### **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 201	70267			Rep File			CAND	DIDATE COMMITTEE \( \square \) LOBBYIST								
Name of Filing C	Committee, Candi	date or L	obbyist:		FRIE	ND:	S OF :	JOSH CA	MSON								
Street Address:	PO BOX 558																
City:	HARLEYSVIL	LE						State:	PA			Zip Cod	le: 19	.9438			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY F PRIMARY	PRE-	. 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	•	<b>/</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	•	<b>/</b>
report type)	ANNUAL REPOR	7. X	<b>Year</b> 2017					IG METH CHECK C				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	Sought by Candid	ate:						DATE (	OF ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	ty
								мо	DAY	YI	AR	Number Code DEM			couc		
								11		7	2017		(SEE IN	STRUCTIO	ONS FOR (	ODES)	
	Receipts and	МО	DAY YE	EAR				МО	DAY	ΥI	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	s trom:		11 28	20	017	Т	0	12	2	31	2017						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				0.00						
B. Total Moneta	ary Contributions	And Rec	eipts (From So	che	dule	I)	\$			11,	577.00						
C. Total Funds	Available (Sum C	of Lines A	and B)				\$			11,5	577.00						
D. Total Expend	ditures (From Sc	hedule II	I)				\$			1,4	51.78						
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)				\$			10,1	25.22						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	edul	e II)	)	\$			2,5	00.00						
G. Unpaid Debt	ts And Obligation	s (From S	Schedule IV)				\$			2,0	00.00			•			
			А	\FF	IDA	VI	T SE	CTION									
PART I - If this is	s a Committee re	port, trea	surer sign her	re. I	f thi	is is	a Can	ididate r	eport,	candi	date sig	ın here.					
I swear (or affirm) correct and comple	) that this report, in ete.	cluding the	attached sched	lules	filed	l on	paper (	or by elec	tronic m	edium	, are to t	he best o	f my knov	wledge	and belie	ef , tru	ıe
Sworn to and subs	cribed before me th day of	is	20							S	ignature	of Perso	n Submit	ing Rep	ort		
	Signat	ure					-					Prin	ted Name	•			_
My Commission Ex	cpires											Ema	il				_
	мо	D	AY	YR					Ar	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a car	ndidate's	authorized Co	mm	ittee	e, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	this	politi	ical	commi	ittee has	not viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	i,
Sworn to and subsc		5									s	ignature o	of Candida	ate			-
	day of ————————————————————————————————————						_					Printa	d Name				-
	Signature	1					-										_
My Commission Exp	_											Ema	il				
	мо	D	AY	YR			-		Area	Code		Da	aytime T	elephon	e Numb	er	-

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF JOSH CAMSON	From:	11/28/201	<u>7</u> To:	12/31/2017
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	584.00
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)			\$	2,993.00
TOTAL for the Reporting	) Period	(2)	\$	2,993.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	400.00
All Other Contributions (Part D)			\$	7,600.00
TOTAL for the Reporting	) Period	(3)	\$	8,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J Period	(4)	\$	0.00
			<del></del>	
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			\$	11,577.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Reporting Period					
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	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.

**PAGE TOTAL**\$ 0.00

### 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 Candidat	Name of Filing Committee or Candidate		Rep	orting Pe	eriod			
FRIENDS OF JOSH CAMSON			Fro	m:	11/28/2	2017 <b>To</b>	12/31/2017	
					DATE		AMOUNT	
Full Name of Contributor JOHN ADAMCZYK				МО	DAY	YEAR		
Mailing Address 310 GRANT ST STE	1515						\$ 200.00	00
City PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 152192213		10	25	2017		
Full Name of Contributor PATRICK BEST				МО	DAY	YEAR		
Mailing Address 413 COLBERT ST							\$ 200.00	10
City STROUDSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 183602319		9	26	2017		
Full Name of Contributor ADAM BISHOP				МО	DAY	YEAR		
Mailing Address 2500 C WHARTON S	ST						\$ 100.00	10
City PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 152035102		9	26	2017		
Full Name of Contributor MICHAEL BRENNER				МО	DAY	YEAR		
Mailing Address 203 FORREST DR				0	26	2017	<b>\$</b> 150.00	10
<b>City</b> SOUTHAMPTONHOLL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 189662152		9	26	2017		
Full Name of Contributor PAMELA CALLAHAN				МО	DAY	YEAR		
Mailing Address 1210 QUEEN ST AR	PT # 5						\$ 36.00	10
City ALEXANDRIA	<b>State</b> VA	<b>Zip Code (Plus 4)</b> 223142495		9	11	2017		

