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 8000	661				port ed B		CANE)ID/	ATE		СОМ	4ITTEE	✓	LOBI	BYIST				
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		LAW	/REI	NCE C	COUNTY	RE	PUBL	ICAN	COMM	IITTEE					_		
Street Address:	1027 OLD PR	NCETO	N ROAD																	
City:	NEW CASTLE	-					-	State:	P	PA			Zip Cod	ie: 16	5101					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- :	2.	30 DA		РО	ST-	3.		AMENDM REPORT		Yes	No	`			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRI	E- !	5.	30 DA		РО	ST-	6. X		TERMINA REPORT		Yes	No	•			
report type)	ANNUAL REPORT	7.	Year 2021					NG METI CHECK					PAPER		$\overline{}$	DISKE	TTE			
Name of Office S	- Sought by Candida	te:						DATE	OF	ELEC	CTIO	N	District Number	Office Code	Par	ty Code	Count	y		
								МО	D	DAY	YE	AR			•			_		
								1	1		2	2021		(SEE IN	STRUCTI	ONS FOR (CODES)			
	Receipts and	МО	DAY	YEAF	2			МО	D	DAY	YE	AR	FO	R OFFI	CE USE	ONLY				
Expenditures	irom:	1	10 19	2	021	Т	0	1	1	2	22	2021								
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				12,9	35.95								
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule	ı)	\$				ç	40.00								
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				13,8	75.95								
D. Total Expen	ditures (From Scho	edule II	I)				\$				4	44.87								
E. Ending Cash	Balance (Subtract	Line D	From Line	C)			\$				13,4	31.08								
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II	()	\$					0.00								
G. Unpaid Debt	s And Obligations	(From S	Schedule I\	/)			\$					0.00			1					
				AFF	FIDA	\VI	T SE	CTION	١											
	s a Committee rep	•	_						-	•								П		
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sc	hedule	s filed	d on	paper	or by ele	ctro	nic me	dium,	are to t	he best o	f my kno	wledge	and beli	ef , true	a,		
Sworn to and subs	cribed before me this day of	:	20						_		s	ignature	of Perso	n Submit	ting Rep	oort		-		
	Signatu						- -		_				Prin	ted Nam	e			-		
My Commission Ex	•								_				Ema	il				٠		
	мо	D/	AY	YR						Are	a Code Daytime Telephone Number							•		
Part II- If this is	a report of a cand	lidate's	authorized	Comr	nitte	e, C	andid	ate sha	II si	gn he	n here.							Ī		
I swear (or affirm) No 320) as amende		ny knowle	edge and bel	ief this	s polit	tical	comm	ittee has	not	violat	ed an	y provisi	sions of the act of June 3,1937 (P.L. 1333							
Sworn to and subsc	ribed before me this								-			Signature of Candidate								
	day of						-		_				Printed Name							
	Signature						-											╻┃		
My Commission Exp	-												Ema	il						
	МО	D/	AY	YF	2		-		_	Area (Code		Da	aytime T	elephon	e Numb	er			

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
LAWRENCE COUNTY REPUBLICAN COMMITTEE	From:	10/19/202	<u>21</u> To:	11/22/2021
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J Period	(1)	\$	40.00
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)			\$	300.00
TOTAL for the Reporting) Period	(2)	\$	300.00
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)			\$	600.00
TOTAL for the Reporting) Period	(3)	\$	600.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	150.00
			T	
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			\$	1,090.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fro	om:		То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•				-		DAGE TOTAL

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

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 Candidat	e		Rep	orting Po	eriod			
LAWRENCE COUNTY REPUBLICAN CO	OMMITTEE		Fro	m:	10/19/2	<u>2021</u> T o) :	11/22/2021
					DATE			AMOUNT
Full Name of Contributor ZAMA FOR GOVERNOR				МО	DAY	YEAR		
Mailing Address PO BOX 343					10	2024	\$	100.00
City EAST STROUDSBURG	State PA	Zip Code (Plus 4) 183010343		11	18	2021		
Full Name of Contributor MUESER FOR CONGRESS				МО	DAY	YEAR		
Mailing Address P.O. BOX 183							\$	100.00
City HUDSON	State WI	Zip Code (Plus 4) 54016		11	18	2021		
Full Name of Contributor CHARLIE FOR GOVERNOR				МО	DAY	YEAR		
Mailing Address PO BOX 11624							\$	100.00
City HARRISBURG	State PA	Zip Code (Plus 4) 171081625		11	18	2021		
								PAGE TOTAL

