

# Campaign Finance Report

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

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

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

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

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 1,250.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 1,250.00

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

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 14,421.78
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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: To:

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

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

PAGE TOTAL
\$0.00

## 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)**

<b>Name of Filing Committee or Candidate</b> FRIENDS OF JOHN LAWRENCE	<b>Reporting Period</b> From: <u>3/5/2024</u> To: <u>4/8/2024</u>
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				DATE			AMOUNT
Full Name of Contributor D. WILLIAM HOVIS				MO	DAY	YEAR	\$ 100.00
Mailing Address				3	29	2024	
City	OXFORD	State	Zip Code (Plus 4)				
		PA	19363				
Full Name of Contributor THOMAS GUIDO				MO	DAY	YEAR	\$ 250.00
Mailing Address				4	8	2024	
City	LINCOLN UNIV	State	Zip Code (Plus 4)				
		PA	19352				
Full Name of Contributor JIM HANAK				MO	DAY	YEAR	\$ 250.00
Mailing Address				2	16	2024	
City	WEST CHESTER	State	Zip Code (Plus 4)				
		PA	19382				
Full Name of Contributor DENNIS BYRNE				MO	DAY	YEAR	\$ 200.00
Mailing Address				4	11	2024	
City	NOTTINGHAM	State	Zip Code (Plus 4)				
		PA	19362				
Full Name of Contributor STEVE ZURL				MO	DAY	YEAR	\$ 250.00
Mailing Address				2	12	2024	
City	WEST GROVE	State	Zip Code (Plus 4)				
		PA	19390				
Full Name of Contributor KENNETH STEINER				MO	DAY	YEAR	\$ 200.00
Mailing Address				2	13	2024	
City	NOTTINGHAM	State	Zip Code (Plus 4)				
		PA	19362				

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

<b>PAGE TOTAL</b>
\$ 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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF JOHN LAWRENCE	<b>Reporting Period</b>  <b>From:</b> <u>3/5/2024</u> <b>To:</b> <u>4/8/2024</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee FRIENDS OF JESSE TOPPER				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				3	15	2024	
City	BEDFORD	State	PA				
Full Name of Contributing Committee FRIENDS OF DAVID ROWE				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				3	13	2024	
City	LEWISBURG	State	PA				
Full Name of Contributing Committee HAPAC - STATE				MO	DAY	YEAR	\$ 500.00
Mailing Address				3	26	2024	
City	HARRISBURG	State	PA				
Full Name of Contributing Committee PILOTS ASSOC FOR BAY & RIVER DE PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address				3	27	2024	
City	PHILA	State	PA				
Full Name of Contributing Committee PA COMM FOR AFFORDABLE HOUSING				MO	DAY	YEAR	\$ 500.00
Mailing Address				3	12	2024	
City	CAMP HILL	State	PA				
Full Name of Contributing Committee PENN OSTEOPATHIC MED PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address				3	12	2024	
City	HARRISBURG	State	PA				

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

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

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

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

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

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

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

<b>PAGE TOTAL</b>
\$ 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.)**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF JOHN LAWRENCE	<b>Reporting Period</b>  <b>From:</b> <u>3/5/2024</u> <b>To:</b> <u>4/8/2024</u>
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				DATE	AMOUNT		
<b>Full Name of Contributor</b> JOANNE LAWRENCE				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> City KEMBLESVILLE State PA Zip Code (Plus 4) 19347				4	8	2024	
<b>Employer Name</b> RETIRED				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>
<b>Full Name of Contributor</b> GUY CIARROCCHI				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 520.51
<b>Mailing Address</b> City PAOLI State PA Zip Code (Plus 4) 19301							
<b>Employer Name</b> SELF				<b>Occupation</b> STRATEGIST			
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>
<b>Full Name of Contributor</b> LAWRIE DRENNAN				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 260.25
<b>Mailing Address</b> City LINCOLN UNIV State PA Zip Code (Plus 4) 19352							
<b>Employer Name</b> SELF				<b>Occupation</b> RETAIL			
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>
<b>Full Name of Contributor</b> DEB ABEL				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,041.02
<b>Mailing Address</b> City MALVERN State PA Zip Code (Plus 4) 19355				4	3	2024	
<b>Employer Name</b> ABEL BROS TOWING				<b>Occupation</b> PRESIDENT			
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b> MALVERN		<b>State</b> PA	<b>Zip Code (Plus 4)</b>

<b>Full Name of Contributor</b> JOSEPH R PITTS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 1,000.00
<b>Mailing Address</b>			2	3	2024	
<b>City</b> AVONDALE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19311				
<b>Employer Name</b> RETIRED			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		
<b>Full Name of Contributor</b> WILLIAM HOSTETTER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 500.00
<b>Mailing Address</b>			2	7	2024	
<b>City</b> OXFORD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19363				
<b>Employer Name</b> HUSTETTER GRAIN			<b>Occupation</b> MERCHANDISER			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b> OXFORD	<b>State</b> PA	<b>Zip Code (Plus 4)</b>		

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

<b>PAGE TOTAL</b>
<b>\$</b> 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: <span style="float: right;">To:</span>
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			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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF JOHN LAWRENCE		From: <u>3/5/2024</u> To: <u>4/8/2024</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
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				2	6	2024	
City		State	Zip Code (Plus 4)	Description of Expenditure			
WILMINGTON		DE	19808	INVOICE 51641 & 51642			
To Whom Paid				MO	DAY	YEAR	\$
REP. COMMITTEE OF CHESTER CO							
Mailing Address				2	12	2024	
City		State	Zip Code (Plus 4)	Description of Expenditure			
WEST CHESTER		PA	19382	TABLE FEE			
To Whom Paid				MO	DAY	YEAR	\$
KATHY THOMPSON							
Mailing Address				2	12	2024	
City		State	Zip Code (Plus 4)	Description of Expenditure			
				NOTARY SERVICES			
To Whom Paid				MO	DAY	YEAR	\$
JEF HAMM							
Mailing Address				2	14	2024	
City		State	Zip Code (Plus 4)	Description of Expenditure			
OXFORD		PA	19363	ROOM RENTAL			
To Whom Paid				MO	DAY	YEAR	\$
JEF HAMM							
Mailing Address				2	14	2024	
City		State	Zip Code (Plus 4)	Description of Expenditure			
OXFORD		PA	19363	COFFEE			
To Whom Paid				MO	DAY	YEAR	\$
WINRED							
Mailing Address				4	1	2024	
City		State	Zip Code (Plus 4)	Description of Expenditure			
				WINRED FEES			

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

  

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

  

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

  

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

  

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

  

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

