

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 : 2007306		Report Filed By :	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST					
Name of Filing Committee, Candidate or Lobbyist: YAW, GENE FRIENDS OF FOR SENATE										
Street Address: PO BOX 3246										
City: WILLIAMSPORT			State: PA	Zip Code: 17701-0000						
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. X	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2015	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		41	
				11	3	2015	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		6	9	2015	TO	9	14	2015		
A. Amount Brought Forward From Last Report				\$		60,557.69				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		750.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		61,307.69				
D. Total Expenditures (From Schedule III)				\$		9,118.34				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		52,189.35				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$		57,829.00				

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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
YAW, GENE FRIENDS OF FOR SENATE	From: <u>6/9/2015</u> To: <u>9/14/2015</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 0.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 250.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 250.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 500.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 500.00

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.)	\$ 750.00
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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 YAW, GENE FRIENDS OF FOR SENATE	Reporting Period From: <u>6/9/2015</u> To: <u>9/14/2015</u>
DATE AMOUNT	

Full Name of Contributing Committee	MO	DAY	YEAR	
Windstream PAC				
Mailing Address 4001 Rodney Parham Rd				\$ 250.00
City Little Rock	6	15	2015	
State AR				
Zip Code (Plus 4) 72212				

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

PAGE TOTAL
\$ 250.00

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
	From: _____ To: _____

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

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 YAW, GENE FRIENDS OF FOR SENATE	Reporting Period From: <u>6/9/2015</u> To: <u>9/14/2015</u>
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	DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
LAWPAC				
Mailing Address 800 N Third St				\$ 500.00
City Harrisburg	6	15	2015	
State PA				
Zip Code (Plus 4) 17102				

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

PAGE TOTAL
\$ 500.00

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	Reporting Period
	From: To:

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

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
	From: _____ To: _____

				DATE	AMOUNT
Full Name	MO	DAY	YEAR		
Mailing Address				\$	0.00
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 YAW, GENE FRIENDS OF FOR SENATE	Reporting Period From: <u>6/9/2015</u> To: <u>9/14/2015</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)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - 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.)	\$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period
	From: To:

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Description of Contribution:				
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.				PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period From: _____ To: _____
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Mailing Address				\$	0.00
City	State	Zip Code(Plus 4)			
Employer of Contributor				Occupation	
Employer Mailing Address/Principal Place of Business	City	State	Zip Code(Plus 4)	Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
YAW, GENE FRIENDS OF FOR SENATE	From <u>6/9/2015</u> To: <u>9/14/2015</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
SRCC	8	31	2015	\$ 5,000.00
Mailing Address 112 State Street				
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure contribution	
To Whom Paid Union County Assoc of Twsp officials	8	26	2015	\$ 70.00
Mailing Address unknown				
City Lewisburg	State PA	Zip Code (Plus 4) 17837	Description of Expenditure ad	
To Whom Paid Bradford County Twsp Officers Assoc	8	26	2015	\$ 50.00
Mailing Address 1863 N Orwell Rd				
City Rome	State PA	Zip Code (Plus 4) 18837	Description of Expenditure ad	
To Whom Paid Bradford County Repub Cmte	8	26	2015	\$ 150.00
Mailing Address 918 W Lockhart St				
City Sayre	State PA	Zip Code (Plus 4) 18840	Description of Expenditure ad	
To Whom Paid Susquehanna Bank	6	17	2015	\$ 1,015.00
Mailing Address Hepburn St				
City Williamsport	State PA	Zip Code (Plus 4) 17701	Description of Expenditure return check and fee	

To Whom Paid Troy Fair			MO	DAY	YEAR	
Mailing Address PO Box 212			8	6	2015	\$ 100.00
City Troy	State PA	Zip Code (Plus 4) 16947	Description of Expenditure sponsorship			
To Whom Paid JanWay Company			MO	DAY	YEAR	
Mailing Address 11 Academy Rd			8	6	2015	\$ 698.96
City Cogan Station	State PA	Zip Code (Plus 4) 17728	Description of Expenditure various promotional items			
To Whom Paid West Branch Builders			MO	DAY	YEAR	
Mailing Address 1610 Whitman St			6	19	2015	\$ 115.00
City Williamsport	State PA	Zip Code (Plus 4) 17701	Description of Expenditure sponsorship			
To Whom Paid JanWay Company			MO	DAY	YEAR	
Mailing Address 11 Academy Rd			6	19	2015	\$ 287.53
City Cogan Station	State PA	Zip Code (Plus 4) 17728	Description of Expenditure promotional items			
To Whom Paid Bradford County Repub Cmte			MO	DAY	YEAR	
Mailing Address 918 W Lockhart St			6	15	2015	\$ 100.00
City Sayre	State PA	Zip Code (Plus 4) 18840	Description of Expenditure ad			
To Whom Paid Todd Krick Graphic Design			MO	DAY	YEAR	
Mailing Address 131 Clover Lane			6	15	2015	\$ 681.85
City Palmyra	State PA	Zip Code (Plus 4) 17078	Description of Expenditure printing			

To Whom Paid WLCCRW			MO	DAY	YEAR	
Mailing Address unknown			6	15	2015	
City Williamsport	State PA	Zip Code (Plus 4) 17701	Description of Expenditure sponsorship			
To Whom Paid Central Bradford County Chamber of Commerce			MO	DAY	YEAR	
Mailing Address unknown			6	15	2015	
City Bradford County	State PA	Zip Code (Plus 4) 00000	Description of Expenditure membership			
To Whom Paid Friends of Krista Rogers			MO	DAY	YEAR	
Mailing Address 234 Gordon St			8	6	2015	
City Duboistown	State PA	Zip Code (Plus 4) 17702	Description of Expenditure contribution			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 9,118.34

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 YAW, GENE FRIENDS OF FOR SENATE		Reporting Period From: <u>6/9/2015</u> To: <u>9/14/2015</u>		
				Outstanding Balance of Debt
				DATE
Name of Creditor Gene Yaw		MO	DAY	YEAR
Mailing Address 1416 Mountview Ave		9	14	2015
				\$ 57,829.00
City Montoursville	State PA	Zip Code (Plus 4) 17754		Description of Debt loan balance carried forward
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.				PAGE TOTAL \$ 57,829.00