### **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 2021	.0181				port ed B		CAND	IDATE		СОМ	4ITTEE	✓	LOBE	SYIST	
Name of Filing C	ommittee, Candid	ate or L	obbyist:		FOR	R-WA	ARD P	AC								
Street Address:	P.O. BOX 83															
City:	HARRISBURG	i						State:	PA			Zip Cod	<b>ie:</b> 17	108		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST-	3. <b>X</b>		AMENDM REPORT		Yes	No	<b>&gt;</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	ND FRIDAY PRE- 5. 30 ELE				NY ΓΙΟΝ	POST-	6.		TERMINA REPORT		Yes	No	<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2021					NG METH CHECK C				PAPER DISKETTE				
Name of Office S	ought by Candida	te:	-					DATE (	OF ELE	СТІО	N	District Number	Office Code	Par	ty Code	County Code
								МО	DAY	YE	AR			REP		22
								1:	1	2	2021		(SEE IN	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR	l			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
Expenditures	irom:		5 4	20	021	T	<u> </u>	(	5	7	2021					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			5,0	00.00					
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$			15,000.00						
C. Total Funds Available (Sum Of Lines A and B)							\$			20,0	00.00					
D. Total Expend	ditures (From Sch	edule II	I)				\$			10,9	05.28					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C	)			\$			9,0	94.72					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Scl	hedul	le II	I)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00					
				AFF	ΊDΑ	AVI	T SE	CTION								
PART I - If this is	a Committee rep	ort, trea	surer sign h	ere. 1	If th	nis is	a Car	ndidate r	eport,	candi	date sig	ın here.				
I swear (or affirm) correct and comple	that this report, inc ete.	luding the	attached sche	edules	file	ed on	paper (	or by elec	tronic m	edium	, are to t	he best o	f my knov	wledge a	and belie	f , true
Sworn to and subs	cribed before me thi day of	S	20							s	ignature	of Perso	n Submit	ting Rep	ort	
	Signatu	ıre					-					Prin	ted Name	•		
My Commission Ex	rpires						_					Ema	il			
	МО	D	AY	YR					Ar	ea Cod	e	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized C	Comm	nitte	ee, C	andid	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowl	edge and belief	f this	poli	itical	comm	ittee has	not viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20								S	ignature o	of Candid	ate		
							-					Printe	d Name			
My Commission F	Signature						-					Ema	il			
My Commission Exp							_									
	МО	D	AY	YR					Area	Code		Da	aytime T	elephon	e Numbe	er

## SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	Period		
FOR-WARD PAC	From:	5/4/202	<u>1</u> To:	6/7/2021
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)			\$	15,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	15,000.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	15,000.00

#### **PART A**

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

\$50.01 TO \$250.00

Name of Filing Committee or Candidate				Period			
		From:			:		
		<b>I</b>		DATE			AMOUNT
Full Name of Contributing C	ommittee		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											

## 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 of Camulate				Reporting Period From: To:						
					DATE		AN	4OUNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address							\$ \$	0.00		
City	State	Zip Code (Plus 4)	1							

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						
FOR-WARD PAC	From:	<u>5/4/2021</u>	То:	6/7/2021			

DATE AMOUNT

Full Name of Contributing Committee FRIENDS OF KIM WARD	МО	DAY	YEAR			
Mailing Address P.O. BOX 83						<b>\$</b> 15,000.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	5	10	2021	

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

**PAGE TOTAL**15,000.00

### 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	Rep	Reporting Period							
			Fron	m: To:					
				D	ATE		АМО	DUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plu	s 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PAG	<b>GE TOTAL</b> 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		Report	Reporting Period						
			From:			To:				
				D	ATE		AM	OUNT		
Full Name				МО	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (	Plus 4)							
Receipt Description	•	•		•	•	•	_			
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL		
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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 Period		
FOR-WARD PAC	From:	<u>5/4/2021</u> <b>To:</b>	<u>6/7/2021</u>
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 Candidat	Name of Filing Committee or Candidate				Reporting Period					
	Fre					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 Candidate					Re	Reporting Period						
					Fro	om:		To:				
							DATE			AMOUNT		
Full Name of Contributor						мо	DAY	YEAR				
Mailing Address									<b>\$</b>	0.00		
City	State	Zip Code(Plus 4)										
Employer of Contributor	•		•			Occupation						
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	taile	ed				PAGE TOTAL 0.00		

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
FOR-WARD PAC			From	<u>5/-</u>	<u>4/2021</u>	То:	6/7/2021
				DATE			AMOUNT
<b>To Whom Paid</b> CPITECH			мо	DAY	YEAR		
Mailing Address 3212 PIKE ST			5	4	2021	\$	585.65
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17111	Description of Expenditure OFFICE SUPPLIES				
<b>To Whom Paid</b> PNC BANK			МО	DAY	YEAR		
Mailing Address 110 S 32ND ST			5	6	2021	\$	319.63
City CAMP HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17011	Description of Expenditure PRINTING				
To Whom Paid FRIENDS OF CHRIS GEBHARD			мо	DAY	YEAR		
Mailing Address 1451 QUENTIN RD BOX 248			5	10	2021	\$	10,000.00
City LEBANON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17042	Description of Expenditure CONTRIBUTION				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						<b>4</b>	PAGE TOTAL

10,905.28