Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

| Filer Identificat | ion | 2011 | 090 | | | Report | | CANDI | DATE | COM | IMITTEE | \checkmark | LOBI | BYIST | |
|--|-----------------------|--------------|-----------|-----------------------|---------|-------------|---------------|---------------------|-----------|--------------|----------------------|---------------|--------------|----------|----------------|
| Number : | | | | | | Filed E | - | | | | | | | | |
| Name of Filing (| | | | obbyist: | | FRIEND | S FU | R JUDY S | CHWAN | К | | | | | |
| Street Address: | PO B | OX 12424 | 4 | | | | | | | | - | | | | |
| City: | READ | DING | | | | | | State: | PA | | Zip Co | de: 19 | 612 | | |
| TYPE OF REPORT | 6TH TUES PRE-PRIM | | 1. | 2ND FRIDA PRIMARY | Y PRE | - 2. | 30 DA PRIM | | POST- | 3. | AMENDMENT REPORT? | | Yes | No |) 🗸 |
| (place X to the right of | 6TH TUES PRE-ELEC | - | 4. | 2ND FRIDA ELECTION | y pre | 5. X | 30 DA ELEC | | POST- | 6. | TERMIN REPORT | | Yes | No | · 🗸 |
| report type) | ANNUAL | REPORT | 7. | Year 2019 | | | | NG METHO CHECK O | | | PAPER | | \checkmark | DISK | TTE |
| Name of Office S | ⊥ Sought by | / Candidat | e: | | | | | DATE O | F ELEC | TION | District Number | | Par | ty Code | County Code |
| | | | | | | | | мо | DAY | YEAR | 11 | STS | DEN | 1 | 06 |
| SENATOR IN T | HE GENE | RAL ASSE | MBLY | | | | | 11 | | 5 201 | 9 | (SEE INS | TRUCTI | ONS FOR | CODES) |
| Summary of | Receipts | s and | мо | DAY | YEAR | 2 | | мо | DAY | YEAR | F(| OR OFFIC | E USE | ONLY | |
| Expenditures | tures from: | | | | | | 1 201 | 9 | | | | | | | |
| A. Amount Bro | ought Forv | ward Fron | n Last R | eport | • | | \$ | | 1 | 15,015.2 | D | | | | |
| B. Total Monetary Contributions And Receipts (From Schedule I) | | | | | | | | 2,325.0 | D | | | | | | |
| C. Total Funds | Available | e (Sum Of | Lines A | and B) | | | \$ | ; | 1 | 17,340.2 | כ | | | | |
| D. Total Expen | ditures (I | From Sche | edule II | [) | | | \$ | 5 | | 2,870.57 | 7 | | | | |
| E. Ending Cash | n Balance | (Subtract | Line D | From Line | C) | | \$ | 5 | 1 | 14,469.63 | 3 | | | | |
| F. Value Of In- | Kind Con | tributions | Receive | ed (From S | chedu | le II) | \$ | 5 | | 0.00 |) | | | | |
| G. Unpaid Deb | ts And Ob | ligations | (From S | chedule IV |) | | \$ | 5 | | 0.00 |) | | | | |
| | | | | | AFF | IDAVI | t se | CTION | | | | | | | |
| PART I - If this i | s a Comm | nittee repo | ort, trea | surer sign | here. I | If this is | a Ca | ndidate re | eport, ca | andidate s | ign here. | | | | |
| I swear (or affirm correct and compl | | report, incl | uding the | attached scl | hedules | s filed on | paper | or by elect | ronic me | dium, are to | the best o | of my knov | vledge | and bel | ef , true |
| Sworn to and subs | scribed beford day of | ore me this | | 20 | | | | | | Signatu | re of Perso | on Submitt | ing Rep | ort | |
| | _ | | | | | | - | | | | Prir | nted Name | | | |
| My Commission E | xpires | Signatur | re | | | | | | | | Ema | | | | |
| | | мо | DA | AY | YR | | - | | Area | a Code | | ne Teleph | one Nu | mber | |
| Part II- If this is | a report | of a cand | lidate's | authorized | Comn | nittee, C | andid | late shall | sian he | re. | | | | | |
| I swear (or affirm) No 320) as amend |) that to th | | | | | • | | | • | | isions of th | ie act of Ju | ine 3,1 | 937 (P.I | 1333, |
| Sworn to and subse | cribed befo | re me this | | | | | | | | | Signature | of Candida | ite | | |
| | day of | | | | | | _ | | | | | | | | |
| | | Signature | | | | | _ | | | | Print | ed Name | | | |
| My Commission Exp | | o.gnature | | | | | | | | | Ema | ail | | | |
| | - | мо | D/ | AY | YR | | - | | Area C | ode | D | aytime Te | elephon | e Numb | er |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