							FAGE 5
Full Name of Contributor							
PAMELA CALLAHAN				МО	DAY	YEAR	
Mailing Address 1210	QUEEN ST AF	PT # 5					\$ 36.0
City ALEXANDRIA		State	Zip Code (Plus 4)	11	12	2017	
		VA	223142495				
Full Name of Contributor PAMELA CALLAHAN				МО	DAY	YEAR	
Mailing Address 1210	QUEEN ST AF	PT # 5					<b>\$</b> 36.0
City ALEXANDRIA		State	Zip Code (Plus 4)	11	21	2017	
, LEW WEIGH		VA	223142495				
Full Name of Contributor CAITLIN CATER				МО	DAY	YEAR	
Mailing Address 2701	. CORTLAND PL	NW APT 34					<b>\$</b> 75.0
City WASHINGTON		State	Zip Code (Plus 4)	10	15	2017	
		DC	200083472				
Full Name of Contributor							I
DANIEL CONRAD				МО	DAY	YEAR	
DANIEL CONRAD	00 N DEEPWOO	D LN		МО	DAY	YEAR	\$ 100.0
DANIEL CONRAD  Mailing Address 1509	00 N DEEPWOO	D LN State	Zip Code (Plus 4)	<b>мо</b>	<b>DAY</b> 19	<b>YEAR</b> 2017	\$ 100.0
DANIEL CONRAD  Mailing Address 1509	O N DEEPWOO		<b>Zip Code (Plus 4)</b> 440222637				\$ 100.0°
DANIEL CONRAD  Mailing Address 1509	O N DEEPWOO	State					\$ 100.0
DANIEL CONRAD  Mailing Address 1509  City CHAGRIN FALLS  Full Name of Contributor  STEVE CZAJKOWSKI	O N DEEPWOO	State OH		10	19	2017 YEAR	\$ 100.0°
DANIEL CONRAD  Mailing Address 1509  City CHAGRIN FALLS  Full Name of Contributor STEVE CZAJKOWSKI  Mailing Address 1523		State OH		10	19	2017	
DANIEL CONRAD  Mailing Address 1509  City CHAGRIN FALLS  Full Name of Contributor STEVE CZAJKOWSKI  Mailing Address 1523		State OH	440222637	10	19	2017 YEAR	
DANIEL CONRAD  Mailing Address 1509  City CHAGRIN FALLS  Full Name of Contributor STEVE CZAJKOWSKI  Mailing Address 1523		State OH State	440222637  Zip Code (Plus 4)	10	19	2017 YEAR	
Mailing Address 1509  City CHAGRIN FALLS  Full Name of Contributor STEVE CZAJKOWSKI  Mailing Address 1523  City PITTSBURGH  Full Name of Contributor MARC DANN		State OH State	440222637  Zip Code (Plus 4)	10 MO	19 DAY 9	2017 YEAR 2017	
Mailing Address 1509  City CHAGRIN FALLS  Full Name of Contributor STEVE CZAJKOWSKI  Mailing Address 1523  City PITTSBURGH  Full Name of Contributor MARC DANN  Mailing Address 1088	KING CHARLE	State OH State	440222637  Zip Code (Plus 4)	10 MO	19 DAY	2017 YEAR 2017	\$ 100.0
Mailing Address 1509  City CHAGRIN FALLS  Full Name of Contributor STEVE CZAJKOWSKI  Mailing Address 1523  City PITTSBURGH  Full Name of Contributor MARC DANN  Mailing Address 1088	KING CHARLE	State OH State PA	<b>Zip Code (Plus 4)</b> 152371527	10 MO	19 DAY 9	2017 YEAR 2017	\$ 100.0

