

Campaign Finance Report

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

Filer Identification Number :		2008329		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF JOHN LAWRENCE												
Street Address: PO BOX 331												
City: WEST GROVE						State: PA			Zip Code: 19390			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2024		FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR				
						11	5	2024				
									(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		3	5	2024		4	8	2024				
A. Amount Brought Forward From Last Report						\$ 30,551.34						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 14,421.78						
C. Total Funds Available (Sum Of Lines A and B)						\$ 44,973.12						
D. Total Expenditures (From Schedule III)						\$ 18,217.62						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 26,755.50						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 0.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF JOHN LAWRENCE	From: <u>3/5/2024</u> To: <u>4/8/2024</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 100.00

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)	\$ 1,250.00
TOTAL for the Reporting Period (2)	\$ 1,250.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 9,250.00
All Other Contributions (Part D)	\$ 3,821.78
TOTAL for the Reporting Period (3)	\$ 13,071.78

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 14,421.78
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PART B

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 Candidate	Reporting Period
FRIENDS OF JOHN LAWRENCE	From: <u>3/5/2024</u> To: <u>4/8/2024</u>

				DATE			AMOUNT
Full Name of Contributor D. WILLIAM HOVIS				MO	DAY	YEAR	\$ 100.00
Mailing Address 405 CATAMOUNT RD				3	29	2024	
City OXFORD	State PA	Zip Code (Plus 4) 19363					
Full Name of Contributor THOMAS GUIDO				MO	DAY	YEAR	\$ 250.00
Mailing Address 143 N DEER RUN DR				4	8	2024	
City LINCOLN UNIV	State PA	Zip Code (Plus 4) 19352					
Full Name of Contributor JIM HANAK				MO	DAY	YEAR	\$ 250.00
Mailing Address 305 BAYWOOD RD				2	16	2024	
City WEST CHESTER	State PA	Zip Code (Plus 4) 19382					
Full Name of Contributor DENNIS BYRNE				MO	DAY	YEAR	\$ 200.00
Mailing Address 240 MCCOURT RD				4	11	2024	
City NOTTINGHAM	State PA	Zip Code (Plus 4) 19362					
Full Name of Contributor STEVE ZURL				MO	DAY	YEAR	\$ 250.00
Mailing Address PO BOX 381				2	12	2024	
City WEST GROVE	State PA	Zip Code (Plus 4) 19390					
Full Name of Contributor KENNETH STEINER				MO	DAY	YEAR	\$ 200.00
Mailing Address 116 HONEYSUCKLE RD				2	13	2024	
City NOTTINGHAM	State PA	Zip Code (Plus 4) 19362					

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

PAGE TOTAL

\$ 1,250.00

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 FRIENDS OF JOHN LAWRENCE	Reporting Period From: <u>3/5/2024</u> To: <u>4/8/2024</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
FRIENDS OF JESSE TOPPER				3	15	2024	
Mailing Address PO BOX 458							
City BEDFORD	State PA	Zip Code (Plus 4) 15522					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
FRIENDS OF DAVID ROWE				3	13	2024	
Mailing Address 270 HAWTHORN DR							
City LEWISBURG	State PA	Zip Code (Plus 4) 17837					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
HAPAC - STATE				3	26	2024	
Mailing Address 30 N 3RD ST STE 600							
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PILOTS ASSOC FOR BAY & RIVER DE PAC				3	27	2024	
Mailing Address 820 S COLUMBUS BLVD							
City PHILA	State PA	Zip Code (Plus 4) 19147					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PA COMM FOR AFFORDABLE HOUSING				3	12	2024	
Mailing Address 205 GRANDVIEW AVE							
City CAMP HILL	State PA	Zip Code (Plus 4) 17011					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PENN OSTEOPATHIC MED PAC				3	12	2024	
Mailing Address 1210 EISENHOWER BLVD							
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
PA AC. OF OPHTHALMOLOGY PAC			4	3	2024	
Mailing Address	200 N 3RD ST					
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17101

Full Name of Contributing Committee			MO	DAY	YEAR	\$2,500.00
CITIZENS FOR KALE			3	20	2024	
Mailing Address	PO BOX 94					
City	BEAVER	State	PA	Zip Code (Plus 4)		15009

Full Name of Contributing Committee			MO	DAY	YEAR	\$250.00
NFIB PAC			3	6	2024	
Mailing Address	555 12TH ST NW					
City	WASHINGTON	State	DC	Zip Code (Plus 4)		20004

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
MILLIRON GOODMAN PAC			4	3	2024	
Mailing Address	200 N THIRD ST					
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17101

Full Name of Contributing Committee			MO	DAY	YEAR	\$1,000.00
PA REALTORS PAC			3	5	2024	
Mailing Address	500 N 12TH ST					
City	LEMOYNE	State	PA	Zip Code (Plus 4)		17043

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
JM ULIANA & ASSOC LLC			3	27	2024	
Mailing Address	2571 BAGLYOS CIR					
City	BETHLEHEM	State	PA	Zip Code (Plus 4)		18020

