### **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	20140	0117				Repo Filed		<b>/</b> :	CAI	NDII	DATE		COMN	MITTEE	<b>✓</b> [	LOB	BYIST		
Name of Filing C	ommittee	e, Candida	ite or Lo	bbyis	t:	F	RIEN	IDS	OF	BARR	Y JC	DZWIA	K							
Street Address:	590 (	GRANGE F	ROAD																	
City:	BERN	IVILLE								State	:	PA			Zip Cod	<b>ie:</b> 19	506			
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND F PRIMA		PRE-	2.		30 DA PRIMA		Р	OST-	3.		AMENDM REPORT?		Yes	N	O	<b>\</b>
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND F ELECT		PRE-	- 5.		30 DA ELECT		Р	OST-	6.		TERMINA REPORT?		Yes	N	O	<b>\</b>
report type)	ANNUAL	REPORT	7. <b>X</b>	Year 2	2020					IG ME CHEC					PAPER		<b>\</b>	DISK	ETTE	
Name of Office S	- Sought by	Candidat	e:							DAT	E O	F ELE	CTIC	NC	District Number	Office Code	Pa	rty Code	Cour	
DEDDEGENITATI	\	IE OENED			,					МО		DAY	Υ	EAR	5	STH	REI	)	06	
REPRESENTATI	VE IN IH	IE GENER	AL ASS	EMBLY	<b>′</b>						11		3	2020		(SEE IN	STRUCTI	ONS FOR	CODES	)
Summary of	•	and	МО	DAY	Y	YEAR				МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	from:		1	.1	24	20	20	T	)		12	,	31	2020						
A. Amount Bro	ught Forv	vard From	Last R	eport					\$	-			106,	588.40						
B. Total Moneta	ary Contr	ibutions A	nd Rec	eipts (	From	Sched	lule I	)	\$					0.00						
C. Total Funds	Available	(Sum Of	Lines A	and B	)				\$				106,	588.40						
D. Total Expend	ditures (F	rom Sche	dule II	(1)					\$				12,	824.05						
E. Ending Cash	Balance	(Subtract	Line D	From L	Line C	:)			\$				93,	764.35						
F. Value Of In-	Kind Cont	tributions	Receive	ed (Fro	om Sc	hedul	e II)		\$					0.00						
G. Unpaid Debt	s And Ob	ligations	(From S	chedu	le IV	)			\$					0.00			•			
						AFFI	[DA\	/IT	SE	CTIC	N									
PART I - If this is	s a Comm	ittee repo	rt, trea	surer s	sign h	ere. I	f this	is	a Car	ndidat	e re	port, c	andi	idate sig	ın here.					
I swear (or affirm) correct and comple		report, inclu	uding the	attach	ed sch	edules	filed o	on p	aper	or by e	lectr	onic m	ediun	n, are to t	he best o	f my knov	vledge	and bel	ief , tr	ue
Sworn to and subs	cribed befo	ore me this		20										Signature	of Perso	n Submitt	ing Re	port		_
	_	Signatur	•	-					ı						Prin	ted Name	)			-
My Commission Ex	pires	J.g	•								-				Ema	il				-
	,	мо	D/	lΥ		YR			•			Are	ea Co	de	Daytim	e Teleph	one Nu	ımber		
Part II- If this is	a report	of a cand	idate's	author	rized	Comm	ittee,	Ca	ndid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	dge an	d belie	f this	politic	al d	omm	ittee h	as no	ot viola	ted a	ny provisi	ions of the	e act of Ju	ıne 3,1	937 (P.	L. 133	3,
Sworn to and subsc		re me this												Si	ignature o	of Candida	ate			-
	day of —														Printe	d Name				_
		Signature						_												_
My Commission Exp		-													Ema	il				
	_	МО	D	lΥ		YR						Area	Code		Da	aytime To	elepho	ne Num	ber	<sup>-</sup>

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF BARRY JOZWIAK	From:	11/24/20	<u>20</u> To:	12/31/2020
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	g 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	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
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			\$	0.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate val							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fr	om:		То	:	
		•			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•	•		•	•	•	$\overline{}$	PAGE TOTAL

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

**PAGE TOTAL**\$ 0.00

## 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  F					eriod	o:		
					DATE			AMOUNT
Full Name of Contributor				МО	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 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		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	nmary Pa	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	e of Filing Committee or Candidate				Reporting Period					
			Froi	m:		To	<b>)</b> :			
				D	ATE		А	MOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plu	s 4)							
Employer Name		•		Occupa	tion		•			
Employer Mailing Address/Principal Plac Business	e of	City		•	State		Zip Cod	de (Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	, Secti	on 3.			P \$	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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AM	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T. Detailer	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Summary r uge,	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 Per	iod	
FRIENDS OF BARRY JOZWIAK	From:	<u>11/24/2020</u> <b>To:</b>	<u>12/31/2020</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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 Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidat	e				Re	porting P	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee of	or Candidate		Reporti	ng Period					
FRIENDS OF BARRY JOZW	IAK		From	11/24	<u>4/2020</u>	То:	12/31/2020		
				DATE			AMOUNT		
To Whom Paid CAPITOL PRESERVATION C	OMMITTEE		мо	DAY	YEAR				
Mailing Address P.O. BOX 202231 ROOM 630 MAIN CAPITOL BUILDING				4	2020	\$	402.80		
City HARRISBURG State Zip Code (Plus 4)			Description of Expenditure						
PA 17120			HOLIDA	AY CARDS					
<b>To Whom Paid</b> BARRY JOZWIAK			мо	DAY	YEAR				
Mailing Address 590 GR/	ANGE RD		12	16	2020	\$	12,321.25		
City BERNVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	19506	REPAY	CAMPAIGN	I LOAN				
<b>To Whom Paid</b> PSP-HEMC	<u> </u>		мо	DAY	YEAR				
Mailing Address 187 EAS	Mailing Address 187 EAST HERSHEY PARK DRIVE			29	2020	\$	100.00		
City HERSHEY	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	17033	DONAT	ION					

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

**PAGE TOTAL** 

12,824.05

\$