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 :			Report		CAND	IDATE	✓	со	MMITTEE		LOBBYIST					
Name of Filing C	ommittee, Can	didate or L	obbyist:	JC)HN L	AWRE	NCE								•	
Street Address:																
City:							State:				Zip Code	: 19	390			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PR PRIMARY	.E-	2.	30 DA		POST-	3. X		AMENDME REPORT?	NT	Yes	No		/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PF ELECTION	PRE- 5. 30 DAY ELECTION				POST-	6.		TERMINAT REPORT?	ION	Yes	No		/
report type)	ANNUAL REPO	RT 7.	Year 2022				NG METH				PAPER		√	DISKE	TTE	
Name of Office S	ought by Cand	idate:					DATE C	F ELE	CTION		District Number	Office Code	Par	ty Code	Coun	
							МО	DAY YEAR 13 STH REP							•	
REPRESENTATI	VE IN THE GEI	NERAL ASS	EMBLY				11		8 2	022		(SEE INS	TRUCTI	ONS FOR C	CODES)
Summary of		МО	DAY YEA	ıR			МО	DAY	AY YEAR FOR OFFICE USE ONLY							
Expenditures	from:		5 3	202	22 T	О	6	5	6 2	2022						
A. Amount Bro	ught Forward F	rom Last R	Report			\$			0	0.00						
B. Total Moneta	ary Contributio	ns And Rec	ceipts (From Sch	edu	ıle I)	\$,		1,860	.15						
C. Total Funds	Available (Sum	Of Lines A	and B)			\$	<u> </u>		1,860	.15						
D. Total Expend	ditures (From S	Schedule II	I)			\$			1,860	.15						
E. Ending Cash	Balance (Subt	ract Line D	From Line C)	_		\$			0	.00						
F. Value Of In-	Kind Contribut	ons Receiv	red (From Sched	ule	II)	\$			0	.00						
G. Unpaid Debt	s And Obligation	ons (From S	Schedule IV)			\$			0	.00		'				
			AF	FΙΙ	DAVI	T SE	CTION									
PART I - If this is	a Committee	report, trea	ısurer sign here	. If f	this is	a Car	ndidate r	eport, o	candidat	e sig	ın here.					
I swear (or affirm) correct and comple	that this report, ete.	including the	e attached schedul	es fil	led on	paper	or by elect	tronic m	edium, ar	e to t	he best of ı	my know	vledge	and belie	ef , tr	ıе
Sworn to and subs	cribed before me day of	this	20						Sign	ature	of Person	Submitt	ing Rep	oort		_
	Sign	nature		_		<u>-</u>					Printe	d Name				-[
My Commission Ex	-	latui c						Email								-[
	мо	D	AY YI	R				Ar	ea Code		Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a c	andidate's	authorized Com	ımit	tee, C	Candid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		of my knowl	edge and belief th	is po	olitical	comm	ittee has r	not viola	ted any pi	rovisi	ions of the	act of Ju	ine 3,1	937 (P.L	. 1333	3,
Sworn to and subsc		:his						Signature of Candidate						-		
	day of 					_					Printed	Name				-
	Signati			—		_					riiiteu	Name				_
My Commission Exp	_										Email					
	МО	D	AY Y	/R		-		Area	Code		Day	time Te	elephor	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
JOHN LAWRENCE	From:	5/3/202	<u>2</u> To:	6/6/2022
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)			\$	1,860.15
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	1,860.15
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			\$	1,860.15

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 Candida	Reporting Period						
			From:		То	•	
		·		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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.

(EXCI	lude contributions from	1 political commi	ittee	s re _l	portea	IN Part	A)	
Name of Filing Commit	ttee or Candidate		Repor	ting P	eriod			
			From:			To) :	
		•			DATE			AMOUNT
Full Name of Contributor			1	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				
IOHN LAWRENCE			From:	<u>5/</u>	3/2022	То:	6/6/2022	
				DA	TE		AMOUN	Г
Full Name of Contributing Committee FRIENDS OF JOHN LAWRENCE				мо	DAY	YEAR	\$	860.15
Mailing Address				5	11	2022		
City WEST GROVE	State PA	Zip Cod 19390	e (Plus 4)		11	2022		
Full Name of Contributing Committee FRIENDS OF JOHN LAWRENCE				мо	DAY	YEAR		1 000 00
Mailing Address				5	16	2022	\$	1,000.00
City WEST GROVE	State PA	Zip Cod 19390	e (Plus 4)	3	16	2022		

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

PAGE TOTAL \$ 1,860.15

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	2			Rep	orting Pe	riod			
				Fror	n:		To) :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address								7	
City	State	Zi	p Code (Plus	s 4)					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary Page,	Section	on 3.				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 Candidate		Report	ing Peri	od			
			From:			To:		
				E	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	us 4)					
Receipt Description	'							
Futor Count Total of Dout	Fan Cahadula I Datailad	I Commence Dance C	` !	4			ı	PAGE TOTAL
Enter Grand Total of Part	e on Schedule 1, Detailed	i Summary Page, S	ection	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		
JOHN LAWRENCE	From:	<u>5/3/2022</u> To:	<u>6/6/2022</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 Candidate	Reporting Period							
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	orting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address				-					\$	0.00
City	State	;	Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.										0.00

1,860.15

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee o	Name of Filing Committee or Candidate							
JOHN LAWRENCE F				From <u>5/3/2022</u> To:				
		,		DATE			AMOUNT	
To Whom Paid			МО	DAY	YEAR			
USPS								
Mailing Address			5	10	2022	\$	860.15	
City OXFORD	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19363	BULK M	AIL				
To Whom Paid			мо	DAY	YEAR			
VARIOUS			MO	DAT	IEAR			
Mailing Address			5	17	2022	\$	1,000.00	
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
			ELECTI	ON DAY EX	PENSES			
Enter Grand Total of Exp							PAGE TOTAL	