Campaign Finance Report

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

Filer Identification	on 2(022C1199			Repor iled I		CAND	NDIDATE COMMITTEE LOBBYIST								
Name of Filing C	committee, Can	didate or L	obbyist:	G	OLOW	vski,	DAVID M	1								
Street Address:																
City:							State:				Zip Code	: 19	533			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PI PRIMARY	RE-	2.	30 DA		POST-	3.		AMENDME REPORT?	NT	Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDAY PELECTION	PRE-	5.	30 DA		POST-			TERMINAT REPORT?	ION	Yes	No	•	/
report type)	ANNUAL REPO	RT 7.	Year 2022				NG METH CHECK C				PAPER / DI			DISKE	TTE	
Name of Office S	Sought by Cand	idate:					DATE (OF ELE	CTION		District Office Party Code Number Code				Coun	
		04					МО	DAY	YEAR	2	5	STH	REP			\dashv
REPRESENTATI	VE IN THE GER	VERAL ASS	EMBLY				11		8 2	022		(SEE INS	TRUCTI	ONS FOR C	ODES)	_
Summary of I		МО	DAY YE	AR			МО	DAY	YEAR	2	FOR	OFFIC	E USE	ONLY		
Expenditures from: 6 7 2022 TO 9 19 2022																
A. Amount Bro	ught Forward F	rom Last R	leport			\$			0	0.00						ļ
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 0.00																
C. Total Funds	Available (Sum	Of Lines A	and B)			\$; ;		O	0.00						
D. Total Expend	ditures (From S	chedule II	.1)			\$; 		4,700	.00						ļ
E. Ending Cash	Balance (Subt	ract Line D	From Line C)	_		\$	<u> </u>		(4,700.	00)						
F. Value Of In-	Kind Contributi	ons Receiv	red (From Sche	dule	: II)	\$;		0	.00						
G. Unpaid Debt	s And Obligation	ons (From S	Schedule IV)			\$;		0	.00		,				
			A	FFI	DAVI	IT SE	CTION									
PART I - If this is	s a Committee	report, trea	surer sign here	e. If	this is	s a Cai	ndidate r	eport,	candidat	e sig	ın here.					
I swear (or affirm) correct and comple		including the	e attached schedu	ıles f	iled on	paper	or by elec	tronic m	edium, ar	e to t	the best of i	my knov	/ledge	and belie	ef , tru	ıe
Sworn to and subs	scribed before me day of	this	20						Sign	ature	of Person	Submitt	ing Rep	ort		- [
	- Sign	nature		_		<u>-</u>					Printe	d Name				- [
My Commission Ex	-	ature									Email					-
	мо	D	PAY Y	YR				Ar	ea Code		Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a c	andidate's	authorized Cor	mmi	ttee, (Candid	late shall	sign h	ere.							
I swear (or affirm) No 320) as amende		of my knowl	edge and belief t	his p	olitical	comm	nittee has i	not viola	ted any p	rovis	ions of the	act of Ju	ine 3,19	937 (P.L.	. 1333	, <u> </u>
Sworn to and subsc		:his								s	ignature of	Candida	ite			-
	day of					_					Printed	Name				-
	Signatu	ire		—		-					Finica	Name				_
My Commission Exp	_							<u> </u>			Email					_
	мо	D	PAY	YR		-		Area	Code		Day	time Te	lephon	e Numbe	er	•

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -								
Name of Filing Committee or Candidate	Reporting	g Period						
GOLOWSKI, DAVID M	From:	6/7/202	<u>2</u> To:	9/19/2022				
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 an 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

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			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

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 Cand	idate		Rep	Reporting Period					
			Fro	m:):			
					DATE		АМ	OUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address	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 Candi	ne of Filing Committee or Candidate		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			Reporting Period						
			Fron	n:		То:			
				D	ATE		АМО	DUNT	
Full Name of Contributor				МО	DAY	YEAR			
dress State (Plus 4)							\$	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	GE 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		AN	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 Detaile	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 Period								
GOLOWSKI, DAVID M	From:	<u>6/7/2022</u> To:	9/19/2022						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)								
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:			То:	
				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	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting P	Period			
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (Contributions De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporti	ng Period		
GOLOWSKI, DAVID M	From	6/7/2022	То:	9/19/2022
		DATE		AMOUNT

						DATE			AMOUNT
	o Whom Paid OLD RIVER MARKETING, LLC				МО	DAY	YEAR		
Mailin	Mailing Address 8500 ALLENTOWN PIKE SUITE 2 5 10 2022					\$	4,700.00		
City	BLANDON		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
			PA	19533	INVOIC DESIGN		7-DOMA	IN HOS	TING, PHOTOS,
								PAGE TOTAL	
Enter	ter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	4,700.00	