| Detailed Summary Page | | | | | | | | | |
|---|-------------------------|-----------------|---------------|-------------------|--|--|--|--|--|
| Name of Filing Committee or Candidate | Reportin | g Period | | | | | | | |
| FRIENDS FOR JUDY SCHWANK | From: | <u>9/17/20:</u> | <u>19</u> To: | <u>10/21/2019</u> | | | | | |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contrib | utor | | | | | | | | |
| TOTAL f | or the Reporting Period | (1) | \$ | 750.00 | | | | | |
| 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and P | art B) | | | | | | | | |
| Contributions Received From Political Committees (Part A) | | | \$ | 0.00 | | | | | |
| All Other Contributions (Part B) | | | \$ | 475.00 | | | | | |
| TOTAL f | or the Reporting Period | (2) | \$ | 475.00 | | | | | |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | 1 | | | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 1,100.00 | | | | | |
| All Other Contributions (Part D) | | | \$ | 0.00 | | | | | |
| TOTAL f | or the Reporting Period | (3) | \$ | 1,100.00 | | | | | |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc | . (From Part E) | | | | | | | | |
| TOTAL f | or the Reporting Period | (4) | \$ | 0.00 | | | | | |
| | | | | | | | | | |
| Total Monetary Contributions and Receipts During this Reporting totals from Boxes 1,2,3 and 4; also enter this amount on Page1, | | | \$ | 2,325.00 | | | | | |
| | | | | | | | | | |

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 Candidat | e | | Reporting Period | | | | | |
|--|-------|------------------|------------------|-------------|-----|------|----|------------|
| | | | From | m: | | То | | |
| | | | | DATE AMOUNT | | | | |
| Full Name of Contributing Committee | | | | | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4 | 4) | | | | | |
| | | | | | | | | PAGE TOTAL |
| Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. | | | | | | | \$ | 0.00 |

| | iis Part to ite \$5 | OTHER \$50.0: emize all other 0.01 to \$250.0 putions from p | L TO \$250.00 contribution 00 in the repo | s w ortir | ith an 1g peri | aggrega iod. | | | rom | |
|--|------------------------|---|---|--------------|-------------------------|-----------------|------|----|---------------------|--|
| Name of Filing Comn | nittee or Candidat | e | | Rep | oorting P | eriod | | | | |
| FRIENDS FOR JUDY | | | | Fro | om: <u>9/17/2019</u> To | | | | : <u>10/21/2019</u> | |
| | | | | | | DATE | | | AMOUNT | |
| Full Name of Contribut CHARLES CORBIT | or | | | | мо | DAY | YEAR | | | |
| Mailing Address 54 | SAWGRASS DR | | 1 | | | | | \$ | 250.00 | |
| City READING | | State PA | Zip Code (Plus 4 196069626 |) | 10 | 20 | 2019 | | | |
| Full Name of Contribut | or | | | | мо | DAY | YEAR | | | |
| GEORGE M. MEISER I | K | | | | | | | | | |
| Mailing Address 91 | 1 SHELBOURNE | RD | Γ | | | | | \$ | 75.00 | |
| City READING | | State | Zip Code (Plus 4 |) | 10 | 1 | 2019 | | | |
| | | PA | 196069034 | | | | | | | |
| Full Name of Contribut | or | | | | мо | DAY | YEAR | | | |
| | 89 DEL MAR DR | | | | | | | \$ | 75.00 | |
| City READING | | State | Zip Code (Plus 4 |) | 9 | 20 | 2019 | | | |
| | | РА | 196068937 | | | | | | | |
| Full Name of Contribut | or | | | | мо | DAY | YEAR | | | |
| GAYLE SANDERS | | | | | | | | | | |
| | 1 TREXLER AVE | | | | | | | \$ | 75.00 | |
| City KUTZTOWN | | State | Zip Code (Plus 4 |) | 10 | 14 | 2019 | | | |
| | | PA | 195309242 | | | | | | | |
| | | | | | | | | | PAGE TOTAL | |
| Enter Grand Tot | al of Part A on S | Schedule I, Detail | ed Summary Pag | je, S | ection 2 | - | | \$ | 475.00 | |

