

# 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>		2008329		<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 JOHN LAWRENCE												
<b>Street Address:</b> PO BOX 331												
<b>City:</b> WEST GROVE						<b>State:</b> PA			<b>Zip Code:</b> 19390			
<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 2018		<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>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>				
						11	6	2018				
									(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	27	2018		4	30	2018				
<b>A. Amount Brought Forward From Last Report</b>						\$			3,362.68			
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$			5,900.00			
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$			9,262.68			
<b>D. Total Expenditures (From Schedule III)</b>						\$			265.00			
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$			8,997.68			
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$			100.00			
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$			500.00			

## 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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF JOHN LAWRENCE	From: <u>3/27/2018</u> To: <u>4/30/2018</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>	\$ 150.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 150.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 5,750.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 5,750.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<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>	\$ 5,900.00
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<div> <div> PART A</div> <div> CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES</div> <div> \$50.01 TO \$250.00</div> <div> 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.</div> </div>							
Name of Filing Committee or Candidate				Reporting Period			
				From:	To:		
				DATE	AMOUNT		
Full Name of Contributing Committee				MO	DAY	YEAR	<div>\$</div> <div>0.00</div>
Mailing Address							
City	State	Zip Code (Plus 4)					

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

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

**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)**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF JOHN LAWRENCE	<b>Reporting Period</b>  <b>From:</b> <u>3/27/2018</u> <b>To:</b> <u>4/30/2018</u>
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DATE					AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$150.00
JOSEPH FECONDO							
Mailing Address PO BOX 1545				2	6	2018	
City CAMP HILL		State PA	Zip Code (Plus 4) 17011				

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

<b>PAGE TOTAL</b>
\$ 150.00

# 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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF JOHN LAWRENCE	<b>Reporting Period</b>  <b>From:</b> <u>3/27/2018</u> <b>To:</b> <u>4/30/2018</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee PA CHIROPRACTIC ASSOC PAC				MO	DAY	YEAR	\$  250.00
Mailing Address    1335 N FRONT ST							
City    HARRISBURG	State PA	Zip Code (Plus 4) 17102					
Full Name of Contributing Committee ELI LILLY PAC				MO	DAY	YEAR	\$  250.00
Mailing Address							
City    INDIANAPOLIS	State IN	Zip Code (Plus 4) 46285					
Full Name of Contributing Committee BRAVO PAC				MO	DAY	YEAR	\$  250.00
Mailing Address    20 N MARKET SQ							
City    HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee FRIENDS OF MARTIN CAUSER				MO	DAY	YEAR	\$  250.00
Mailing Address    PO BOX 124							
City    BRADFORD	State PA	Zip Code (Plus 4) 16701					
Full Name of Contributing Committee CU PAC				MO	DAY	YEAR	\$  250.00
Mailing Address    4308 N FRONT ST							
City    HARRISBURG	State PA	Zip Code (Plus 4) 17110					
Full Name of Contributing Committee EXELON PAC				MO	DAY	YEAR	\$  500.00
Mailing Address    101 CONSTITUTION AVE							
City    WASHINGTON	State DC	Zip Code (Plus 4) 20001					

Full Name of Contributing Committee				MO	DAY	YEAR	\$ 250.00
FARMER PAC				2	16	2018	
Mailing Address PO BOX 8736							
City CAMP HILL	State PA	Zip Code (Plus 4) 17001					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 250.00
AQUA H2O PAC				2	2	2018	
Mailing Address 762 W LANCASTER AVE							
City BRYN MAWR	State PA	Zip Code (Plus 4) 19010					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
PAA PAC				1	24	2018	
Mailing Address 1925 N FRONT ST							
City HARRISBURG	State PA	Zip Code (Plus 4) 17105					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 250.00
BIKE PAC				1	30	2018	
Mailing Address PO BOX 564							
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 250.00
CPA PAC				2	5	2018	
Mailing Address 500 N 3RD ST							
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 250.00
PECO PAC				2	1	2018	
Mailing Address 2301 N MARKET ST							
City PHILA	State PA	Zip Code (Plus 4) 19103					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PA BAR PAC				1	29	2018	
Mailing Address 100 SOUTH STREET							
City HARRISBURG	State PA	Zip Code (Plus 4) 17108					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 250.00
PPL PEOPLE FOR GOOD GOVT				1	31	2018	
Mailing Address 2 N 9TH ST							
City ALLENTOWN	State PA	Zip Code (Plus 4) 18101					

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
PENNA BANKERS PAC						
Mailing Address 3897 N FRONT ST			2	21	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 500.00
UPAC			2	23	2018	
Mailing Address PO BOX 458						
City CAMP HILL	State PA	Zip Code (Plus 4) 17001				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
PA MEDICAL PAC			2	8	2018	
Mailing Address PO BOX 8820						
City HARRISBURG	State PA	Zip Code (Plus 4) 17105				

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

<p><b>PAGE TOTAL</b></p> <p>\$ 5,750.00</p>
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**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	YEAR	\$ 0.00
Mailing Address						
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.**

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

				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.

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

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF JOHN LAWRENCE		From: <u>3/27/2018</u> To: <u>4/30/2018</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)	\$ 100.00
<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.)			\$ 100.00

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

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF JOHN LAWRENCE	<b>Reporting Period</b>  <b>From:</b> <u>3/27/2018</u> <b>To:</b> <u>4/30/2018</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
JOHN LAWRENCE							
<b>Mailing Address</b> 12 BRAMBLE LN							
<b>City</b> WEST GROVE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19390		3	6	2018	\$ 100.00
<b>Description of Contribution:</b> FILING FEE							
<b>Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.</b>							<b>PAGE TOTAL</b>  \$ 100.00

**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

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF JOHN LAWRENCE	<b>Reporting Period</b>  From <u>3/27/2018</u> To: <u>4/30/2018</u>
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				DATE	AMOUNT		
To Whom Paid				MO	DAY	YEAR	\$ 265.00
OLD TOWN DELI							
Mailing Address 512 N 3RD ST				2	6	2018	
City HARRISBURG		State PA		Zip Code (Plus 4) 17101		Description of Expenditure FUNDRAISER BFAST	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL \$ 265.00

**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 JOHN LAWRENCE	<b>Reporting Period</b>  <b>From:</b> <u>3/27/2018</u> <b>To:</b> <u>4/30/2018</u>
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				DATE			Outstanding Balance of Debt
Name of Creditor				MO	DAY	YEAR	\$ 500.00
JOHN LAWRENCE							
Mailing Address							
12 BRAMBLE LN							
City	State		Zip Code (Plus 4)	Description of Debt			
WEST GROVE	PA		19390	CAMPAIGN LOAN			

<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>	<b>PAGE TOTAL</b> \$ 500.00
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