Campaign Finance Report

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

Filer Identification 2008329 Number :					Rep File			CANDI	DATE		СОМ	4ITTEE	LOBBYIST				
Name of Filing C	Committee, Can	didate or L	obbyist:	,	LAW	/REN	NCE, J	OHN FR	ENDS	OF							
Street Address:																	
City:	WEST GRO	VE						State:	PA			Zip Cod	ie: 19	390			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE- PRIMARY 2. 30 DAY PRIMAR					POST- 3.			AMENDM REPORT		Yes	No			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					30 DA ELECT		POST- 6.			TERMINA REPORT		Yes	No		/
report type)	ANNUAL REPO	PRT 7. X	Year 2014					IG METH				PAPER DISKETTE				TTE	
Name of Office S	- Sought by Cand	idate:			_			DATE C	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YI	AR	13	STH	REP	1	15	
REPRESENTATI	VE IN THE GE	NERAL ASS	EMBLY					11		4	2014		(SEE IN	STRUCTI	ONS FOR C	ODES)	1
Summary of		МО	DAY	/EAR			'	МО	DAY	YI	EAR	FO	R OFFI	E USE	ONLY		
Expenditures	s from:		11 25	20	014	Т	0	12		31	2014						
A. Amount Bro	ught Forward F	rom Last R	leport				\$			6,9	907.06						
B. Total Moneta	ary Contributio	ns And Red	eipts (From S	Sche	dule	I)	\$			2	265.00						
C. Total Funds Available (Sum Of Lines A and B)							\$			7,:	172.06						
D. Total Expenditures (From Schedule III)						\$			3,7	759.39							
E. Ending Cash Balance (Subtract Line D From Line C)						\$			3,4	12.67							
F. Value Of In-	Kind Contribut	ons Receiv	ed (From Sch	nedul	le II))	\$				0.00						
G. Unpaid Debt	s And Obligation	ons (From	Schedule IV)				\$				0.00			'			
				AFF	IDA	١٧٧	T SE	CTION									
PART I - If this is	s a Committee	report, trea	surer sign he	ere. I	if thi	is is	a Can	didate r	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, ete.	including the	e attached sche	dules	filed	d on	paper o	or by elect	ronic m	edium	, are to t	he best o	f my knov	wledge	and belie	ef , tru	ie'
Sworn to and subs	cribed before me day of	this	20							S	Signature	of Perso	n Submit	ing Rep	ort		_
	Sigr	ature					<u>-</u>					Prin	ted Name	,			_
My Commission Ex	cpires						_					Ema	il				
	мо	D	AY	YR					Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a c	andidate's	authorized C	omn	itte	e, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende		of my knowl	edge and belief	this	politi	ical	commi	ittee has r	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc		his									s	ignature o	of Candida	ate			-
	day of						-					Printe	d Name				-
Signature					-						:				_		
My Commission Exp	ires											Ema					
	мо	D	AY	YR			-		Area	Code		Da	aytime T	elephor	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
LAWRENCE, JOHN FRIENDS OF	From:	11/25/20	<u>14</u> To:	12/31/2014
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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)			\$	0.00
All Other Contributions (Part B)	\$	0.00		
TOTAL for the Reporting	(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			\$	265.00

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 Candida	Name of Filing Committee or Candidate			Reporting Period						
			From:		То	:				
				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.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee	e or Candidate		Rep	orting P	eriod			
			Fro	m:		To):	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
							$\overline{}$	PAGE TOTAL

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		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 Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	age, Sectio	n 3.			\$	(0.00

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	ame of Filing Committee or Candidate				Reporting Period					
				From:			To	То:		
					DATE			AMOUNT		
Full Name of Contributor					мо	DAY	YEAR	\$	0.00	
Mailing Address										
City	State	Zi	p Code (Plus	s 4)						
Employer Name		•			Occupation					
Employer Mailing Address/Principal Pl	ace of Business		City			State		Zip Co	ode (Plus 4)	
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumn	nary Page,	Section	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	or Candidate		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus 4)					
Receipt Description	•	•			•			
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C					PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, 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 Peri	od						
LAWRENCE, JOHN FRIENDS OF	From:	<u>11/25/2014</u> To:	12/31/2014					
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)	\$	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 Candidate	ame 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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL		
						\$	(0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:	To:		
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	Stat	e Zip	Code(Plus 4)	Desci	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate			Reporti	ng Period			
LAWRENCE, JOHN FRIENDS O	F			From	11/2	5/2014	То:	12/31/2014
					DATE			AMOUNT
To Whom Paid				мо	DAY	YEAR		
Nat Penn Bank				1-10				
Mailing Address				11	25	2014	\$	35.00
City .	State		Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
PA 11111 S					yment Fee			
To Whom Paid Red Maverick Media					DAY	YEAR		
Mailing Address				11	26	2014	\$	1,431.00
City .	State Zip Code (Plus 4)				tion of Exp	enditure		
	PA		11111	media				
To Whom Paid				мо	DAY	YEAR		
John Lawrence				140		ILAK		
Mailing Address				12	1	2014	\$	1,635.11
City .	State		Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA		11111	reimsur	sement			
To Whom Paid				мо	DAY	YEAR		
Proforma				1-10		ILAK		
Mailing Address			12	2	2014	\$	442.04	
City . State Zip Code (Plus 4)			Descrip	tion of Exp	enditure			
PA 11111		media						
To Whom Paid	o Whom Paid			МО	DAY	YEAR		
17				MO	DAT	TEAR	I	

Zip Code (Plus 4)

11111

12

helium

10

Description of Expenditure

2014

\$

Keen

City

Mailing Address

State

PA

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

9/15/2025 7:24:14 PM	

216.24

3,759.39

PAGE TOTAL