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 2011	090			Rep File			CAND	ANDIDATE COMMITTEE LOBBYIST								
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		FRIE	ND:	S FOF	R JUDY S	CHWA	NK							
Street Address:	P O BOX 1242	24															
City:	READING							State:	PA	PA			Zip Code: 19612				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	/ PRE	- 2	2.	30 DA		POST-	3.		AMENDMENT REPORT?		Yes	No	\	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	/ PRE	- 5	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	\	
report type)	ANNUAL REPORT	7. X	Year 2018					NG METH CHECK C				PAPER		/	DISKE	TTE	
Name of Office S	- Sought by Candida	te:						DATE (F ELE	CTIC	NC	District Number	Office Code	Par	ty Code	County Code	
								МО	DAY	Υ	EAR		10000				
								11		6	2018		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY	YEAR	l			МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	irom:	1	11 27	2	018	T	<u> </u>	12	2	31	2018						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			106,	472.95						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$				0.00						
C. Total Funds Available (Sum Of Lines A and B)							\$			106,	472.95						
D. Total Expenditures (From Schedule III)							\$			2,	059.73						
E. Ending Cash	Balance (Subtract	t Line D	From Line C	c)			\$			104,	413.22						
F. Value Of In-	Kind Contributions	Receive	ed (From Sc	hedu	le II))	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			1			
				AFF	IDA	VI	ΓSE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	nere. I	If this	s is	a Car	ndidate r	eport,	candi	idate sig	ın here.					
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sch	edules	s filed	on	paper	or by elec	tronic m	ediun	n, are to t	he best o	f my kno	wledge a	and belie	ef , true	
Sworn to and subs	cribed before me this day of	i	20								Signature	of Perso	n Submit	ting Rep	ort		
	Signatu	re					-					Prin	ted Name	e			
My Commission Ex	_											Ema	il				
	мо	D/	AY	YR			_		Ar	ea Co	de	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nittee	e, Ca	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and belie	ef this	politi	ical	comm	ittee has i	not viola	ted a	ny provisi	ions of the	e act of J	une 3,19	937 (P.L.	1333,	
Sworn to and subsc	ribed before me this										Si	ignature o	of Candid	ate			
	day of ————————————————————————————————————						-					Printe	d Name				
	Signature						-										
My Commission Exp	ires											Ema	il				
	МО	D/	AY	YR			•		Area	Code		Da	aytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS FOR JUDY SCHWANK	From:	11/27/201	<u>8</u> To:	12/31/2018
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	y Period	(2)	\$	0.00
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	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

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		Re	porting	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.

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 Candi	date			Rep	orting P	eriod			
				Fro	m:		To):	
						DATE			AMOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus 4)						
								$\overline{}$	

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			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary Pa	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:		To) :	
				D	ATE		ı	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Pla Business	ce of	City			State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	edule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 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	ting Perio	bd			
			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. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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 Pe	eriod	
FRIENDS FOR JUDY SCHWANK	From:	11/27/2018 To:	12/31/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUT	OR	
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			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sche	dule II. In-Kind (Contributions Deta	iled Sum	marv Pac	ıe.		PAGE TOTAL
Section 2.	,			,		\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Reporting	Period			
					From:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus	4)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Can	didate		Reporti	ng Period			
FRIENDS FOR JUDY SCHWANK			From	11/2	7/2018	То:	12/31/2018
				DATE			AMOUNT
To Whom Paid NGP VAN INC			МО	DAY	YEAR		
Mailing Address 1225 I ST NV	/ STE 1225		12	20	2018	\$	450.00
City WASHINGTON	State DC	Zip Code (Plus 4) 200055918		otion of Exp		1	
To Whom Paid PENN AG DEMOCRATS			мо	DAY	YEAR		
Mailing Address 2120 ROSED	ALE AVE		12	20	2018	\$	75.00
City MIDDLETOWN	State PA	Zip Code (Plus 4) 170573453	Description of Expenditure LUNCHEON TICKETS				
To Whom Paid READING CHEERLEADING PARE!	ITS GROUP		мо	DAY	YEAR		
Mailing Address 1033 FREDRI	CK BLVD		12	9	2018	\$	100.00
City READING	State PA	Zip Code (Plus 4) 196051166		otion of Exp			
To Whom Paid JUDITH L SCHWANK			МО	DAY	YEAR		
Mailing Address 169 STITZER	RD STE 232		12	26	2018	\$	234.73
City READING	State PA	Zip Code (Plus 4) 19604		otion of Exp			
To Whom Paid STIRLING GUEST HOTEL			МО	DAY	YEAR		
Mailing Address 1120 CENTRE	AVE		12	21	2018	\$	700.00

Zip Code (Plus 4)

196011410

Description of Expenditure

REFRESHMENTS

State

PΑ

City

READING

							 TAGE 12
	om Paid YODER			мо	DAY	YEAR	
Mailing	Address 1601 LOR	RAINE RD		12	16	2018	\$ 500.00
City	READING	State PA	Zip Code (Plus 4) 196041633		otion of Exp		
Enter	Grand Total of Expe	nditures on Page 1, Re	port Cover Page, Item D	·_			PAGE TOTAL
	·	- ,					\$ 2,059.73