

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: GENE YAW FOR SENATE										
Street Address: PO BOX 3246										
City: WILLIAMSPORT			State: PA	Zip Code: 17701						
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1. <input checked="" type="checkbox"/>	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.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2020	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	3	2020	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		1	1	2020	TO	3	9	2020		
A. Amount Brought Forward From Last Report			\$			100,309.11				
B. Total Monetary Contributions And Receipts (From Schedule I)			\$			2,000.00				
C. Total Funds Available (Sum Of Lines A and B)			\$			102,309.11				
D. Total Expenditures (From Schedule III)			\$			2,947.24				
E. Ending Cash Balance (Subtract Line D From Line C)			\$			99,361.87				
F. Value Of In-Kind Contributions Received (From Schedule II)			\$			0.00				
G. Unpaid Debts And Obligations (From Schedule IV)			\$			17,829.00				

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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
GENE YAW FOR SENATE	From: <u>1/1/2020</u> To: <u>3/9/2020</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)	\$ 2,000.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 2,000.00

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.)	\$ 2,000.00
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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	
Mailing Address				\$ 0.00
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	Reporting Period
	From: _____ To: _____

				DATE	AMOUNT
Full Name of Contributor					\$ 0.00
Mailing Address	MO	DAY	YEAR		
City	State	Zip Code (Plus 4)			

PAGE TOTAL
\$ 0.00

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 GENE YAW FOR SENATE	Reporting Period From: <u>1/1/2020</u> To: <u>3/9/2020</u>
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			DATE	AMOUNT		
Full Name of Contributing Committee	Mailing Address	City	MO	DAY	YEAR	
DOMINION ENERGY PAC			2	12	2020	\$ 500.00
518 EAST PITTSBURGH STREET	GREENSBURG	State PA	Zip Code (Plus 4) 15601			
ENERGY VOICES PAC			1	6	2020	\$ 500.00
2200 GEORGETOWN DRIVE SUITE 500			SEWICKLEY		State PA	
EQT PAC			1	6	2020	\$ 1,000.00
625 LIBERTY AVENUE SUITE 1700			PITTSBURGH		State PA	

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

PAGE TOTAL
\$ 2,000.00

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 GENE YAW FOR SENATE	Reporting Period From: <u>1/1/2020</u> To: <u>3/9/2020</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 RECEIVED - 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: _____

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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: _____
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Mailing Address					\$ 0.00
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
GENE YAW FOR SENATE	From <u>1/1/2020</u> To: <u>3/9/2020</u>

				DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR		
BB & T BANK	1	2	2020	\$	5.00
Mailing Address LOYALSOCK OFFICE					
City WILLIAMSPORT					
State PA					
Zip Code (Plus 4) 17701					
Description of Expenditure BANK FEE					
To Whom Paid E. EUGENE YAW	1	6	2020	\$	55.00
Mailing Address 1918 MOUNTAIN AVENUE					
City MONTOURSVILLE					
State PA					
Zip Code (Plus 4) 17754					
Description of Expenditure REIMBURSE FOR STAMPS					
To Whom Paid KRICK DESIGNA	1	6	2020	\$	329.34
Mailing Address 131 CLOVER LANE					
City PALMYRA					
State PA					
Zip Code (Plus 4) 17078					
Description of Expenditure FUNDRAISER INVITATIONS					
To Whom Paid BUDDY CROCKET	1	13	2020	\$	100.00
Mailing Address 918 W. LOCKHART STREET					
City SAYRE					
State PA					
Zip Code (Plus 4) 18840					
Description of Expenditure LINCOLN DAY AD					
To Whom Paid BUDDY CROCKET	1	13	2020	\$	30.00
Mailing Address 918 W. LOCKHART STREET					
City SAYRE					
State PA					
Zip Code (Plus 4) 18840					
Description of Expenditure LINCOLN DAY DINNER					
To Whom Paid AA SELF STORAGE	1	20	2020	\$	95.40
Mailing Address 5265 LYCOMING MALL DRIVE					
City MONTOURSVILLE					
State PA					
Zip Code (Plus 4) 17754					
Description of Expenditure ELECTION MATERIAL STORAGE					

