701	stamps					
	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D							PAGE TOTAL	
Enter Grand Total of E	Expenditures o	n Page 1, Report (Cover Page, Item I).			\$	1,704.04	

SCHEDULE IV STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate				rting Period					
YAW, GENE FRIENDS OF FOR SENATE			From:	<u>11</u>	<u>/25/2014</u>	/31/2014				
					DATE			standing Ince of Debt		
Name of Creditor Gene Yaw					DAY	YEAR				
							-	F7 000 00		
Mailing Address				12	31	2014	\$	57,829.00		
City Montoursville	State	Zip Code (P	Plus 4)	Descrip	tion of Deb	t				
	РА	17754		LOAN B	ALANCE C	ARRIED	FORWA	ARD		
								PAGE TOTAL		
Enter Grand Total of Unpaid Deb	ge, Item	G.			\$	57,829.00				