							FAGL 6
Full Name of Cont	tributor						
SARAH GLENN				МО	DAY	YEAR	
Mailing Address	514 SECOND AVE						\$ 60.00
City COLLEGE	VIII F	State	Zip Code (Plus 4)	9	25	2017	
		PA	194261302				
Full Name of Cont	cributor			МО	DAY	YEAR	
Mailing Address	134 PLYMOUTH RD	UNIT 1303					<b>\$</b> 250.00
City PLYMOUT	H MEETIN	State	Zip Code (Plus 4)	9	23	2017	
1 TEIMOOT	II MEETIN	PA	194621455				
Full Name of Cont	cributor			МО	DAY	YEAR	
Mailing Address	31 E MAIN ST						\$ 100.00
City CANTON		State	Zip Code (Plus 4)	12	11	2017	
		PA	177241506				
Full Name of Cont	ributor			МО	DAY	YEAR	
	ributor 732 FILBERT ST #	2F		МО	DAY	YEAR	\$ 100.00
ANJALI NAIR  Mailing Address	732 FILBERT ST #	2F State	Zip Code (Plus 4)	<b>MO</b>	<b>DAY</b> 25	<b>YEAR</b> 2017	\$ 100.00
ANJALI NAIR  Mailing Address	732 FILBERT ST #		<b>Zip Code (Plus 4)</b> 152322438				\$ 100.00
ANJALI NAIR  Mailing Address	732 FILBERT ST #	State					\$ 100.00
ANJALI NAIR  Mailing Address  City PITTSBUR  Full Name of Cont	732 FILBERT ST #	State PA		- 10 MO	DAY	2017 YEAR	\$ 100.00 \$ 200.00
ANJALI NAIR  Mailing Address  City PITTSBUR  Full Name of Cont DAVID POLLOCK  Mailing Address	732 FILBERT ST # RGH cributor 245 SHERMAN AVE	State PA		10	25	2017	
ANJALI NAIR  Mailing Address  City PITTSBUR  Full Name of Cont DAVID POLLOCK  Mailing Address	732 FILBERT ST # RGH cributor 245 SHERMAN AVE	State PA	152322438	- 10 MO	DAY	2017 YEAR	
ANJALI NAIR  Mailing Address  City PITTSBUR  Full Name of Cont DAVID POLLOCK  Mailing Address	732 FILBERT ST # RGH  tributor  245 SHERMAN AVE BURG	State PA  State	152322438  Zip Code (Plus 4)	- 10 MO	DAY	2017 YEAR	
ANJALI NAIR  Mailing Address  City PITTSBUR  Full Name of Cont DAVID POLLOCK  Mailing Address  City WAYNESE	732 FILBERT ST # RGH  tributor  245 SHERMAN AVE BURG	State PA  State PA	152322438  Zip Code (Plus 4)	10 MO	25 DAY 13	2017 YEAR 2017	
ANJALI NAIR  Mailing Address  City PITTSBUR  Full Name of Cont DAVID POLLOCK  Mailing Address  City WAYNESE  Full Name of Cont JAYNE REARDON  Mailing Address	732 FILBERT ST # RGH  Eributor  245 SHERMAN AVE BURG  Eributor  180 N STETSON ST	State PA  State PA	152322438  Zip Code (Plus 4)	10 MO	25 DAY	2017 YEAR 2017	\$ 200.00
ANJALI NAIR  Mailing Address  City PITTSBUR  Full Name of Cont DAVID POLLOCK  Mailing Address  City WAYNESE  Full Name of Cont JAYNE REARDON  Mailing Address	732 FILBERT ST # RGH  Eributor  245 SHERMAN AVE BURG  Eributor  180 N STETSON ST	State PA  State PA  TE 1950	152322438  Zip Code (Plus 4)  153701627	10 MO	25 DAY 13	2017 YEAR 2017	\$ 200.00

						17.62 7
Full Name of Contributor ABRAHAM REICH			мо	DAY	YEAR	
Mailing Address 1520 SPRUCE	ST PH06				2017	\$ 200.00
City PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191024511	10	6	2017	
Full Name of Contributor MICHAELENE ROSE			МО	DAY	YEAR	
Mailing Address 212 HIGHLAN	D RD					<b>\$</b> 100.00
City BLAWNOX	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 152382112	12	12	2017	
Full Name of Contributor DAVID ROSENBERG			МО	DAY	YEAR	
Mailing Address 90 WOODLAN	D RD					<b>\$</b> 200.00
City PITTSBURGH	State PA	<b>Zip Code (Plus 4)</b> 152322814	9	22	2017	
Full Name of Contributor ROSE SEMPLE			МО	DAY	YEAR	
Mailing Address 3001 MARSHA  City PITTSBURGH	State	Zip Code (Plus 4)	10	16	2017	\$ 200.00
Full Name of Contributor RACHEL WHEELER		152142645	мо	DAY	YEAR	
Mailing Address 107 OLD MEA	DOW CT					\$ 200.00
<b>City</b> CANONSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 153172331	11	15	2017	÷ 200.00
						DACE TOTAL