To Whom Paid LYCOMING COUNTY REPUBLICAN COMMITTEE			MO	DAY	YEAR	\$	400.00
Mailing Address 460 MARKET STREET SUITE 125			1	22	2020		
City WILLIAMSPORT	State PA	Zip Code (Plus 4) 17701	Description of Expenditure LINCOLN DAY TICKETS				
To Whom Paid AA SELF STORAGE			MO	DAY	YEAR	\$	5.30
Mailing Address 5265 LYCOMING MALL DRIVE			1	30	2020		
City MONTOURSVILLE	State PA	Zip Code (Plus 4) 17754	Description of Expenditure ELECTION MATERIAL STORAGE RENT INCREASE CORRECTION				
To Whom Paid CENTRAL BRADFORD CHAMBER OF COMMERCE			MO	DAY	YEAR	\$	100.00
Mailing Address 304 MAIN STREET			1	31	2020		
City TOWANDA	State PA	Zip Code (Plus 4) 18848	Description of Expenditure MEMBERSHIP				
To Whom Paid BB&T BANK			MO	DAY	YEAR	\$	5.00
Mailing Address LOYALSOCK OFFICE			2	3	2020		
City WILLIAMSPORT	State PA	Zip Code (Plus 4) 17701	Description of Expenditure BANK FEE				
To Whom Paid SUSQUEHANNA COUNTY REPUBLICAN COMMITTEE			MO	DAY	YEAR	\$	40.00
Mailing Address 171 FOOLISH PLEASURE ROAD			2	4	2020		
City FRIENDSVILLE	State PA	Zip Code (Plus 4) 18818	Description of Expenditure LINCOLN DAY DINNER				
To Whom Paid LYCOMING COUNTY REPUBLICAN COMMITTEE			MO	DAY	YEAR	\$	150.00
Mailing Address 460 MARKET STREET SUITE 125			2	10	2020		
City WILLIAMSPORT	State PA	Zip Code (Plus 4) 17701	Description of Expenditure LINCOLN DAY PROGRAM AD				
To Whom Paid LORI KNOWLDEN			MO	DAY	YEAR	\$	500.00
Mailing Address 9964 ROUTE 14 HWY			2	11	2020		
City RALSTON	State PA	Zip Code (Plus 4) 17763	Description of Expenditure BOOKKEEPING SERVICES				
To Whom Paid AA SELF STORAGE			MO	DAY	YEAR	\$	100.70
Mailing Address 5265 LYCOMING MALL DRIVE			2	20	2020		
City MONTOURSVILLE	State PA	Zip Code (Plus 4) 17754	Description of Expenditure ELECTION MATERIAL STORAGE				

To Whom Paid				MO	DAY	YEAR	
UNITED STEELWORKERS							
Mailing Address 245 CENTERVILLE ROAD				2	20	2020	\$ 150.00
City LANCASTER	State PA	Zip Code (Plus 4) 17603	Description of Expenditure PROGRAM AD - DISTRICT 10				
To Whom Paid				MO	DAY	YEAR	
BB&T BANK							
Mailing Address LOYALSOCK OFFICE				3	2	2020	\$ 5.00
City WILLIAMSPORT	State PA	Zip Code (Plus 4) 17701	Description of Expenditure BANK FEE				
To Whom Paid				MO	DAY	YEAR	
E. EUGENE YAW							
Mailing Address 1918 MOUNTVIEW AVENUE				3	7	2020	\$ 766.50
City MONTOURSVILLE	State PA	Zip Code (Plus 4) 17754	Description of Expenditure REIMBURSEMENT MR. STICKY'S GIFTS				
To Whom Paid				MO	DAY	YEAR	
LINDA FIORILLA							
Mailing Address 2199 GLEIM COURT				3	7	2020	\$ 110.00
City ENOLA	State PA	Zip Code (Plus 4) 17025	Description of Expenditure REIMBURSE FOR STAMPS				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL \$ 2,947.24

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 GENE YAW FOR SENATE	Reporting Period From: <u>1/1/2020</u> To: <u>3/9/2020</u>
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Name of Creditor	DATE			Outstanding Balance of Debt
	MO	DAY	YEAR	
GENE YAW				\$ 17,829.00
Mailing Address 1916 MOUNTVIEW AVENUE				
City MONTOURSVILLE	State PA	Zip Code (Plus 4) 17754	Description of Debt PERSONAL MONEY IN CAMPAIGN	

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.	PAGE TOTAL \$ 17,829.00
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