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 2	.02000	040				Repo Filed		:	CA	NDII	DATE		СОМИ	1ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, Car	ndidat	e or Lo	bbyis	t:	F	RIEN	DS (OF I	ERIC	DAV	/AMZC)							
Street Address:																				
City:	SMITHTON	N								State	e:	PA			Zip Code: 15479					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1		2ND F PRIMA	RIDAY ARY	PRE-	2.		DA IMA		Р	OST-	3.		AMENDMENT REPORT?		Yes	√ N	lo	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4	•	2ND F	RIDAY TION	PRE-	· 5.)	3 0 EL		Y ION	Р	OST-	6.		TERMINA REPORT?		Yes	Ν	lo	\
report type)	ANNUAL REPO	ORT 7	-	Year	2020						THOD PAPER I				DISK	ETTE				
Name of Office S	Sought by Cand	didate	:				•			DAT	E O	F ELE	CTI	ON	District Number	Office Code	Pai	ty Cod	e Cou	
										МО		DAY	Y	'EAR			REF	1		
											11		3	2020		(SEE INS	TRUCTI	ONS FOI	R CODES	6)
Summary of Expenditures		d	МО	DA		YEAR				МО		DAY	Y	'EAR	FO	R OFFIC	E USE	ONLY	7	
				9	15	20	20	то			10	:	19	2020						
A. Amount Bro	ught Forward	From I	Last Re	eport					\$				9,	,545.70						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 22,800.00																				
C. Total Funds	Available (Sun	n Of Li	ines A	and B	3)				\$				32,	,345.70						
D. Total Expend	ditures (From	Sched	lule III	[)					\$				19,	706.70						
E. Ending Cash	Balance (Subt	tract L	ine D	From	Line C)			\$				12,	639.00						
F. Value Of In-	Kind Contribut	tions R	Receive	ed (Fr	om Sc	hedule	e II)		\$					633.75						
G. Unpaid Debt	s And Obligati	ions (F	From S	chedu	ıle IV)				\$					0.00						
						AFFI	DAV	IT!	SE	CTIC	NC									
PART I - If this is	a Committee	repor	t, trea	surer	sign h	ere. If	f this	is a	Can	didat	e re	port, o	and	idate sig	ın here.					
I swear (or affirm) correct and comple		, includ	ling the	attach	ed sch	edules	filed o	n pap	er (or by e	electr	onic m	ediur	n, are to t	he best o	f my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before me	e this		20										Signature	of Perso	1 Submitt	ing Re _l	ort		_
	Sig	nature		•				_							Prin	ted Name				
My Commission Ex	rpires							_			-				Emai	il				
	МО		DA	Υ		YR						Are	ea Co	ode	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candid	date's a	autho	rized (Commi	ittee,	Can	dida	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		t of my	knowle	dge an	ıd belie	f this p	politica	al co	mmi	ittee h	as no	ot viola	ted a	ny provis	ions of the	e act of Ju	ine 3,1	937 (P	.L. 133	з,
Sworn to and subsc	ribed before me day of	this		20										s	ignature o	f Candida	ite			_
								_							Printe	d Name				-
	Signat	ure						_							Ema	il				_
My Commission Exp	ires														Ema	·•				_
	мо	1	DA	lΥ		YR						Area	Code	1	Da	ytime Te	lephor	e Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF ERIC DAVAMZO	From:	9/15/202	<u>0</u> To:	10/19/2020
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)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	10,000.00
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			\$	10,000.00

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						
			Fro	om:		То	:		
					DATE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4))						

PAGE TOTAL

0.00

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

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		Rep	orting P	eriod			
			Fro	m:		To) :	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	•)					
								PAGE TOTAL

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		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	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	2			Rep	orting Pe	riod			
				Fron	n:		To) :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	s 4)					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary 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	Reporting Per		
FRIENDS OF ERIC DAVAMZO	From:	9/15/2020 To :	10/19/2020

			D	ATE		AMOUNT		
Full Name			мо	DAY	YEAR	\$	10,000.00	
HRCC						·		
Mailing Address			10	21	2020			
City HARRISBURG	State	Zip Code (Plus 4)						
	PA	17108						
Receipt Description RETURNED	CHECK							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL \$ 10,000.00

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	od	
FRIENDS OF ERIC DAVAMZO	From:	<u>9/15/2020</u> To:	10/19/2020
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
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 Car	ndidate		Reporting Period						
			From:			To	:		
				DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						7 \$		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:	•		•	•		•			
					-				
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	•	
Section 2.						\$	(0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	Stat	e Zip	Code(Plus 4)	Desci	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate		Reporti	ng Period				
FRIENDS OF ERIC DAVAMZO			From	9/1	<u>5/2020</u>	То:	10/19/2020	
				DATE			AMOUNT	
To Whom Paid			МО	DAY	YEAR			
AGE GRAPHICS								
Mailing Address			9	25	2020	\$	705.00	
City LITTLE HOCKING	State	Zip Code (Plus 4)	Description of Expenditure					
	ОН	45742	SIGNS					
To Whom Paid			мо	DAY	YEAR			
HRCC								
Mailing Address			9	15	2020	\$	400.00	
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	17108	DONATION					
To Whom Paid			МО	DAY	YEAR			
HRCC			1-10		I EAR			
Mailing Address			10	19	2020	\$	10,000.00	