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

**PAGE TOTAL \$** 2,993.00

#### **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 P			
FRIENDS OF JOSH CAMSON	From:	11/28/2017	То:	12/31/2017

DATE AMOUNT

Full Name of Contributing Committee FRIENDS OF MARLA HEXTER			МО	DAY	YEAR	
Mailing Address 27 MINE HILL RD						<b>\$</b> 400.00
City SCHWENKSVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 194731724	12	26	2017	

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

**PAGE TOTAL**400.00

### 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				
FRIENDS OF JOSH CAMSON				Fror	n:	11/28/2	<u>2017</u> <b>T</b>	o:	12/3	1/2017
					DA	ATE			AMOUN	т
Full Name of Contributor JOSHUA H. CAMSON					мо	DAY	YEAR			
Mailing 245 SHIRLEY DR Address								\$		2,000.00
City HARLEYSVILLE	State	Zip	Code (Plus	4)	8	4	2017	7		
	PA	19	4381949							
Employer Name CAMSON LAW, LLC					Occupat	tion	ATTORN	IEY		
Employer Mailing Address/Principal Place Business	ce of		City			State		Zip C	Code (Plu	ıs 4)
3770 RIDGE PIKE			COLLEGE	VILLE		PA		194	126	
Full Name of Contributor JOSHUA H. CAMSON					МО	DAY	YEAR			
Mailing 245 SHIRLEY DR								\$		300.00
City HARLEYSVILLE	State	Zip	Code (Plus	4)	11	2	2017	7		
	PA	19	4381949							
Employer Name CAMSON LAW, LLC					Occupat	tion	ATTORN	IEY		
Employer Mailing Address/Principal Place Business	ce of		City			State		Zip C	Code (Plu	ıs 4)
3770 RIDGE PIKE			COLLEGE	VILLE		PA		194	126	
Full Name of Contributor										
JOSHUA H. CAMSON					МО	DAY	YEAR			
Mailing 245 SHIRLEY DR								\$		200.00
City HARLEYSVILLE	State	Zip	Code (Plus	4)	12	30	2017	7		
	PA	19	4381949							
Employer Name CAMSON LAW, LLC					Occupat	tion	ATTORN	IEY		
Employer Mailing Address/Principal Place Business	ce of		City			State		Zip C	Code (Plu	ıs 4)
3770 RIDGE PIKE			COLLEGE	VILLE		PA		194	126	

Full Name of Contributor								
STAN CAMSON				МО	DAY	YEAR		
Mailing 128 MEADOWFIELD D							4	
Address				11	9	2017	\$ 500.00	
City SOUTHAMPTON	State		o Code (Plus 4)	11	9	2017		
	PA	18	9663046					
Employer Name STANWOOD PHARMAG	CY			Occupat	ion P	HARMA	CIST	
Employer Mailing Address/Principal Place Business	e of		City		State		Zip Code (Plus 4)	
813 W ROOSEVELT BLVD			PHILADLPHIA		PA		19152	
Full Name of Contributor								
WILLIAM CORBETT				МО	DAY	YEAR		
Mailing 320 ULSTER ST							\$ 600.00	
City SAYRE	State	Zip	Code (Plus 4)	10	10	2017		
	PA	18	8402731					
Employer Name ATHENS ANIMAL HOS	L L PITAL					VETERINARIAN		
Employer Mailing Address/Principal Place Business	e of		City	State Zip (		Zip Code (Plus 4)		
475 RIVERSIDE DR			ATHENS		PA		18810	
Full Name of Contributor					DAY	YEAR		
SANDRA GREENBLATT				МО	DAT	IEAR		
Mailing 1 ALHAMBRA PLZ STE Address	E 1410						\$ 500.00	
City MIAMI	State	Zip	Code (Plus 4)	9	26	2017		
	FL	33	1345247					
Employer Name LUBELL/ROSEN, LLC	<u> </u>			Occupation ATTORNEY			EY	
Employer Mailing Address/Principal Place Business	e of		City	l	State		Zip Code (Plus 4)	
1 ALHAMBRA PLZSTE 1410			MIAMI		FL		33134	
Full Name of Contributor KEVIN KELLY				мо	DAY	YEAR		
Mailing 850 10TH ST NW							<b>\$</b> 500.00	
City WASHINGTON	State	Zip	Code (Plus 4)	9	14	2017		
	DC	20	0014956					
Employer Name COVINGTON & COVI	URLING LLP			Occupat	ion L	AWYER		
Employer Mailing Address/Principal Place	e of		City	<u> </u>	State	T	Zip Code (Plus 4)	
Business 850 10TH ST NW			WASHINGTON		DC		20001	
030 20111 31 1111			777.51111010101		155			