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

PAGE TOTAL
\$ 9,250.00

PART D
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 FRIENDS OF JOHN LAWRENCE	Reporting Period From: <u>3/5/2024</u> To: <u>4/8/2024</u>
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				DATE	AMOUNT		
Full Name of Contributor WILLIAM HOSTETTER				MO	DAY	YEAR	\$ 500.00
Mailing Address 102 STREET RD				2	7	2024	
City OXFORD	State PA	Zip Code (Plus 4) 19363					
Employer Name HUSTETTER GRAIN				Occupation MERCHANDISER			
Employer Mailing Address/Principal Place of Business 481 LIMESTONE RD			City OXFORD		State PA	Zip Code (Plus 4)	
Full Name of Contributor JOSEPH R PITTS				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 619 MARTIN DRIVE				2	3	2024	
City AVONDALE	State PA	Zip Code (Plus 4) 19311					
Employer Name RETIRED				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
Full Name of Contributor DEB ABEL				MO	DAY	YEAR	\$ 1,041.02
Mailing Address 111 PHOENIXVILLE PK				4	3	2024	
City MALVERN	State PA	Zip Code (Plus 4) 19355					
Employer Name ABEL BROS TOWING				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business 3245 PHOENIXVILLE PK			City MALVERN		State PA	Zip Code (Plus 4)	
Full Name of Contributor LAWRIE DRENNAN				MO	DAY	YEAR	\$ 260.25
Mailing Address 671 THUNDER HILL RD							
City LINCOLN UNIV	State PA	Zip Code (Plus 4) 19352					
Employer Name SELF				Occupation RETAIL			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

Full Name of Contributor GUY CIARROCCHI			MO	DAY	YEAR	\$ 520.51
Mailing Address 495 VIRGINIA AVE						
City PAOLI	State PA	Zip Code (Plus 4) 19301				
Employer Name SELF			Occupation STRATEGIST			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor JOANNE LAWRENCE			MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 41			4	8	2024	
City KEMBLESVILLE	State PA	Zip Code (Plus 4) 19347				
Employer Name RETIRED			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 3,821.78

PART E

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	Reporting Period
	From: To:

			DATE			AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL	
\$	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	
FRIENDS OF JOHN LAWRENCE		From: <u>3/5/2024</u> To: <u>4/8/2024</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 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:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF JOHN LAWRENCE	From <u>3/5/2024</u> To: <u>4/8/2024</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
MCCLAFFERTY PRINTING				
Mailing Address 1600 N SCOTT ST	2	6	2024	\$ 1,388.60
City WILMINGTON	State DE	Zip Code (Plus 4) 19808	Description of Expenditure INVOICE 51641 & 51642	
To Whom Paid	MO	DAY	YEAR	
REP. COMMITTEE OF CHESTER CO				
Mailing Address 12 S CHURCH ST	2	12	2024	\$ 150.00
City WEST CHESTER	State PA	Zip Code (Plus 4) 19382	Description of Expenditure TABLE FEE	
To Whom Paid	MO	DAY	YEAR	
KATHY THOMPSON				
Mailing Address	2	12	2024	\$ 100.00
City	State	Zip Code (Plus 4)	Description of Expenditure NOTARY SERVICES	
To Whom Paid	MO	DAY	YEAR	
JEF HAMM				
Mailing Address 47 S. THIRD ST	2	14	2024	\$ 150.00
City OXFORD	State PA	Zip Code (Plus 4) 19363	Description of Expenditure ROOM RENTAL	
To Whom Paid	MO	DAY	YEAR	
JEF HAMM				
Mailing Address 47 S. THIRD ST	2	14	2024	\$ 53.50
City OXFORD	State PA	Zip Code (Plus 4) 19363	Description of Expenditure COFFEE	
To Whom Paid	MO	DAY	YEAR	
WINRED				
Mailing Address	4	1	2024	\$ 85.57
City	State	Zip Code (Plus 4)	Description of Expenditure WINRED FEES	

To Whom Paid PATHFINDER COMMUNICATIONS			MO	DAY	YEAR	\$ 700.00
Mailing Address 857 NATHAN HALE						
City BERWYN	State PA	Zip Code (Plus 4) 19312	Description of Expenditure MAIL INV 24-LAW-C1			

To Whom Paid HILYARDS			MO	DAY	YEAR	\$ 436.05
Mailing Address 1616 NEWPORT GAP PIKE			3	14	2024	
City WILMINGTON	State DE	Zip Code (Plus 4) 19808	Description of Expenditure CANON COPIER SERVICE INV 275307/283632			

To Whom Paid PATHFINDER COMMUNICATIONS			MO	DAY	YEAR	\$ 5,708.00
Mailing Address 857 NATHAN HALE			3	15	2024	
City BERWYN	State PA	Zip Code (Plus 4) 19312	Description of Expenditure MAIL INV - 24 - LAW - 001			

To Whom Paid PATHFINDER COMMUNICATIONS			MO	DAY	YEAR	\$ 9,195.90
Mailing Address 857 NATHAN HALE						
City BERWYN	State PA	Zip Code (Plus 4) 19312	Description of Expenditure MAIL INV 24-LAW- 2 & 3			

To Whom Paid CHESCO YOUNG REPUBLICANS			MO	DAY	YEAR	\$ 250.00
Mailing Address 15 S CHURCH ST			4	2	2024	
City WEST CHESTER	State PA	Zip Code (Plus 4) 19382	Description of Expenditure DONATION			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 18,217.62