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

PAGE TOTAL \$ 300.00

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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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				Rep	orting Pe	riod			
LAWRENCE COUNTY REPUBLICAN COM	IMITTEE			Fron	n:	10/19/2	<u>021</u> T o	o:	11/22/2021
					D/	ATE			AMOUNT
Full Name of Contributor MCSWAIN FOR GOVERNOR					МО	DAY	YEAR		
Mailing 228 S. WASHINGTON	ST. SUITE 115							\$	300.00
City ALEXANDRIA	State VA	Zip C 2231	Code (Plus	4)	11	18	2021		
Employer Name					Occupat	tion		•	
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip C	Code (Plus 4)
Full Name of Contributor JEFFREY A. BARTOS					МО	DAY	YEAR		
Mailing 239 WINDING WAY								\$	300.00
City MERION STATION	State PA	-	Code (Plus 561217	4)	11	18	2021		
Employer Name					Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip C	Code (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	umma	ry Page,	Section	on 3.			\$	PAGE TOTAL 600.00

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	ing Perio	d			
LAWRENCE COUNTY REPUBLICAN COM	MITTEE		From:		10/19/202	<u>1</u> To:	11/22/2	<u>021</u>
				D	ATE		AMOUNT	
Full Name FIVE FILLIES FARM				МО	DAY	YEAR		
Mailing Address 503 WAUGH AVE					10	2024	\$	40.00
City NEW WILMINGTON	State PA	Zip Code (I	,	11	18	2021		
Receipt Description REFUND CK NO)-557-BALANCE LEFT	ON SECURI	TY DEPOS	SIT CHEC	CK #1002			
Full Name FIVE FILLIES FARM				МО	DAY	YEAR		
Mailing Address 503 WAUGH AVE					10	2024	\$	110.00
City NEW WILMINGTON	State PA	Zip Code (I	,	11	18	2021		
Receipt Description RETURNED CHI	ECK #1010 DEDUCTE	D FROM SE	CURITY D	EPOSIT	CHECK #10	002		

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

PAGE TOTAL \$150.00

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	
LAWRENCE COUNTY REPUBLICAN COMMITTEE	From:	<u>10/19/2021</u> To:	11/22/2021
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 Candid	ate		Reporting	g Period			
			From:			To:	
				DATE			AMOUNT
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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		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				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