PAGE 5

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 | 1 | | Reporting | g Period | | | | |
|--|--------------------|---------------------------|--------------------------|------------|---------|------------------------------|------------|------------|
| FRIENDS FOR JUDY SCHWANK | | | From: | <u>9/1</u> | .7/2019 | To: <u>10/21/2019</u> | | 0/21/2019 |
| | | | | DA | TE | | A | MOUNT |
| Full Name of Contributing Committee FIRSTENERGY PAC | | | | мо | DAY | YEAR | \$ | 300.00 |
| Mailing Address 76 S MAIN ST Sity AKRON State Zip Code (Plus 4) OH 443081812 | | | | . 10 | 15 | 2019 | | |
| Full Name of Contributing Committee GGR INC PAC | | | | мо | DAY | YEAR | \$ | 300.00 |
| Mailing Address 212 LOCUST ST S | FE 300 | | | 10 | 15 | 2019 | 1 * | 500.00 |
| City HARRISBURG | State PA | Zip Code 171011 | e (Plus 4) 510 | | | 2013 | | |
| Full Name of Contributing Committee PSEA PACE | | | | мо | DAY | YEAR | \$ | 500.00 |
| Mailing Address 400 N 3RD ST PO | BOX 1724 | _ | | 10 | 1 | 2019 | | |
| City HARRISBURG | State PA | Zip Code 171011 | e (Plus 4) 385 | | | | | |
| ter Grand Total of Part C on Schedule I, Detailed Summary Page, Sect | | | | n 3. | | | | PAGE TOTAL |
| | | | | | | | \$ | 1,100.00 |

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 | | | Rep | Reporting Period | | | | |
|---|---------------------|--------------|-----------|------------------|-------|------|----------|--------------------------|
| | | | Froi | n: | | Т |): | |
| | | | | D | ATE | | АМ | IOUNT |
| Full Name of Contributor | | | | мо | DAY | YEAR | \$ | 0.00 |
| Mailing Address | | | | | | | | |
| City | State | Zip Code (Pl | ıs 4) | | | | | |
| Employer Name | | | | Occupat | tion | | | |
| Employer Mailing Address/Principal Plac | ce of Business | City | | • | State | | Zip Code | e (Plus 4) |
| Enter Grand Total of Part C on Sche | dule I, Detailed Su | ummary Page | e, Sectio | on 3. | | | P# | AGE 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 | | | Report | ing Peric | d | | | | |
|---------------------------------------|----------------------|------------|---------|-----------|-----|------|----|---------|------|
| | | | From: | | | То: | | | |
| | | | | D | ATE | | | AMOUNT | r |
| ill Name | | | | мо | DAY | YEAR | \$ | | 0.00 |
| Mailing Address | | | | | | | | | |
| City | State | Zip Code (| Plus 4) | | | | | | |
| Receipt Description | · | • | | | | | • | | |
| | | _ | | | | | | PAGE TO | TAL |
| Enter Grand Total of Part E on Sched | ule 1, Detailed Sumn | nary Page, | Section | 4. | | | \$ | | 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 FOR JUDY SCHWANK | From: | <u>9/17/2019</u> то: | <u>10/21/2019</u> |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | ER CONTRIBUTOR | | |
| TOTAL for the Reporting Pe | riod (1) | \$ | 0.00 |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART | 「 F) | | |
| TOTAL for the Reporting Pe | riod (2) | \$ | 0.00 |
| 3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G) | | | |
| TOTAL for the Reporting Pe | riod (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, I | | \$ | 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: | | | То: | | |
| | | | 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 Sched Section 2. | ontributions Deta | iled Sum | mary Pag | e, | | PAGE TOTA | <u>، ۱</u> | |
| | Section 2. | | | | | | | 0.00 |

