### **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	0198			Repo Filed		1	CANDI	DATE		СОМ	4ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:	F	RIEN	DS C	)F [	DAVID R	OWE								
Street Address:																	
City:	LEWISBURG							State:	PA			Zip Cod	le: 17	7837			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PE PRIMARY	RE-	2.		DA IMA		POST-	3.		AMENDM REPORT		Yes	No	•	<b>/</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY P ELECTION	RE-	- 5.		DA ECT	Y F TON	POST-	6.		TERMINA REPORT		Yes	No		<b>/</b>
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2022					IG METHO				PAPER		<b>/</b>	DISKE	TTE	
Name of Office S	Sought by Candida	te:	-					DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
	,							МО	DAY	YE	AR	- rumber	couc	REP	1	couc	
								11		8	2022		(SEE IN	STRUCTI	ONS FOR	CODES	)
Summary of Expenditures	Receipts and from:	МО	DAY YEA			то		МО	DAY		AR	FO	R OFFI	CE USE	ONLY		
-	ught Forward Fro		11 29	20	22	<del> </del>	\$	1		120 /	2023						
	ary Contributions		•	ned	lule T						306.39						
	Available (Sum O						\$ \$				16.13						
D. Total Expend	ditures (From Sch	edule II	I)			+	<del>-</del> \$				01.48						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			+	<u>+</u> \$			135,7	14.65						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sched	lule	e II)		\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)				\$				0.00						
			AF	FI	[DAV	IT S	SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign here	. I1	f this	is a C	Can	didate re	eport, c	candi	date sig	ın here.					
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	e attached schedu	les	filed o	n pap	er c	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , tru	ue <u>.</u>
Sworn to and subs	cribed before me this day of	5	20							S	ignature	of Perso	n Submit	ting Rep	ort		_
	Signatu	re										Prin	ted Name	•			_
My Commission Ex	cpires											Ema	il				
	мо	D	AY Y	'R					Are	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Con	nm	ittee,	Cand	dida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowl	edge and belief th	nis Į	politica	ıl con	nmi	ttee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this day of		20								s	ignature o	of Candid	ate			-
						_						Printe	d Name				-
My Commission Exp	Signature					_						Ema	il				-
						_											_
	МО	D	AY Y	ΥR					Area	Code		D	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:	11/29/202	<u>2</u> To:	1/2/2023
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	20.00
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)			\$	12,286.39
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	12,286.39
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			\$	12,306.39

#### **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 Commit	ttee or Candidate			Report	ting I	Period			
				From:			То	:	
			•			DATE			AMOUNT
Full Name of Contributin	ng Committee			M	0	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 Candi	date		Rep	oorting P	eriod			
			From: T			Го:		
				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.

#### **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:	11/29/2022	То:	1/2/2023

			DA	TE		AMOUNT
Full Name of Contributing Committee			мо	DAY	YEAR	
FRIENDS OF ANDREW LEWIS			1.0	DA!	ILAK	<b>\$</b> 12,286.39
Mailing Address			12	28	2022	,
City HARRISBURG	State	Zip Code (Plus 4)	1 12	20	2022	
	PA	17112				

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

**PAGE TOTAL \$** 12,286.39

### 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	1			Repo	orting Pe	riod			
				Fron	n:		To	):	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
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 Sumn	nary 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:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address	_						$\neg$	
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•	•	•	
			<b>.</b>	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	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:	11/29/2022 <b>To:</b>	1/2/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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	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 Ca	Il Name of Contributor				Reporting Period					
			From:			To:				
				DATE			AMOUNT			
Full Name of Contributor			мо	DAY	YEAR					
Mailing Address						<b> </b>	0.00			
City	State	Zip Code (Plus 4)								
Description of Contribution:	•		•	•						
				_	Г					
Enter Grand Total of Part F of Section 2.	n Schedule II, In-Ki	nd Contributions Detai	led Sum	nmary Pa	ge,		PAGE TOTAL			
						\$	0.00			

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Rep	porting	Period			
				Fro	m:		То:		
						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	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

5,001.48

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Cano	didate		Reporti	ng Period			
FRIENDS OF DAVID ROWE			From	11/29	9/2022	То:	1/2/2023
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
STRIPE							
Mailing Address	12	11	2022	\$	1.48		
City SAN FRANCISCO	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	CA	94103	ON-LIN	E CONTRIE	BUTION P	ROCESSI	NG FEE
To Whom Paid			МО	DAY	YEAR		
PUBLIC IMPACT STRATEGIES			1410	DA.	ILAN		
Mailing Address			12	26	2022	\$	5,000.00
City LEWISBURG	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17837	CAMPA	IGN COMM	UNICATIO	ONS CON	SULTING
Enter Grand Total of Expendite	ures on Page 1. Re	aport Cover Bage Item [	,				PAGE TOTAL