TO Whom Paid FIRST NATIONAL BANK Mailing Address 1718 WILMINGTON ROAD City NEW CASTLE State Zip Code (Plus 4) 16105 TO Whom Paid UNITED STATES POSTAL SERVICE Mo DAY YEAR Mo DAY YEAR TO Whom Paid UNITED STATES POSTAL SERVICE Mo DAY YEAR City NEW CASTLE State Zip Code (Plus 4) 16101 To Whom Paid 16101 Mo DAY YEAR Mailing Address 16101	Name of Filing Committee or C	andidate		Reporti	ng Period			
TO Whom Paid FIRST NATIONAL BANK Mailing Address 1718 WILMINGTON ROAD 10 18 2021 \$ 10 City NEW CASTLE State PA 16105 Description of Expenditure DEPOSIT SLIPS TO Whom Paid UNITED STATES POSTAL SERVICE 10 19 2021 \$ 8 City NEW CASTLE State PA 16101 Description of Expenditure DEPOSIT SLIPS TO Whom Paid UNITED STATES POSTAL SERVICE 10 19 2021 \$ 8 City NEW CASTLE State PA 16101 Description of Expenditure MAIL STATE REPORT CK NO. 1013 TO Whom Paid TAMMY CRAWFORD FOR REGISTER & Description of Expenditure MAIL STATE REPORT CK NO. 1013 TO Whom Paid TAMMY CRAWFORD FOR REGISTER & DESCRIPTION OF EXPENDITURE PA 16101 DESCRIPTION OF Expenditure POLITICAL CK NO. 1014 TO Whom Paid JERRY HERMANN Address 184 CALVERT LANE \$ 326 City NEW CASTLE State Zip Code (Plus 4) Description of Expenditure PA 16101 DESCRIPTION OF Expenditure INVOICE-960041707 WIX.COM LTD CK NO. 101	LAWRENCE COUNTY REPUBLIC	CAN COMMITTEE		From	10/19	9/2021	То:	11/22/2021
Mo					DATE			AMOUNT
City NEW CASTLE State PA 16105 To Whom Paid UNITED STATES POSTAL SERVICE Mailing Address 151 CASCADE STREET State PA 16101 To Whom Paid UNITED STATES POSTAL SERVICE Mailing Address 151 CASCADE STREET State PA 16101 To Whom Paid TAMMY CRAWFORD FOR REGISTER & Samp; RECORDER LAWRENCE COUNTY Mailing Address 735 ROSEPOINT ROAD City NEW CASTLE State PA 16101 State PA 16101 To Whom Paid TAMMY CRAWFORD FOR REGISTER & State PA 16101 City NEW CASTLE State PA 16101 MO DAY YEAR MO DAY YEAR To Whom Paid JERRY HERMANN MO DAY YEAR State PA 16101 Description of Expenditure POLITICAL CK NO. 1014 To Whom Paid JERRY HERMANN Mailing Address 184 CALVERT LANE State PA 16101 Description of Expenditure POLITICAL CK NO. 1014 To Whom Paid JERRY HERMANN Mailing Address 184 CALVERT LANE State PA 16101 Description of Expenditure INVOICE-960041707 WIX.COM LTD CK NO. 101	To Whom Paid FIRST NATIONAL BANK			мо	DAY	YEAR		
To Whom Paid UNITED STATES POSTAL SERVICE Mailing Address 151 CASCADE STREET State PA 16101 To Whom Paid TAMMY CRAWFORD FOR REGISTER & Amp; RECORDER LAWRENCE COUNTY Mailing Address 735 ROSEPOINT ROAD City NEW CASTLE State Zip Code (Plus 4) 10 27 2021 \$ 100 City NEW CASTLE State Zip Code (Plus 4) 10 27 2021 \$ 100 City NEW CASTLE State Zip Code (Plus 4) 16101 Description of Expenditure POLITICAL CK NO. 1014 To Whom Paid 16101 State Zip Code (Plus 4) 16101 Description of Expenditure POLITICAL CK NO. 1014 To Whom Paid 16101 Description of Expenditure POLITICAL CK NO. 1014	Mailing Address 1718 WILM	INGTON ROAD		10	18	2021	\$	10.00
Walling Address 151 CASCADE STREET 10 19 2021 \$ 88 City NEW CASTLE State PA 16101 Description of Expenditure MAIL STATE REPORT CK NO. 1013 To Whom Paid TAMMY CRAWFORD FOR REGISTER & Description of Expenditure PA 16101 PA 16101 PA 16101 To Whom Paid TAMMY CRAWFORD FOR REGISTER & PA 16101 PA 16101 PA 16101 To Whom Paid TAMMY CRAWFORD FOR REGISTER & PA 16101 PA 16101 PA 16101 PA 16101 To Whom Paid JERRY HERMANN PA 16101 PA 16101 PA 16101 PA 16101 PA 16101 To Whom Paid JERRY HERMANN State PA 16101 PA	City NEW CASTLE					penditure	3	
City NEW CASTLE State PA 16101		ICE		мо	DAY	YEAR		
To Whom Paid TAMMY CRAWFORD FOR REGISTER & PA To Whom Paid TAMMY CRAWFORD FOR REGISTER & PA To Whom Paid TAMMY CRAWFORD FOR REGISTER & PA To Whom Paid To Whom Paid To Whom Paid JERRY HERMANN Mo Day YEAR Description of Expenditure PA To Whom Paid JERRY HERMANN Mo Day YEAR PA To Whom Paid JERRY HERMANN Mo Day YEAR Description of Expenditure POLITICAL CK NO. 1014 To Whom Paid JERRY HERMANN Mo Day YEAR Mo Day Mo Day YEAR Mo Day Day Day Day Day Day Day Da	Mailing Address 151 CASCADE STREET				19	2021	\$	8.56
TAMMY CRAWFORD FOR REGISTER & PA To Whom Paid JERRY HERMANN Mailing Address 184 CALVERT LANE State PA To Wood Paid JERRY HERMANN Mo Day YEAR 100 27 2021 \$ 100 27 2021 \$ 100 Description of Expenditure POLITICAL CK NO. 1014 MO DAY YEAR PA State PA State PA 2ip Code (Plus 4) 16101 PA Description of Expenditure POLITICAL CK NO. 1014 PA State PA Description of Expenditure INVOICE-960041707 WIX.COM LTD CK NO. 101	City NEW CASTLE			1 .	-			
City NEW CASTLE State PA Description of Expenditure		STER & RECORDER	R LAWRENCE COUNTY	мо	DAY	YEAR		
To Whom Paid JERRY HERMANN Mailing Address 184 CALVERT LANE State PA 2ip Code (Plus 4) 16101 Description of Expenditure INVOICE-960041707 WIX.COM LTD CK NO. 101	Mailing Address 735 ROSEP	OINT ROAD		10	27	2021	\$	100.00
Mo DAY YEAR Mailing Address 184 CALVERT LANE \$ 326 City NEW CASTLE PA 16101 Description of Expenditure INVOICE-960041707 WIX.COM LTD CK NO. 101	City NEW CASTLE							
City NEW CASTLE State Zip Code (Plus 4) Description of Expenditure INVOICE-960041707 WIX.COM LTD CK NO. 101				МО	DAY	YEAR		
PA 16101 INVOICE-960041707 WIX.COM LTD CK NO. 101	Mailing Address 184 CALVE	RT LANE					\$	326.31
PAGE TOTAL	City NEW CASTLE				•			CK NO. 1015
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.		I		1			1	PAGE TOTAL

444.87