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		CAND	DIDATE COMMITTEE LOBBYIST								
Name of Filing C	Committee, Candid	late or L	obbyist:		FRII	END:	S OF	DAVID R	OWE								
Street Address:	270 HAWTHO)RNE DR															
City:	LEWISBURG							State:	PA			Zip Cod	le: 17	7837			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDMENT Yes REPORT?				0	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	E-	5.	30 DA		POST-	6.		TERMINA REPORT?		Yes	N	0	\
report type)	ANNUAL REPORT	7. X	Year 2022	2				IG METH CHECK O				PAPER		\	DISK	ETTE	
Name of Office S	Sought by Candida	ite:	-					DATE C)F ELE	CTIC	N	District Number	Office Code	Pai	ty Code	Cour	
	,							МО	DAY	Y	EAR	Number	Code	REF	·	TCOUR	
								11		8	2022		(SEE IN	STRUCTI	ONS FOR	CODES	5)
	Receipts and	МО	DAY	YEAR	₹			МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		11 29	2	022	Т	0	1		2	2023						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$	_		128,	409.74						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 12,306.39																	
C. Total Funds Available (Sum Of Lines A and B) \$ 140,716.13																	
D. Total Expenditures (From Schedule III)									5,0	001.48							
E. Ending Cash Balance (Subtract Line D From Line C)							\$			135,7	714.65						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	Schedu	le II	I)	\$				0.00						
G. Unpaid Debt	ts And Obligations	From S	Schedule I\	V)			\$				0.00						
				AFF	FID/	AVI	ΓSE	CTION									
	s a Committee rep	•							•		_						
correct and comple) that this report, inc ete.	luding the	e attached so	chedule	s file	d on	paper	or by elec	tronic m	iedium	i, are to t	the best of	my kno	wledge	and bel	ief , tr	ue
Sworn to and subs	cribed before me thi day of	s	20							9	Signature	of Persoi	n Submit	ting Re	oort		
	Signatu	ıre					-					Print	ted Name	•			
My Commission Ex	cpires						_					Emai	ı				
	МО	D	AY	YR					Ar	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	l Comn	nitte	ee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	my knowle	edge and bel	lief this	poli	tical	comm	ittee has r	not viola	ated ar	ny provisi	ions of the	act of J	une 3,1	937 (P.	L. 133	3,
Sworn to and subso	ribed before me this										Si	ignature o	f Candid	ate			-
	day of						-					Printe	d Name				- $ $
My Commission F	Signature						-					Emai	iI				_
My Commission Exp	es				_		-										_
	МО	D	AY	YR	ł				Area	Code		Da	ytime T	elephor	ne Numi	ber	

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	22 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

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
	From:				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 Filling Committee of Candidate			Reporting Period From: To:					
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	1					

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 Candidate	Reporting P			
FRIENDS OF DAVID ROWE	From:	11/29/2022	То:	1/2/2023

DATE AMOUNT

Full Name of Contributing Committee FRIENDS OF ANDREW LEWIS	МО	DAY	YEAR			
Mailing Address 4075 LINGLESTOWN RD						\$ 12,286.39
City HARRISBURG	State PA	Zip Code (Plus 4) 17112	12	28	2022	

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			Rep	orting Pe	riod			
			Fror	m:		То	:	
				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name		•		Occupat	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page,	Section	on 3.			PA	GE TOTAL
		, 131,				4	•	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 Perio	od				
			From:			To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	1		
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description	·	·		•			•		
Enter Grand Total of Part E	on Schedule I. Detailer	l Summary Page.	Section	4.				PAGE TO	ΓAL
- Communication of the Ex	Januara 1/ Betained	. Jaai y 1 ago,	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 Per	iod	
FRIENDS OF DAVID ROWE	From:	11/29/2022 To :	1/2/2023
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 Candidat	:e		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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candida	te				Re	porting	Period				
					Fro	m:		То	:		
					<u> </u>		DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•		•			Occupa	ation				
Employer Mailing Address/Principal P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	ripti	on of C	ontribution
Enter Grand Total of Part G on S	chedule II, I	In-Kind	Contributi	ons De	taile	ed					PAGE TOTAL
Summary Page, Section 3.											0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Car	ndidate		Reporti	ng Period			
FRIENDS OF DAVID ROWE			From	11/29	9/2022	То:	1/2/2023
				AMOUNT			
To Whom Paid STRIPE	TRIPE				YEAR		
Mailing Address 510 TOWNSEND ST			12	11	2022	\$	1.48
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 94103	1	ption of Exp		PROCESS	SING FEE
To Whom Paid PUBLIC IMPACT STRATEGIES			МО	DAY	YEAR		
Mailing Address PO BOX 482			12	26	2022	\$	5,000.00
City LEWISBURG	State PA	Zip Code (Plus 4) 17837	Description of Expenditure CAMPAIGN COMMUNICATIONS CONSULTING				NSULTING
	L		I				PAGE TOTAL

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

5,001.48