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

| Name of Filing Committee or Candidate | | | Rep | porting F | Period | | |
|--|-------------------|------------------|--------|-----------|--------------|--------|---------------------------|
| | | | Fro | m: | | То: | |
| | | | | | DATE | | AMOUNT |
| Full Name of Contributor | | | | мо | DAY | YEAR | |
| Mailing Address | | | | | | | \$ 0.00 |
| City | State | Zip Code(Plus 4) | | | | | |
| Employer of Contributor | | • | | Occupa | tion | | • |
| Employer Mailing Address/Principal Plac | e of Business C | lity | State | e Zip | Code(Plus 4) | Descri | ption of Contribution |
| Enter Grand Total of Part G on Sch Summary Page, Section 3. | edule II, In-Kind | Contributions D | etaile | d | | | PAGE TOTAL 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | | | Reporti | ng Period | | | | |
|--|-----------------------------------|-------------------|--------------|----------------------------|----------|--------|-------------------|--|
| FRIENDS FOR JUDY SCHWANK | | | From | <u>9/1</u> | 7/2019 | То: | <u>10/21/2019</u> | |
| | | | | DATE | | | AMOUNT | |
| To Whom Paid | | | мо | DAY | YEAR | | | |
| ACTBLUE | | | | | | | | |
| Mailing Address PO BOX 441146 | | | 9 | 30 | 2019 | \$ | 2.25 | |
| City WEST SOMERVILLE | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | МА | 021440031 | FEES | | | | | |
| To Whom Paid ACTBLUE | | | мо | DAY | YEAR | | | |
| Mailing Address PO BOX 441146 | | | 10 | 20 | 2019 | \$ | 9.76 | |
| City WEST SOMERVILLE | State | Zip Code (Plus 4) | Descrip | i tion of Exp | enditure | | | |
| | МА | 021440031 | FEES | | | | | |
| To Whom Paid B.A.R.N. | | | мо | DAY | YEAR | | | |
| Mailing Address 1238 COUNTY WELFARE RD STE 110 | | 10 | 20 | 2019 | \$ | 200.00 | | |
| City LEESPORT | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | PA | 195339709 | SPONSORSHIP | | | | | |
| To Whom Paid BARRIO ALLEGRIA | | | мо | DAY | YEAR | | | |
| Mailing Address 140 N 5TH ST | | | 10 | 2 | 2019 | \$ | 50.00 | |
| City READING | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | 1 | | |
| | PA | 196013402 | SPONSO | ORSHIP | | | | |
| To Whom Paid BERNANDINE FRANCISCAN SISTERS | | | мо | DAY | YEAR | | | |
| Mailing Address 450 SAINT BERNAR | DINE ST | | 10 | 2 | 2019 | \$ | 50.00 | |
| City READING | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | РА | 196071737 | SPONSO | ORSHIP | | | | |
| To Whom Paid FRIENDS FOR DONNA REED | | | мо | DAY | YEAR | | | |
| Mailing Address 1525 ARGONNE RD | | | 10 | 15 | 2019 | \$ | 250.00 | |
| City READING | ty READING State Zip Code (Plus 4 | | | Description of Expenditure | | | | |
| | PA | 196011314 | CONTRIBUTION | | | | | |

| | | | | | | | | FAGE 12 | |
|--|----------------------------------|-----------------------|-------------------------|----------------------------|-------------|----------|--------|------------|--|
| To Wh | om Paid | | | мо | DAY | YEAR | | | |
| FRIEN | DS FOR KEVIN BARNHAR | RDT | | 110 | | | | | |
| Mailin | g Address 8 EAGLES L | Ν | | 10 | 15 | 2019 | \$ | 250.00 | |
| City | SINKING SPRING | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | | PA | 196089381 | CONTRI | BUTION | | | | |
| To Wh | om Paid | | | мо | DAY | YEAR | | | |
| NGP V | AN INC | | | | | | | | |
| Mailin | g Address 1225 I ST N | IW STE 1225 | | 10 | 3 | 2019 | \$ | 450.00 | |
| City | WASHINGTON | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | | DC | 200055918 | CAMPA | GN ASSIS | TANCE | | | |
| To Wh | om Paid | | | мо | DAY | YEAR | | | |
| READ | NG BRANCH NAACP | | | | | | | | |
| Mailin | g Address 529 COURT | ST STE 207 | | 9 | 18 | 2019 | \$ | 270.00 | |
| City | READING | State | Zip Code (Plus 4) | Description of Expenditure | | | | | |
| | | PA | 196013444 | SPONS | ORSHIP | | | | |
| To Wh | om Paid | | | мо | DAY | YEAR | | | |
| JUDIT | H L SCHWANK | | | | | | | | |
| Mailing Address 169 STITZER RD STE 232 | | | | 10 | 6 | 2019 | \$ | 322.21 | |
| City | READING | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | - | | |
| | | PA | 19604 | MISCEL | LANEOUS | EXPENSE | S | | |
| To Wh | om Paid | | | мо | DAY | YEAR | | | |
| JUDIT | H L SCHWANK | | | | | | | | |
| Mailin | g Address 169 STITZE | R RD STE 232 | | 10 | 20 | 2019 | \$ | 250.96 | |
| City | READING | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | | PA | 19604 | WEBSIT | E AND PO | STAGE | | | |
| | om Paid | | | мо | DAY | YEAR | | | |
| | RSAL BEVERAGE | | | | 10 | | \$ | 155.39 | |
| Mailin | g Address 80 S WHITE | | | 9 | 18 | 2019 | 4 | 155.59 | |
| City | KUTZTOWN | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | | PA | 195301622 | REFRES | HMENTS | | | | |
| | om Paid | | | мо | DAY | YEAR | | | |
| | YODER | | | | | | - - | 610.00 | |
| Mailin | Mailing Address 1601 LORRAINE RD | | | 10 | 2 | 2019 | \$ | 610.00 | |
| City | READING | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | | PA | 196041633 | CAMPAI | GN ASSIS | TANCE | | | |
| Enter | Grand Total of Expend | litures on Page 1. Re | port Cover Page, Item D |). | | | | PAGE TOTAL | |
| | | | | - | | | \$ | 2,870.57 | |
| | | | | | | | | | |

7/16/2025 1:09:19 PM