Full Name of Contributor			мо	DAY	YEAR	
KATHY MACK			MO	DAI	ILAK	
Mailing 1209 CATON RD						\$ 500.00
City CORNING	State	Zip Code (Plus 4)	10	23	2017	
	NY	148309526				
Employer Name RETIRED			Occupat	tion R	RETIRED	TEACHER
Employer Mailing Address/Principal Plac Business	e of	City		State		Zip Code (Plus 4)
Full Name of Contributor MICHAEL MAZIARZ			МО	DAY	YEAR	
Mailing 233 W 134TH ST APT	- 1A			_	2017	<b>\$</b> 750.00
City NEW YORK	State	Zip Code (Plus 4)	11	1	2017	
	NY	100303027				
Employer Name BRIDGEWATER ASSO	CIATES		Occupation CORPORATE SECURITY			ATE SECURITY
Employer Mailing Address/Principal Plac Business	e of	City	State Zip Code (Plus 4)			Zip Code (Plus 4)
1 GLENDINNING PL		WESTPORT		СТ		06880
Full Name of Contributor		<u> </u>		•		
Full Name of Contributor NICHOLAS PULLEN			МО	DAY	YEAR	
Mailing 36 WINDOVER LN				_		\$ 1,000.00
City DOYLESTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 189013219	10	3	2017	
Employer Name RETIRED			Occupat	t <b>ion</b>	RETIRED	
Employer Mailing Address/Principal Plac Business	e of	City	ı	State		Zip Code (Plus 4)
36 WINDOVER LN		DOYLESTOWN		PA		18901
Full Name of Contributor ERICK RIGBY			МО	DAY	YEAR	
Mailing 916 FAYETTE ST Address						<b>\$</b> 250.00
	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 153015624	12	20	2017	
Address 910 PATELLE ST			12 Occupat	tion	2017	
Address  City WASHINGTON  Employer Name SELF EMPLOYED  Employer Mailing Address/Principal Place	РА	153015624		tion		
Address  City WASHINGTON  Employer Name SELF EMPLOYED	РА			tion A		EY

Full Name of Contributor RENEE SIEGEL				DAY	YEAR	
Mailing 17 DOWNING ST Address						\$ 500.00
City CHERRY HILL	<b>State</b> NJ	<b>Zip Code (Plus 4)</b> 080031518	11	3	2017	
Employer Name UNIVERSITY OF THE S	SCIENCES IN PHILA	DELPHIA	Occupat	ion E	NVIRON	IMENTAL HEALTH AND
Employer Mailing Address/Principal Place Business	City	State			Zip Code (Plus 4)	
600 SOUTH 43RD ST.	PHILADELPHIA	PA			19104	

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

PAGE TOTAL
\$ 7,600.00

### 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 Repo			Report	orting Period					
			From:			To:			
				D	ATE		AM	OUNT	
Full Name				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (	Plus 4)						
Receipt Description	•	•		•	•				
Enter Grand Total of Part E o	on Schedule I. Detailer	d Summary Page	Section	4			PA	GE TOTAL	
	,,,	. Junimary 1 ago,	5000.011				\$	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 Per	iod						
FRIENDS OF JOSH CAMSON	From:	<u>11/28/2017</u> <b>To:</b>	12/31/2017					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R						
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)	\$	2,500.00					
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,		\$	2,500.00					

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidate			Reporting Period				
Fr			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL
						\$	0.00

