# **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat Number :	ion 2008	329			Repo Filed		CANI	DII	DATE	СОМ	MITTEE	✓	LOB	BYIST		
	Committee, Candid	ate or Lo	bbyist:			-	F JOHN L	_AV	WRENCE							
Street Address:	PO BOX 331															
City:	WEST GROVE						State:		PA		Zip Co	<b>de:</b> 19	390			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		DAY MARY	P	OST- 3.		AMENDN REPORT		Yes	N	0	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					DAY CTION	P	OST- 6.		TERMIN REPORT		Yes	N	0	$\checkmark$
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2021				ING MET ) CHECK				PAPER		$\checkmark$	DISK	ETTE	
Name of Office S	L Sought by Candida	te:					DATE	0	F ELECT	ION	District Number	Office Code	Par	ty Cod	e Cour	
							мо		DAY	YEAR					1	
							1	11	2	2021	]	(SEE INS	TRUCTI	ONS FOR	CODES	5)
	Receipts and	мо	DAY	YEAR	2		мо		DAY	YEAR	FC	OR OFFIC	E USE	ONLY	,	
Expenditures	s from:	1	1 23	2	021	то	1	12	31	2021						
A. Amount Bro	ught Forward Fror	n Last Re	eport				\$		1	7,266.76						
B. Total Monet	ary Contributions	And Rece	eipts (From	1 Sche	dule I)		\$			0.00						
C. Total Funds	Available (Sum Of	f Lines A	and B)				\$		1	7,266.76						
D. Total Expen	ditures (From Sch	edule III	)				\$			550.00						
E. Ending Cash	Balance (Subtrac	t Line D I	From Line	C)			\$		1	6,716.76	-					
F. Value Of In-	Kind Contributions	s Receive	d (From S	chedu	le II)		\$			0.00	_					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')			\$			0.00		,				
				AFF	IDAV	IT S	ECTIO	Ν								
	s a Committee rep	•	-						•		-					
I swear (or affirm correct and compl	) that this report, incl ete.	luding the	attached sc	hedule	s filed o	n pape	er or by ele	ectr	onic medi	um, are to	the best o	f my knov	vledge	and be	lief , tr	ue
Sworn to and subs	scribed before me this day of	5	20			_		-		Signatur	e of Perso	n Submitt	ing Rep	oort		_
	Signatu	re						-			Prin	ted Name				
My Commission E	xpires							-			Ema	il				
	МО	DA	Y	YR					Area	Code	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's a	authorized	Comn	nittee,	Cand	idate sha	nll s	sign here							
I swear (or affirm) No 320) as amend	) that to the best of n ed.	ny knowle	dge and beli	ef this	politica	l com	mittee has	s no	ot violated	any provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subso	cribed before me this day of		20							5	ignature	of Candida	ite			-
			20								Printe	ed Name				-
My Commission Exp	Signature							-			Ema	il				_
						_										_
	МО	DA	Y	YR	1				Area Co	de	D	aytime Te	elephor	e Num	ber	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** FRIENDS OF JOHN LAWRENCE From: <u>11/23/2021</u> To: 12/31/2021 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **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)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 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 \$ 0.00 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 Candidate					Period					
				From: To:						
		•			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 Schedule I, Detailed Summary Page, Section 2. \$ 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			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							- \$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							\$	0.00	

## 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				Reporting Period						
From				om:						
				DATE AMOUNT						
Full Name of Contributor				DAY	YEAR	\$	0.00			
State	Zip Code (Plu	s 4)								
•			Occupation							
Employer Name Employer Mailing Address/Principal Place of Business City				State		Zip Code	(Plus 4)			
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.						PAGE TOTAL           \$         0.00				
	State ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: DA DA From: DA MO State Zip Code (Plus 4) Coccupat ce of Business City	From: DATE DATE DATE State Zip Code (Plus 4) City Occupation Ce of Business City State	From:     To       DATE       MO     DAY     YEAR       State     Zip Code (Plus 4)     Image: Comparison of the second	From:     To:       DATE     AM       MO     DAY     YEAR       \$     MO     DAY     YEAR       State     Zip Code (Plus 4)     I     I       Occupation     Occupation     I       ce of Business     City     State     Zip Code       edule I, Detailed Summary Page, Section 3.     PA			

### 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 Cand	idate		Reporting Period							
				From: To:						
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (	Plus 4)							
Receipt Description										
			<b>.</b>					PAGE TOT	AL	
Enter Grand Total of Part E on So	chedule I, Detailed	i Summary 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 Period										
FRIENDS OF JOHN LAWRENCE	From:	<u>11/23/2021</u> то:	<u>12/31/2021</u>								
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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			Reporting Period						
				From:			То:		
				DATE			AMOUNT		
Full Name of Contributor			мо	DAY	YEAR				
Mailing Address		_				<b>7</b> \$		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:			1						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							PAGE TOTAL		
						\$		0.00	

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period						
				From:							
					DATE AN						
Full Name of Contributor				мо	DAY	YEAR					
Mailing Address							\$ 0.00				
City	State	Zip Code(Plus 4)									
Employer of Contributor		•		Occupa	ation						
Employer Mailing Address/Principal Plac	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution					
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						<b>PAGE TOTAL</b> 0.00					

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period							
FRIENDS OF JOHN LAWRENCE				From <u>11/23/2021</u>			<u>12/31/2021</u>				
				DATE AMOUNT							
To Whom Paid				DAY	YEAR						
HRCC											
Mailing Address 500 N 3RD ST				5	2021	\$	300.00				
City HARRISBURG State Zip Code (Plus 4)				tion of Exp	enditure						
	PA	17101	DONAT	ION .							
To Whom Paid			мо	DAY	YEAR						
FRIENDS OF LOU MINCARELLI			NO NO								
Mailing Address 521 E LANCASTER A	VE		10	20	2021	\$	250.00				
City DOWNINGTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
	PA	19335	DONAT	ION .							
							PAGE TOTAL				
Enter Grand Total of Expenditures o	on Page 1, Report C	over Page, Item I	).			\$	550.00				