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 2019	90198				port ed B		CANDI	DATE		СОМ	ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	late or L	obbyist:		FRI	END	S OF	DAVID R	OWE								
Street Address:																	
City:	LEWISBURG							State:	PA			Zip Cod	le: 17	7837			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	•	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	<u>-</u>	5.	30 DA ELECT	• • • •	POST-	6. X		TERMINA REPORT?		Yes	No		\
report type)	ANNUAL REPORT	7.	Year 2022					IG METHO				PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candida	ite:	-					DATE 0	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YI	EAR		10000	REP			
								11		8	2022		(SEE IN	STRUCTI	ONS FOR O	ODES)
Summary of Expenditures	Receipts and	МО	DAY Y	'EAR	R			МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	irom:		10 25	2	022	T	0	11	:	28	2022						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			127,	417.24						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 1,300.00																	
C. Total Funds Available (Sum Of Lines A and B) \$ 128,717.24																	
D. Total Expenditures (From Schedule III) \$ 307.50								307.50									
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$		-	128,4	109.74						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edu	le II	I)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			•			
			,	AFF	ID/	AVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign he	ere. I	If th	nis is	a Can	ndidate re	eport, d	andi	date sig	jn here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached sche	dules	s file	d on	paper (or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , tru	ue,
Sworn to and subs	cribed before me thi day of	s	20							5	Signature	of Perso	n Submit	ting Rep	ort		
	Signatu	ıre					-					Prin	ted Name	e			
My Commission Ex	cpires						_					Ema	il				_
	МО	D	AY	YR					Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized C	omn	nitte	ee, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of led.	my knowle	edge and belief	this	poli	itical	commi	ittee has n	ot viola	ted ar	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate			-
-	day of						-					Printe	d Name				-
	Signature						-										_
My Commission Exp	ires											Ema	II				
	МО	D	AY	YR			•		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		
FRIENDS OF DAVID ROWE	From:	10/25/202	<u>2</u> 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)	\$	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)			\$	300.00
All Other Contributions (Part D)			\$	1,000.00
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
			I	
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			\$	1,300.00

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 Committe	ee or Candidate		Re	porting	Period			
			Fr	om:		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.

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.

Name of Filing Committee or Candidate					Reporting Period						
From: To:) :					
			DAT	E			AMOUNT				
		МС	DA	Y	YEAR						
						\$	0.00				
State	Zip Code (Plus 4)										
	State	State Zip Code (Plus 4)	мо	MO DA	DATE MO DAY	DATE MO DAY YEAR	DATE MO DAY YEAR \$				

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

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 F	Period		
FRIENDS OF DAVID ROWE	From:	10/25/2022	То:	11/28/2022

DATE AMOUNT

Full N	ame of Contributing Committee			мо	DAY	YEAR	
FARM	ER				DAI	IEAR	\$ 300.00
Mailin	Mailing Address				11	2022	, , , , , , , , , , , , , , , , , , , ,
City	CAMP HILL	State	Zip Code (Plus 4)	11	11	2022	
		PA	17001				

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

PAGE TOTAL \$ 300.00

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 Per	riod				
FRIE	NDS OF DAVID ROWE				Fron	n:	10/25/2	<u>022</u> T	o:	11/28/2022	
						AMOUNT					
Full N	ame of Contributor					мо	DAY	YEAR		\$ 1.000.0	20
HEATI	H W. BROSIUS						2	,		\$ 1,000.0	JU
Mailing Address				11	28	202	,				
City	PORT TREVORTON	State	Zip	p Code (Plus	4)		20	202	۱ ٔ		
		PA	₁₇	'8649250					-		
Emplo	yer Name LAW OFFICE OF HEAT	H W. BROSIUS, LLC	2			Occupat	ion ,	ATTOR	NE	Υ	
Emplo	yer Mailing Address/Principal Plac	e of Business		City			State		z	Zip Code (Plus 4)	
				TREVORTO	N		PA		1	17864	
Enter	ter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3									PAGE TOTAL	
		•		. 5,					\$	1,000.00	

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 of	or Candidate		Report	ing Peri	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)				
Receipt Description	•	•					
Enter Grand Total of Part I	on Schodulo I. Dotailed	Summary Dage	Soction	4			PAGE TOTAL
cincer Granu Total Of Part I	on Schedule 1, Detalled	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 Per	iod	
FRIENDS OF DAVID ROWE	From:	<u>10/25/2022</u> To:	11/28/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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 Can	didate		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 or	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	-	
Section 2.						\$		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			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	′	Stat	e Zip	Code(Plus 4)	Desci	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.										0.00

307.50

STATEMENT OF EXPENDITURES

Name of Filing Committee of	or Candidate		Reporti	ng Period				
FRIENDS OF DAVID ROWE			From	From <u>10/25/2022</u> To: <u>11/2</u>				
				DATE			AMOUNT	
To Whom Paid			МО	DAY	YEAR			
U.S. POSTAL SERVICE								
Mailing Address				11 2 202		\$	240.00	
City LEWISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp				
	PA	178371549	POSTA	GE				
To Whom Paid			мо	DAY	YEAR			
RICK DILENA GRAPHIC DES	SIGN		140		ILAK			
Mailing Address			11	12	2022	\$	67.50	
City BERWICK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	18603	GRAPH:	IC DESIGN	SERVICE	S		
							PAGE TOTAL	
Enter Grand Total of Exp	enditures on Page 1, Re	port Cover Page, Item D).			١.		