Campaign Finance Report

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

	_						CANDI	DATE	COM	MITTEE		LOB	BYIST	
Filer Identificat Number :	ion 2010	223			Report Filed B		CANDI		COM	MITTEE	¥	2021	51151	
Name of Filing (Committee, Candid	ate or L	obbyist:		MASSE	२, KU	RT FRIEN	DS OF			_			
Street Address:	57 MOUNTAIN	N RD												
City:	SHAMOKIN						State:	PA		Zip Co	de: 17	872		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 DA PRIM		POST-	3.	AMENDI REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION				POST- 6	5.	TERMIN REPORT		Yes	No	\checkmark	
report type)	ANNUAL REPORT	7. X	Year 2020				NG METHO CHECK O			PAPER		\checkmark	DISKE	TTE
Name of Office Sought by Candidate: DATE OF ELECT							TION	District Number		Par	ty Code	County Code		
			мо	DAY	YEAR	107	STH	REP	•	49				
REPRESENTAL.	REPRESENTATIVE IN THE GENERAL ASSEMBLY							:	3 2020		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY	
Expenditures	s from:		11 24	2	020 T	0	12	3	1 2020	2				
A. Amount Bro	ught Forward From	n Last R	eport			\$			18,322.72					
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$	5	800.00						
C. Total Funds	Available (Sum Of	Lines A	and B)			\$	5		19,122.72					
D. Total Expen	ditures (From Sch	edule II	I)			\$	5		661.00					
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		\$	5		18,461.72	-				
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	chedu	le II)	\$	5		0.00	4				
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)		\$	5		0.00					
				AFF	IDAVI	T SE	CTION							
	s a Committee rep													
correct and compl) that this report, incl ete.	luding the	e attached sc	nedule	s filed on	paper	or by elect	ronic mee	lium, are to	the best o	of my knov	viedge	and bell	ef , true
Sworn to and subs	scribed before me this day of	5	20						Signatur	e of Perso	on Submitt	ing Rep	oort	
						_				Prir	nted Name			
My Commission E	Signatu xpires	re								Ema	ail			
	мо	D	AY	YR		-		Area	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a cano	didate's	authorized	Comn	nittee, C	andid	late shall	sign hei	·e.					
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	edge and beli	ief this	political	comm	nittee has n	ot violate	ed any provis	sions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subse	cribed before me this								5	Signature	of Candida	ite		
	day of 					_				Print	ed Name			
	Signature					-								
My Commission Exp	pires									Ema	ail			
	мо	D	AY	YR	1	-		Area C	ode	D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** MASSER, KURT FRIENDS OF From: <u>11/24/2020</u> **To:** 12/31/2020 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 250.00 **Contributions Received From Political Committees (Part A)** 250.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 500.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 300.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 300.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 800.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Re			Reporting	Reporting Period					
MASSER, KURT FRIENDS OF Fr			From:	From: <u>11/24/2020</u> To: <u>12/3</u>					
		DATE			AMOUNT				
Full Name of Contributing Committee UGI UTILITIES INC/UGI ENERGY S			мо	DAY	YEAR				
Mailing Address P.O. Box 120	577			_		\$	250.00		
City Reading	State	Zip Code (Plus 4	•) 12	2	2020				
	PA	19612							
						Г	PAGE TOTAL		

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

AGEIOTAL

\$

250.00

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 Candida	ite		Rep	porting P	eriod				
MASSER, KURT FRIENDS OF Fro				m:	<u>11/24/2</u>	:	<u>12/31/2020</u>		
					DATE			AMOUNT	
Full Name of Contributor Neil Masser				мо	DAY	YEAR			
Mailing Address 579 Main Road							\$	250.00	
City Leck Kill	State	Zip Code (Plus 4)	12	30	2020			
	PA	17806							
ן								PAGE TOTAL	
Enter Grand Total of Part A on	Schedule I,	Detailed Summary Pa	ge, S	ection 2			\$	250.00	

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			Reporting Period						
MASSER, KURT FRIENDS OF			From:	om: <u>11/24/2020</u> To: <u>12/31/202</u>					
DATE							AMOUNT		
Full Name of Contributing Committee BOWL PAC (BOWLING PROPRIETORS ASSN)					DAY	YEAR			
Mailing Address 200 N THIRD	ST STE 1500						\$	300.00	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101-0000		12	30	2020			
								PAGE TOTAL	
Enter Grand Total of Part C o	n Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	300.00	

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:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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	Name of Filing Committee or Candidate			Reporting Period						
Fro				rom: To:						
				D	ATE			AMOUNT	Г	
Full Name				мо	DAY	YEAR				
Mailing Address							\$	5	0.00	
City	State	Zip Code (Plus 4)							
Receipt Description	·						•			
Enter Grand Total of Part E on Sched	ule I. Detailed Sum	mary Page	Section	4				PAGE TO	TAL	
	are 1, Detailed Sum	iniai y Faye,	Section				\$		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 Perio	d	
MASSER, KURT FRIENDS OF	From:	<u>11/24/2020</u> то:	<u>12/31/2020</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 PAR	TF)		
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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Re			Reporting Period					
Fr					То:			
				DATE		АМО	UNT	
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 Schedule II, In-Kind Contributions Detail Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

0.00

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

Name of Filing Committee or Candidate				Reporting Period						
					Fro	m:		То:		
							DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupat	l tion		<u> </u>	
Employer Mailing Address/Prin Business	ncipal Place of	City		State		Zip 4)	Code(Plus	Descri	ption of	Contribution
Enter Grand Tatal of Dart	C on Schodula II		Contribut		-	d				PAGE TOTAL

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAGE

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Cand	didate		Reporti	ng Period			
MASSER, KURT FRIENDS OF			From	<u>11/24</u>	<u>4/2020</u>	То:	<u>12/31/2020</u>
				DATE			AMOUNT
To Whom Paid Mr. PA Football			мо	DAY	YEAR		
Mailing Address 4320 Crestview Road			12	2	2020	\$	400.00
CityHarrisburgStateZip Code (Plus 4)PA17112			Description of Expenditure Sponsorship				
To Whom Paid Greater Susquehanna Valley Chamber of Commerce			мо	DAY	YEAR		
Mailing Address 2859 N Susque	ehanna Trail		12	31	2020	\$	111.00
City Shamokin Dam	State PA	Zip Code (Plus 4) 17876	Descrip 2021 D	otion of Exp Dues	penditure		
To Whom Paid Elysburg Fire Department			мо	DAY	YEAR		
Mailing Address P. O. Box 288			12	30	2020	\$	150.00
City Elysburg	State PA	Zip Code (Plus 4) 17824	Descrip Donatio	otion of Exp	penditure		
Enter Grand Total of Expenditu	ures on Page 1. Re	port Cover Page. Item [).				PAGE TOTAL
	1.00 0.1 1 age 1, 1.0	port core: 1 age, 1000 -				\$	661.00