

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 2346												
City: WILLIAMSPORT						State: PA			Zip Code: 1770			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7. X	Year 2017	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			
						11	7	2017	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		11	28	2017		12	31	2017				
A. Amount Brought Forward From Last Report						\$ 72,793.69						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 9,750.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 82,543.69						
D. Total Expenditures (From Schedule III)						\$ 25,473.48						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 57,070.21						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 32,829.00						

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 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

Name of Filing Committee or Candidate	Reporting Period
YAW, GENE FRIENDS OF FOR SENATE	From: <u>11/28/2017</u> To: <u>12/31/2017</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)	\$ 0.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 0.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 9,750.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 9,750.00

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.)	\$ 9,750.00
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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				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 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>11/28/2017</u> To: <u>12/31/2017</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee LAWPAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 212 N THIRD ST SUITE 203				6	10	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee HAPAC-STATE				MO	DAY	YEAR	\$ 500.00
Mailing Address 30 NORTH 3RD ST STE. 600				6	10	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee HAPAC-STATE				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 30 NORTH 3RD ST STE. 600				8	1	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee PA ASSOCIATION FOR JUSTICE				MO	DAY	YEAR	\$ 500.00
Mailing Address 212 N THIRD ST				8	1	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee CABOT OIL AND GAS PAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 840 GESSNER ROAD SUITE 1400				8	21	2017	
City HOUSTON	State TX	Zip Code (Plus 4) 77024					
Full Name of Contributing Committee HALLIBURTON CO PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 10200 BELLAIRE BLVD				10	2	2017	
City HOUSTON	State TX	Zip Code (Plus 4) 77072					

Full Name of Contributing Committee WINDSTREAM COMMUNICATIONS			MO	DAY	YEAR	\$ 250.00
Mailing Address 124 EAST MAIN ST			11	1	2017	
City EPHRATA	State PA	Zip Code (Plus 4) 17522				
Full Name of Contributing Committee THE GLAXOSMITHKLINE PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 5 MOORE DRIVE			11	1	2017	
City TRIANGLE PARK	State NC	Zip Code (Plus 4) 27709				
Full Name of Contributing Committee TROOPERS ASSOCIATION PAC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 3625 VARTAN WAY			11	17	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110				
Full Name of Contributing Committee EQT			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 500 N 3RD ST			12	11	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee DOMINION PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 1 JAMES RIVER PLAZA 20TH FLOOR RICHMOND VA 2361 20TH FLOOR 20TH FLOOR 20TH FLOOR			12	19	2017	
City	State	Zip Code (Plus 4)				
Full Name of Contributing Committee AETNA INC PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 20 F ST NW			12	26	2017	
City WASHINGTON	State DC	Zip Code (Plus 4) 20001				
Full Name of Contributing Committee EXXONMOBIL PAC			MO	DAY	YEAR	\$ 1,500.00
Mailing Address 5959 LAS COLINAS BLVD			12	26	2017	
City IRVING	State TX	Zip Code (Plus 4) 75039				

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

PAGE TOTAL

\$ 9,750.00

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
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.

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:
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				DATE	AMOUNT		
Full Name				MO	DAY	YEAR	\$ 0.00
Mailing Address							
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		Reporting Period	
YAW, GENE FRIENDS OF FOR SENATE		From: <u>11/28/2017</u> To: <u>12/31/2017</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 RECIEVED - 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:
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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.						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:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
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>11/28/2017</u> To: <u>12/31/2017</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
USPS				
Mailing Address REACH ROAD	6	23	2017	\$ 11.41
City WILLIAMSPORT	State PA	Zip Code (Plus 4) 17701	Description of Expenditure STAMPS	
To Whom Paid	MO	DAY	YEAR	
GENE YAW				
Mailing Address 1916 MOUNTVIEW AVE	7	13	2017	\$ 282.00
City MONTOURSVILLE	State PA	Zip Code (Plus 4) 17754	Description of Expenditure REIMBURSE FOR PROMOTIONAL MATERIALS	
To Whom Paid	MO	DAY	YEAR	
GENE YAW				
Mailing Address 1916 MOUNTVIEW AVE	6	15	2017	\$ 180.20
City MONTOURSVILLE	State PA	Zip Code (Plus 4) 17754	Description of Expenditure REIMBURSE FOR STORAGE UNIT	
To Whom Paid	MO	DAY	YEAR	
GENE YAW				
Mailing Address 1916 MOUNTVIEW AVE	6	15	2017	\$ 10,000.00
City MONTOURSVILLE	State PA	Zip Code (Plus 4) 17754	Description of Expenditure PAYMENT ON LOAN	
To Whom Paid	MO	DAY	YEAR	
SULLIVAN COUNTY AGRICULTURAL SOCIETY				
Mailing Address 512 LAMBERT HILL ROAD	7	13	2017	\$ 40.00
City DUSHORE	State PA	Zip Code (Plus 4) 18614	Description of Expenditure ADVERTISING	
To Whom Paid	MO	DAY	YEAR	
VISITORS BUREAU				
Mailing Address	7	13	2017	\$ 150.00
City WILLIAMSPORT	State PA	Zip Code (Plus 4) 17701	Description of Expenditure ADVERTISING	

To Whom Paid GENE YAW			MO	DAY	YEAR	\$ 90.10
Mailing Address 1916 MOUNTVIEW AVE			7	17	2017	
City MONTOURSVILLE	State PA	Zip Code (Plus 4) 17754	Description of Expenditure REIMBURSE STORAGE UNIT FEE			

To Whom Paid GENE YAW			MO	DAY	YEAR	\$ 44.00
Mailing Address 1916 MOUNTVIEW AVE			7	18	2017	
City MONTOURSVILLE	State PA	Zip Code (Plus 4) 17754	Description of Expenditure REIMBURSE POSTAGE			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 10,797.71

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>11/28/2017</u> To: <u>12/31/2017</u>
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				DATE		Outstanding Balance of Debt	
Name of Creditor				MO	DAY	YEAR	
GENE YAW							
Mailing Address							\$
1916 MOUNTVIEW AVE							32,829.00
City	State		Zip Code (Plus 4)	Description of Debt			
MONTOURSVILLE	PA		17754	VARIOUS EXPENDITURES FROM PRIOR RECORDING PERIODS			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL
							\$ 32,829.00