

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 : 20170267		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF JOSH CAMSON											
Street Address: PO BOX 558											
City: HARLEYSVILLE				State: PA		Zip Code: 19438					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	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. X	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2018	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	DEM			
					11	6	2018	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		10	23	2018		11	26	2018			
A. Amount Brought Forward From Last Report					\$ 11,601.33						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 2,348.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 13,949.33						
D. Total Expenditures (From Schedule III)					\$ 6,764.90						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 7,184.43						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 1,000.00						

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
FRIENDS OF JOSH CAMSON	From: <u>10/23/2018</u> To: <u>11/26/2018</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 173.00

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)	\$ 675.00
TOTAL for the Reporting Period (2)	\$ 675.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 1,500.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 1,500.00

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.)	\$ 2,348.00
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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:
<div style="display: flex; justify-content: space-between;"> DATE AMOUNT </div>	

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 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)**

Name of Filing Committee or Candidate FRIENDS OF JOSH CAMSON	Reporting Period From: <u>10/23/2018</u> To: <u>11/26/2018</u>
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				DATE		AMOUNT	
Full Name of Contributor STAN CAMSON				MO	DAY	YEAR	\$ 75.00
Mailing Address 128 MEADOWFIELD DR				10	25	2018	
City SOUTHAMPTON	State PA	Zip Code (Plus 4) 189663046					
Full Name of Contributor MARSHA GRUBB				MO	DAY	YEAR	\$ 100.00
Mailing Address 875 GERANIUM DR				10	24	2018	
City WARRINGTON	State PA	Zip Code (Plus 4) 189762487					
Full Name of Contributor DONALD G MILLER				MO	DAY	YEAR	\$ 200.00
Mailing Address 137 E WOODS DR				11	5	2018	
City HARLEYSVILLE	State PA	Zip Code (Plus 4) 194381849					
Full Name of Contributor JOHN MUNRO				MO	DAY	YEAR	\$ 100.00
Mailing Address 990 OLD SUMNEYTOWN PIKE				10	25	2018	
City HARLEYSVILLE	State PA	Zip Code (Plus 4) 194381215					
Full Name of Contributor ROBERT WINKELMAN				MO	DAY	YEAR	\$ 200.00
Mailing Address 1294 MONTGOMERY AVE				10	25	2018	
City NARBERTH	State PA	Zip Code (Plus 4) 190721750					

PAGE TOTAL

\$ 675.00

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 FRIENDS OF JOSH CAMSON	Reporting Period From: <u>10/23/2018</u> To: <u>11/26/2018</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee MONTGOMERY COUNTY DEMOCRATIC COMMITTEE				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 21 E AIRY ST				11	8	2018	
City NORRISTOWN	State PA	Zip Code (Plus 4) 194014815					
Full Name of Contributing Committee TURN PA BLUE				MO	DAY	YEAR	\$ 500.00
Mailing Address				11	12	2018	
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 1,500.00

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	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.

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:

				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	
FRIENDS OF JOSH CAMSON		From: <u>10/23/2018</u> To: <u>11/26/2018</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

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF JOSH CAMSON	From <u>10/23/2018</u> To: <u>11/26/2018</u>

DATE				AMOUNT		
To Whom Paid JOSHUA H. CAMSON			MO	DAY	YEAR	\$ 1,336.24
Mailing Address 245 SHIRLEY DR			11	8	2018	
City HARLEYSVILLE	State PA	Zip Code (Plus 4) 194381949	Description of Expenditure REIMBURSEMENT - ROBO CALL			
To Whom Paid JOSHUA H. CAMSON			MO	DAY	YEAR	\$ 3,072.60
Mailing Address 245 SHIRLEY DR			11	26	2018	
City HARLEYSVILLE	State PA	Zip Code (Plus 4) 194381949	Description of Expenditure REIMBURSEMENT			
To Whom Paid ZIPPITY PRINT, LLC			MO	DAY	YEAR	\$ 2,356.06
Mailing Address 1600 E 23RD ST			10	25	2018	
City CLEVELAND	State OH	Zip Code (Plus 4) 441144208	Description of Expenditure PRINTING AND POSTAGE COSTS FOR MAILPIECE			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 6,764.90

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				Reporting Period			
FRIENDS OF JOSH CAMSON				From: <u>10/23/2018</u> To: <u>11/26/2018</u>			
							Outstanding Balance of Debt
							DATE
Name of Creditor				MO	DAY	YEAR	
JOSHUA H. CAMSON				8	4	2017	
Mailing Address 245 SHIRLEY DR							\$ 1,000.00
City HARLEYSVILLE		State PA		Zip Code (Plus 4) 194381949		Description of Debt LOAN RECEIVED	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL
							\$ 1,000.00