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 20	11090				Repo Filed			CAI	NDII	DATE		СОМІ	MITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, Cand	idate or L	obbyis	it:	F	RIEN	DS F	OR	JUD'	Y SC	CHWAI	ΝK							
Street Address:	P O BOX 12	424																	
City:	READING								State	e:	PA			Zip Cod	ie: 19	612			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND F	RIDAY ARY	PRE-	2.		DA\ [MA]		Р	OST-	3.		AMENDM REPORT		Yes	N	0	√
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND F	RIDAY FION	PRE-	5.		DA\ CTI		Р	OST-	6.)	(TERMINA REPORT		Yes	N	0	√
report type)	ANNUAL REPOR	7.	Year	2022					G ME		_			PAPER		\	DISK	ETTE	
Name of Office S	ought by Candi	date:				•			DAT	E O	F ELE	CTI	ON	District Number	Office Code	Pai	ty Code	Code	
SENATOR IN TH	HE GENEDAL AS	SEMBLY						I	МО		DAY	١	/EAR	11	STS	DEI	1	06	
SLINATOR IN TI	IL GLIVERAL AS									11		8	2022		(SEE INS	STRUCTI	ONS FOR	CODES)
Summary of Expenditures		МО	DA		YEAR		T 0		МО		DAY		YEAR	FO	R OFFIC	E USE	ONLY		
-			10	25	20	22	TO			11		28	2022						
	ught Forward Fr		-					\$,031.21	-					
	ary Contribution				Schea	lule 1	<u> </u>	\$,200.00	-					
	Available (Sum			3)				\$,231.21						
D. Total Expend	ditures (From Se	chedule II	(I)				\perp	\$				1,	,161.35						
	Balance (Subtra							\$				75,	.069.86	1					
	Kind Contributio					e II)	+	\$					0.00	-					
G. Unpaid Debt	s And Obligation	ns (From	Schedu	ıle IV)				\$					0.00						_
					AFFI	DAV	IT S	SEC	CTIC	N									
PART I - If this is I swear (or affirm)		-		_											f my knou	ulodao	and ho	iof to	
correct and comple		nciduling th	e attaci	ieu scii	edules	illeu o	п рар	ei o	груе	iecu	OIIIC III	eului	iii, are to	ille best o	i iliy kilov	vieuge	and be	iei , ti	ue
Sworn to and subs	cribed before me t day of	his	20										Signature	e of Perso	n Submitt	ing Re	oort		
	Signa	iture					_							Prin	ted Name	1			
My Commission Ex	pires									•				Ema	il				
	МО	D	AY		YR						Are	ea Co	ode	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	autho	rized (Commi	ittee,	Cand	lida	te sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge ar	nd belie	f this p	politica	l com	nmit	tee h	as no	ot viola	ted a	ny provis	ions of the	e act of Ju	ıne 3,1	937 (P.	L. 133	з,
Sworn to and subsc		is											S	ignature o	of Candida	ite			-
·	day of		_ 20 _				_							Printe	d Name				-
	Signatur	e					_												_
My Commission Exp	ires													Ema	il				
	мо	D	AY		YR		_				Area	Code	•	Da	aytime Te	elephor	ne Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS FOR JUDY SCHWANK	From:	10/25/202	22 To:	11/28/2022
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)			\$	900.00
TOTAL for the Reporting	Period	(2)	\$	900.00
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)			\$	1,300.00
TOTAL for the Reporting	Period	(3)	\$	1,300.00
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			\$	2,200.00

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:		То	!	
		•		DATE			AMOUNT
Full Name of Contributing Co	ommittee		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.

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 Candida	Name of Filing Committee or Candidate			Reporting Period						
FRIENDS FOR JUDY SCHWANK			Fro	m:	10/25/	2022 T o):	11/28/2022		
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
KAREN BAXTER										
Mailing Address 2 BELGIAN LN		_					\$	100.00		
City WERNERSVILLE	State	Zip Code (Plus 4)	11	21	2022				
	PA	195659480								
Full Name of Contributor DOUGLAS RAUCH					DAY	YEAR				
Mailing Address 4 PARK PLZ FL 2							\$	200.00		
City WYOMISSING	State	Zip Code (Plus 4)	11	13	2022				
	PA	196101398								
Full Name of Contributor	-	-			DAY	VEAD				
MICHAEL SETLEY ESQ.				МО	DAY	YEAR				
Mailing Address 4 PARK PLZ FL 2							\$	100.00		
City WYOMISSING	State	Zip Code (Plus 4)	11	13	2022				
	PA	196101398								
Full Name of Contributor				МО	DAY	YEAR				
TIMOTHY S SMITH				МО	DAT	TEAR				
Mailing Address 1735 RAMICH RD							\$	100.00		
City TEMPLE	State	Zip Code (Plus 4)	11	16	2022				
	PA	195609787								
Full Name of Contributor				МО	DAY	YEAR				
LINDA AND TOM WOLESLAGLE										
Mailing Address 242 WHITTON DR	_						\$	200.00		
City READING	State	Zip Code (Plus 4)	11	14	2022				
	PA	196072440								
Full Name of Contributor				МО	DAY	YEAR				
MARY ANN ZERKOWSKI										
Mailing Address 2146 FAIRVIEW AVE							\$	200.00		
City MOUNT PENN	State	Zip Code (Plus 4)	11	16	2022				
	PA	196061810								

