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	2019	0108		-	Repor	t	CAN	NDI	DATE	СОМ	MITTEE		LOB	BYIST			
Number :						Filed	By :						·					
Name of Filing	Committe	e, Candida	ate or L	obbyist:		FRIEND	DS 0	F DAVII	D R(OWE								
Street Address:																		
City:	LEW	ISBURG						State	•:	PA		Zip Co	Zip Code: 17837					
TYPE OF REPORT	6TH TUE PRE-PRIM	-	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		DAY MARY	Ρ	POST- 3		AMENDI REPORT		Yes	No	· 🗸		
(place X to the right of	6TH TUE PRE-ELE		4.	2ND FRIDA ELECTION				0 DAY POST- 6. LECTION			TERMIN REPORT		Yes	No	· 🗸			
report type)	ANNUAL	. REPORT	7. X	Year 2020				ING ME.) CHECI				PAPER		\checkmark	DISKE	TTE		
Name of Office	L Sought by	y Candidat	te:					DAT	ΕO	F ELEC	LION	District Number		Par	ty Code	County		
								мо		DAY	YEAR	85	STH	REF)	60		
REPRESENTAT	IVE IN II	HE GENER	AL ASS	EMBLY					11	3	2020		(SEE IN	STRUCTI	ONS FOR	CODES)		
Summary of	Receipt	s and	мо	DAY	YEAR	2		мо		DAY	YEAR	F	OR OFFIC	E USE	ONLY			
Expenditure	s from:			11 24	2	020	ГО		12	31	. 2020)						
A. Amount Bro	ought For	ward Fron	n Last R	eport		•		\$		۷	14,817.22	2						
B. Total Monet	ary Cont	ributions A	And Rec	eipts (Fron	1 Sche	dule I)		\$		350.00								
C. Total Funds	Available	e (Sum Of	Lines A	and B)				\$		2	45,167.22	2						
D. Total Expen	ditures (From Sche	edule II	I)				\$			5,008.27	'						
E. Ending Cash	n Balance	(Subtract	t Line D	From Line	C)			\$		4	0,158.95							
F. Value Of In-	-Kind Con	tributions	Receiv	ed (From S	chedu	le II)		\$			0.00							
G. Unpaid Deb	ts And Ol	oligations	(From S	Schedule IV	()			\$			0.00							
					AFF	IDAV	IT S	SECTIC	ΟN									
PART I - If this i																		
I swear (or affirm correct and comp		report, incl	uding the	e attached sc	hedule	s filed or	n pape	er or by e	electi	ronic med	ium, are to	the best o	of my knov	vledge	and beli	ef , true		
Sworn to and sub	scribed bef day of	ore me this	5	20							Signatu	re of Perso	on Submitt	ing Re	oort			
	_	Cianatu					_					Prir	nted Name	1				
My Commission E	xpires	Signatu							•			Ema	ail					
		мо	D	AY	YR		_			Area	Code	Daytin	ne Teleph	one Nu	mber			
Part II- If this is	a report	t of a cand	lidate's	authorized	Comm	nittee, (Cand	lidate sh	nall	sign her	e.							
I swear (or affirm No 320) as amend		ne best of m	ny knowle	edge and beli	ef this	political	l com	nmittee h	as n	ot violate	d any provi	sions of th	ne act of Ju	une 3,1	937 (P.I	1333,		
Sworn to and subscribed before me this day of 20										:	Signature	of Candida	ate					
							Printed Name											
My Commission Ex		Signature					_					Ema	ail					
	_						_											
		мо	D	AY	YR	1				Area Co	ode	D	aytime To	elephor	e Numb	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** FRIENDS OF DAVID ROWE From: <u>11/24/2020</u> **To:** <u>12/31/2020</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 50.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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)** 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 \$ 350.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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				мо	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		

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	te		Rep	orting P	eriod					
			From: Te): 				
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address	_	_					\$	0.00		
City	State	Zip Code (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part A on	\$	0.00								

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						
FRIENDS OF DAVID ROWE From:				From:	<u>11/2</u>	То:	<u>12/31/2020</u>		
					DA	TE		Α	MOUNT
Full N	ame of Contributing Committee				мо	DAY	YEAR		
WIND	STREAM HOLDINGS LLC PAC							\$	300.00
Mailir	ng Address				11	24	2020		
City	LITTLE ROCK	State	Zip Cod	e (Plus 4)		27	2020		
		AR	72212						
									PAGE TOTAL
Enter	Grand Total of Part C on Schee	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 Rep				porting 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				Occupation					
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	
Full 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 Perio	d	
FRIENDS OF DAVID ROWE	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 PART	ſF)		
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	·			
Fi						То:		
				DATE			AMOUNT	
Full Name of Contributor				DAY	YEAR			
Mailing Address		-				 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:						-		
				_	Г			
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	e,		PAGE TOTA	۱L
						\$		0.00

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

Name of Filing Committee or Candidate				Reporting Period					
				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	Name of Filing Committee or Candidate				Reporting Period						
FRIENDS OF DAVID ROWE				From <u>11/24/2020</u>			<u>12/31/2020</u>				
				DATE		AMOUNT					
To Whom Paid			мо	DAY	YEAR						
FACEBOOK											
Mailing Address			12	1	2020	\$	8.27				
City MENLO PARK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
	СА	94025	ADVERTISING								
To Whom Paid			мо	DAY	YEAR						
PUBLIC IMPACT STRATEGIES											
Mailing Address			12	14	2020	\$	5,000.00				
City LEWISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
	PA	17837	CAMPA	GN COMM	UNICATIO	ONS CO	NSULTING				
							PAGE TOTAL				
Enter Grand Total of Expenditures	on Page 1, Report C	Cover Page, Item I) .			\$	5,008.27				

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