

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		20140117		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> FRIENDS OF BARRY JOZWIAK												
<b>Street Address:</b> 590 GRANGE ROAD												
<b>City:</b> BERNVILLE						<b>State:</b> PA			<b>Zip Code:</b> 19506			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2016	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
REPRESENTATIVE IN THE GENERAL ASSEMBLY						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	5	STH	REP	06
						11	8	2016	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		3	8	2016		4	11	2016				
<b>A. Amount Brought Forward From Last Report</b>						\$ 42,223.93						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 550.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 42,773.93						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 8,892.60						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 33,881.33						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 14,821.25						

## 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 of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF BARRY JOZWIAK	From: <u>3/8/2016</u> To: <u>4/11/2016</u>

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

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

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

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 300.00

<b>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.)</b>	\$ 550.00
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**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)**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF BARRY JOZWIAK	<b>Reporting Period</b>  <b>From:</b> <u>3/8/2016</u> <b>To:</b> <u>4/11/2016</u>
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DATE				AMOUNT
<b>Full Name of Contributor</b> JESSICA L SNYDER				
<b>Mailing Address</b> 330 WEST WALNUT TREE				
<b>City</b> BLANDON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19510		
		MO 1	DAY 22	YEAR 2016
				\$ 250.00

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

<b>PAGE TOTAL</b>
\$ 250.00

**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	Reporting Period	
	From:	To:

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

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

<b>PAGE TOTAL</b>
\$ 0.00

**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: <span style="margin-left: 100px;">To:</span>

			DATE	AMOUNT
Full Name of Contributor			MO	DAY
Mailing Address			YEAR	\$ 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.

<b>PAGE TOTAL</b>
\$ 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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF BARRY JOZWIAK	<b>Reporting Period</b>  <b>From:</b> <u>3/8/2016</u> <b>To:</b> <u>4/11/2016</u>
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				DATE	AMOUNT		
Full Name	Mailing Address	City	State	MO	DAY	YEAR	\$
BARRY JOZWIAK	590 GRANGE RD	BERNVILLE	PA	4	8	2016	300.00
Zip Code (Plus 4)							
19506							
<b>Receipt Description</b> REPLACE FUNDS WITHDRAWN IN ERROR ON 03/31/2016							

**Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.**

<b>PAGE TOTAL</b>
\$ 300.00

## 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF BARRY JOZWIAK		From: <u>3/8/2016</u> To: <u>4/11/2016</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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.						<b>PAGE TOTAL</b>  \$ 0.00

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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF BARRY JOZWIAK	From <u>3/8/2016</u> To: <u>4/11/2016</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
BERKS COUNTY REPUBLICAN COMMITTEE				
<b>Mailing Address</b> 425 WASHINGTON ST	1	12	2016	\$ 25.00
<b>City</b> READING	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19601	<b>Description of Expenditure</b> CANIDATES TABLE FOR PETITION SIGNING	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
WALMART				
<b>Mailing Address</b> 5370 ALLENTOWN PIKE	1	17	2016	\$ 39.74
<b>City</b> TEMPLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19560	<b>Description of Expenditure</b> OFFICE SUPPLIES	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
BEST BUY				
<b>Mailing Address</b> 1701 CROSSING DR	1	30	2016	\$ 561.78
<b>City</b> WYOMISSING	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19610	<b>Description of Expenditure</b> LAPTOP FOR CAMPAIGN	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
SAM'S CLUB				
<b>Mailing Address</b> 5314 ALLENTOWN PIKE	1	30	2016	\$ 63.58
<b>City</b> TEMPLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19560	<b>Description of Expenditure</b> PRINTER INK	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
COMMONWEALTH OF PA				
<b>Mailing Address</b> 210 NORTH OFFICE BUILDING	2	12	2016	\$ 100.00
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17120	<b>Description of Expenditure</b> FILING FEE	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
BERKS COUNTY REPUBLICAN COMMITTEE				
<b>Mailing Address</b> 425 WASHINGTON ST	3	6	2016	\$ 200.00
<b>City</b> READING	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19601	<b>Description of Expenditure</b> DONATION	

<b>To Whom Paid</b> HRCC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 5,000.00
<b>Mailing Address</b> PO BOX 11787			3	6	2016	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Description of Expenditure</b> DONATION			

  

<b>To Whom Paid</b> CPITECH			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 689.00
<b>Mailing Address</b> 3212 PIKE ST			3	18	2016	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17111	<b>Description of Expenditure</b> CAMPAIGN FINANCE SOFTWARE			

  

<b>To Whom Paid</b> FLEETWOOD AREA HIGH SCHOOL SAFE GRADUATION			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 801 NORTH RICHMOND ST			3	18	2016	
<b>City</b> FLEETWOOD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19522	<b>Description of Expenditure</b> DONATION			

  

<b>To Whom Paid</b> FRASER ADVANCED INFORMATION SSTEMS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,139.50
<b>Mailing Address</b> 320 PENN AVE			3	27	2016	
<b>City</b> WEST READING	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19611	<b>Description of Expenditure</b> PRINTER FOR CAMPAIGN			

  

<b>To Whom Paid</b> BARRY JOZWIAK			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 300.00
<b>Mailing Address</b> 590 GRANGE RD			3	31	2016	
<b>City</b> BERNVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19506	<b>Description of Expenditure</b> WITHDRAW MADE IN ERROR			

  

<b>To Whom Paid</b> BERKS COUNTY CHIEF OF POLICE ASSOCIATION			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 279.00
<b>Mailing Address</b> PO BOX 13296			4	1	2016	
<b>City</b> READING	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 196123296	<b>Description of Expenditure</b> DONATION			

  

<b>To Whom Paid</b> FLEETWOOD POST OFFICE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 245.00
<b>Mailing Address</b> 9 LENHART RD			4	8	2016	
<b>City</b> FLEETWOOD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19522	<b>Description of Expenditure</b> POSTAGE STAMPS			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 8,892.60

**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**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF BARRY JOZWIAK	<b>Reporting Period</b>  <b>From:</b> <u>3/8/2016</u> <b>To:</b> <u>4/11/2016</u>
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				DATE	Outstanding Balance of Debt		
Name of Creditor BARRY JOZWIAK				MO	DAY	YEAR	\$ 14,821.25
Mailing Address 590 GRANGE RD				1	1	2016	
City BERNVILLE		State PA	Zip Code (Plus 4) 19506	Description of Debt LOAN TO CAMPAIGN			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 14,821.25