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

Name of Filing Committee or Candidate	Reporting Period						
FRIENDS OF JOSH CAMSON	From:	11/28/2017 <b>To:</b>	12/31/2017				

						DATE			AMOUNT		
Full Name of Contributor ERICK RIGBY					мо	MO DAY					
Mailing Address 916 FAYETTE ST								\$	2,500.00		
City WASHINGTON	State		Zip Code(Plus 4)		12	20	2017				
	PA		153015624								
Employer of Contributor SEL	F EMPLOYED				Occupation ATTORNEY						
Employer Mailing Address/Princi Business	pal Place of	City		State	Zip 4)	Zip Code(Plus 4)			Description of Contribution		
90 W CHESTNUT ST WASHINGTON PA			PA	153	15301 CAMPAIGN COMMERCIAL PRODUCTION						
Enter Grand Total of Part G	on Schedule II	In-Kind	Contribut	ions Deta	iled				PAGE TOTAL		
Summary Page, Section 3.	on senedule 11,	iii Kiliu		iono Deta					2,500.00		

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
FRIENDS OF JOSH CAMSON	From	11/28/2017	То:	12/31/2017
		DATE		AMOUNT

				DATE			AMOUNT
To Whom Paid  JOSHUA H. CAMSON				DAY	YEAR		
Mailing Address 245 SHIRLEY DR			12	27	2017	\$	914.47
City HARLEYSVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 194381949		otion of Exp			
To Whom Paid NAME BADGES, INC.			МО	DAY	YEAR		
Mailing Address 12240 SW 53RD ST	STE 511		10	16	2017	\$	15.24
City         COOPER CITY         State         Zip Code (Plus 4)           FL         333303314				otion of Exp	enditure		
To Whom Paid SAGE PAYMENT SOLUTIONS			МО	DAY	YEAR		
Mailing Address 12120 SUNSET HILL	S RD STE 500		9	5	2017	\$	3.17
City RESTON	State VA	<b>Zip Code (Plus 4)</b> 201905858	Description of Expenditure CREDIT CARD PROCESSING FEES				
To Whom Paid SAGE PAYMENT SOLUTIONS			МО	DAY	YEAR		
Mailing Address 12120 SUNSET HILL	S RD STE 500		10	2	2017	\$	85.47
City         RESTON         State         Zip Code (Plus 4)           VA         201905858				ction of Exp			
To Whom Paid SAGE PAYMENT SOLUTIONS			МО	DAY	YEAR		
Mailing Address 12120 SUNSET HILL	S RD STE 500		11	2	2017	\$	142.04
City RESTON	State VA	<b>Zip Code (Plus 4)</b> 201905858		otion of Exp			

						TAGE 16
To Whom Paid SAGE PAYMENT SOLUTIONS			мо	DAY	YEAR	
Mailing Address 12120 SUNS	ET HILLS RD STE 500		12	4	2017	\$ 79.43
				tion of Exp Γ CARD PR		
To Whom Paid US POSTAL SERVICE			МО	DAY	YEAR	
Mailing Address				8	2017	\$ 90.00
City State Zip Code (Plus 4)				otion of Exp	penditure	
To Whom Paid ZAZZLE, INC.			МО	DAY	YEAR	
Mailing Address			10	2	2017	\$ 60.29
City	State	Zip Code (Plus 4)		otion of Exp		
To Whom Paid ZIPPITY PRINT, LLC			МО	DAY	YEAR	
Mailing Address 1600 E 23RD	) ST		8	10	2017	\$ 61.67
City CLEVELAND	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 441144208		otion of Exp ESS CARD		
Enter Grand Total of Expendi	tures on Page 1, Re	port Cover Page, Item D				\$ <b>PAGE TOTAL</b> 1,451.78

### 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 JOSH CAMSON Fr				<u>11/28/2017</u> <b>To:</b>				2/31/2017
					DATE			Outstanding Balance of Debt
Name of Creditor JOSHUA H. CAMSON				мо	DAY	YEAR		
Mailing Address 245 SHIRLE	Y DR			8	4	2017	\$	2,000.00
City HARLEYSVILLE	State PA	<b>Zip Code (Pl</b> 194381949	•	Description of Debt				
Enter Grand Total of Unpaid	d Debts on Page 1	l, Report Cover Pa	ge, Item	G.			\$	2,000.00