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 2014	10117				port ed B		CANDI	DATE		СОМ	4ITTEE	✓	LOB	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		FRI	END:	S OF	BARRY JO	OZWIA	ιK							
Street Address:	590 GRANGE	ROAD															
City:	BERNVILLE							State:	PA			Zip Cod	le: 19	506			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRID PRIMARY	AY PRE	-	2.	30 DA PRIMA		POST-	3. X		AMENDM REPORT?		Yes	N	0	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRID ELECTION		E-	5.	30 DA		POST-	6.		TERMINA REPORT?		Yes	N	O	\
report type)	ANNUAL REPORT	7.	Year 201	7				NG METHO				PAPER		/	DISK	ETTE	
Name of Office S	- Sought by Candida	te:						DATE 0	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Cour	
								МО	DAY	YI	AR	5	STH	REF	1	06	-
REPRESENTATI	VE IN THE GENER	RAL ASS	EMBLY					11		7	2017		(SEE IN	STRUCTI	ONS FOR	CODES)
	Receipts and	МО	DAY	YEAI	₹			МО	DAY	ΥI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		5	2 2	017	, T	0	6		5	2017						
A. Amount Bro	ught Forward Froi	n Last R	eport				\$			78,4	426.08						
B. Total Moneta	ary Contributions	And Rec	eipts (Fro	m Sche	edule	e I)	\$				300.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			78,	726.08						
D. Total Expend	ditures (From Sch	edule II	I)				\$			6,8	347.50						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$			71,8	78.58						
F. Value Of In-	Kind Contribution	s Receiv	ed (From	Schedu	ile I	I)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule I	V)			\$			14,8	321.25						
				AFF	FID,	AVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sigr	here.	If th	nis is	a Car	ndidate re	eport, e	candi	date sig	jn here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached s	chedule	s file	ed on	paper	or by elect	ronic m	edium	, are to t	the best o	f my knov	wledge	and bel	ief , tr	ue
Sworn to and subs	cribed before me this	5	20							S	Signature	of Perso	n Submit	ting Re	oort		_
	Signatu	ıre	_				-					Prin	ted Name	e			_
My Commission Ex	kpires											Emai	i				-
	мо	D	AY	YR					Ar	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorize	d Comi	nitte	ee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and be	lief this	s poli	itical	comm	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.	L. 133	з,
Sworn to and subsc	ribed before me this										s	ignature o	of Candida	ate			_
	day of						-					Printe	d Name				-
My Commission F	Signature						-					Ema	il				_
My Commission Exp							_										_
	МО	D	AY	YF	₹				Area	Code		Da	ytime T	elephor	e Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

-				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF BARRY JOZWIAK	From:	<u>5/2/201</u>	<u>7</u> To:	6/5/2017
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	50.00
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)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) 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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	300.00

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 Candidate	Reporting	Period		
FRIENDS OF BARRY JOZWIAK	From:	<u>5/2/2017</u>	То:	6/5/2017

DATE	AMOUNT

Full Name of Contributing Committee FIRST ENERGY PAC	мо	DAY	YEAR			
Mailing Address 76 SOUTH MAIN ST				8	2017	\$ 250.00
City AKRON	State OH	Zip Code (Plus 4) 443081890))	2017	

PAGE TOTAL 250.00

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 or Candidate				Reporting Period						
Fi			Fro	From: To						
		•			DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4)								

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

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								
			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				Rep	orting Pe	riod					
				Fron	n:		1	o:			
					D	ATE			АМО	UNT	
Full Name of Contributor					МО	DAY	YEAR	ł	\$		0.00
Mailing Address											
City	State	Zip	Code (Plus	4)							
Employer Name					Occupa	tion					
Employer Mailing Address/Principal Plac	e of Business		City		•	State		Ziı	p Code (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	umm	ary Page,	Section	on 3.				PAG	E TOTAL	
								\$		0.0	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:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<u>'</u>	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	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 Period		
FRIENDS OF BARRY JOZWIAK	From:	<u>5/2/2017</u> To:	6/5/2017
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 Candidate			Reporting Period					
F						То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		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:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
FRIENDS OF BARRY JOZWIAK	From	5/2/2017	То:	6/5/2017

			DATE				AMOUNT	
To Whom Paid			МО	DAY	YEAR			
FISH POND WEST, INC			МО		ILAK			
Mailing Address P O BOX 6103			5	20	2017	\$	5,582.50	
City WYOMISSING State Zip Code (Plus 4)			Description of Expenditure					
	PA	19610	FUNDRAISER					
To Whom Paid			мо	DAY	YEAR			
WINDSOR DISTRIBUTING			1-10		12/11			
Mailing Address 800 SOUTH	4TH STREET		5	20	2017	\$	240.00	
City HAMBURG	State	Zip Code (Plus 4)) Description of Expenditure					
	PA	19526	BEVERAGE FOR FUNDRAISER					
To Whom Paid			мо	DAY	YEAR			
BERKS COUNTY REPUBLICAN CO	DMMITTEE							
Mailing Address 425 WASHINGTON ST		6	1	2017	\$	250.00		
City READING State Zip Code (Plus 4)			Description of Expenditure					
	PA	19601	GOP FUNDRAISER					
To Whom Paid			МО	DAY	YEAR			
HRCC								
Mailing Address PO BOX 11787			6	1	2017	\$	400.00	
City HARRISBURG State Zip Code (Plus 4)			Description of Expenditure					
	PA	17108	HRCC P	ICNIC				
To Whom Paid			мо	DAY	YEAR			
HRCC								
Mailing Address PO BOX 11787		6	5	2017	\$	375.00		
City HARRISBURG	State	Zip Code (Plus 4)	1) Description of Expenditure			-		
	PA	17108	DONATION					
Futor Coand Tatal of Form	Auman an Para 4 P	nest Carrey Person The					PAGE TOTAL	
Enter Grand Total of Expendi	tures on Page 1, Re	port Cover Page, Item D) .			\$	6,847.50	

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			Reporting Period					
FRIENDS OF BARRY JOZWIAK From:			<u>5/2/2017</u> To:			6/5/2017		
					DATE			itstanding lance of Debt
Name of Creditor BARRY JOZWIAK			мо	DAY	YEAR			
Mailing Address 590 GRANGE RD			1	1	2016	\$	14,821.25	
City BERNVILLE	State	Zip Code (P	lus 4)	Description of Debt				
	PA	19506	LOAN TO CAMPAIGN					
								PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						\$	14,821.25	