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

PAGE TOTAL \$ 900.00

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 Cai	ndidate		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	d 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						
FRIENDS FOR JUDY SCHWANK				Fror	n:	10/25/2	<u>022</u> T	o:	11/28/2022	
					DA	TE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR		. 300.00	
GLENN CORBIN					1-10	DAI	ILAN		\$ 300.00	
Mailing Address 13 IRONSTONE DR					11	13	202	2		
City READING	State	Zij	Code (Plus	34)						
	PA	19	6062946					<u> </u>		
Employer Name WYOMISSING OPTOM	ETRIC CENTER				Occupat	ion	OPTOM	IETR	RIST	
Employer Mailing Address/Principal Plac	e of Business		City			State		Zi	p Code (Plus 4)	
50 BERKSHIRE CT			WYOMISS	ING		PA		19	96101219	
Full Name of Contributor					мо	DAY	YEAR			
JAMES S. BOSCOV					МО	DAT	TEAR		\$ 1,000.00	
Mailing Address 1 HIGH RD					11	21	202	$\overline{}$		
City WYOMISSING	State	Zij	Code (Plus	54)		21	202			
	PA	19	6102521							
Employer Name BOSCOV'S					Occupat	ion	CHAIR	MAN	I AND CEO	
Employer Mailing Address/Principal Plac	e of Business		City			State		Zi	p Code (Plus 4)	
4500 PERKIOMEN AVE			READING			PA		19	96063202	
			_		_		Γ		PAGE TOTAL	
Enter Grand Total of Part C on Schee	dule I, Detailed Su	umn	nary Page,	Section	on 3.			\$	1,300.00	
							L			

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:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<u>'</u>	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	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 Peri	od	
FRIENDS FOR JUDY SCHWANK	From:	10/25/2022 To :	11/28/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	₹	
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		_				 		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:		•	•			•		
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary 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	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
FRIENDS FOR JUDY SCHWANK	From	10/25/2022	То:	11/28/2022			

				DATE		AMOUNT		
To Whom Paid			МО	DAY	YEAR			
BSA- HAWK MOUNTAIN COUN	CIL		МО	JA.	ILAK			
Mailing Address 5027 POTT	SVILLE PIKE		11	21	2022	\$	75.00	
City READING	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	196059516	SPONS	ORSHIP				
To Whom Paid			МО	DAY	YEAR			
DEBBIE L. LUIGARD			MO	JA.	ILAK			
Mailing Address 201 DOUG	LAS ST		11	14	2022	\$	75.84	
City READING	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	196012511	CANDY	FOR PARA	DE			
To Whom Paid PFDW PAC			мо	DAY	YEAR			
Mailing Address PO BOX 27			11	20	2022	<u> </u>	250.00	
	1							
City RIDLEY PARK	State PA	Zip Code (Plus 4)	1	tion of Exp	enditure			
T- W/ P-14	PA	190780027	DONAT:	I				
To Whom Paid JUDITH L SCHWANK			мо	DAY	YEAR			
Mailing Address 169 STITZI	=R RD		11	25	2022	 \$	326.51	
	1							
City READING	State	Zip Code (Plus 4)	· ·	tion of Exp				
To Whom Paid	PA	19604	CAMPA	IGN EXPEN	ISES	1		
WAY HAR FARMS			мо	DAY	YEAR			
Mailing Address 7701 BERN	VILLE RD		11	15	2022	\$	434.00	
City BERNVILLE	State	Zip Code (Plus 4)	Descrip	 tion of Exp	enditure	<u> </u>		
, DEIXIVILLE	PA	195068639	SENATE	_				
	1.7	1 133300033	10210/11				PAGE TOTAL	
Enter Grand Total of Expen	ditures on Page 1, Re	port Cover Page, Item D) .			\$		
						🤻	1,161.35	