

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 :		2007306		Report Filed By :		CANDIDATE		COMMITTEE		✓		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF GENE YAW													
Street Address: PO BOX 56													
City: RALSTON						State: PA				Zip Code: 17763			
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	✓			
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	✓			
	ANNUAL REPORT	7.	Year 2024	FILING METHOD () CHECK ONE			PAPER	✓	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
						MO	DAY	YEAR	REP				
						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					\$ 267,617.94								
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 500.00								
C. Total Funds Available (Sum Of Lines A and B)					\$ 268,117.94								
D. Total Expenditures (From Schedule III)					\$ 10,208.46								
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 257,909.48								
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 GENE YAW	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)	\$ 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)	\$ 0.00
All Other Contributions (Part D)	\$ 500.00
TOTAL for the Reporting Period (3)	\$ 500.00

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.)	\$ 500.00
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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 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 Period	
	From:	To:

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

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

PAGE TOTAL
\$ 0.00

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 GENE YAW	Reporting Period From: <u>3/5/2024</u> To: <u>4/8/2024</u>
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
KENNETH M. DIROCCO					\$ 500.00
Mailing Address 316 JORDAN AVENUE				4	8 2024
City MONTOURSVILLE	State PA	Zip Code (Plus 4) 17754			
Employer Name 33RD ST. PLAZA D/B/A IMPACT ADVERTISING				Occupation PARTNER	
Employer Mailing Address/Principal Place of Business 4642 RT 220 SOUTH		City LINDEN		State PA	Zip Code (Plus 4) 17744

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

PAGE TOTAL
\$ 500.00

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:
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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.

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 GENE YAW		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 GENE YAW	From <u>3/5/2024</u> To: <u>4/8/2024</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
TODD KRIICK GRAPHIC DESIGN				
Mailing Address 13 CLOVER LANE	3	13	2024	\$ 121.90
City PALMYRA	State PA	Zip Code (Plus 4) 17078	Description of Expenditure ADS	
To Whom Paid	MO	DAY	YEAR	
STANDARD JOUNAL				
Mailing Address 21 N. ARCH STREET	3	15	2024	\$ 415.00
City MILTON	State PA	Zip Code (Plus 4) 17847	Description of Expenditure ADVERTISING	
To Whom Paid	MO	DAY	YEAR	
AA SELF STORAGE				
Mailing Address 5265 LYCOMING MALL DRIVE	3	15	2024	\$ 132.50
City MONTOURSVILLE	State PA	Zip Code (Plus 4) 17754	Description of Expenditure STORAGE OF CAMPAIGN MATERIALS	
To Whom Paid	MO	DAY	YEAR	
E. E. YAW				
Mailing Address 1965 MOUNT VIEW AVENUE	3	15	2024	\$ 232.02
City MONTOURSVILLE	State PA	Zip Code (Plus 4) 17754	Description of Expenditure REIMBURSE PETITION MEETING	
To Whom Paid	MO	DAY	YEAR	
E. E. YAW				
Mailing Address 1965 MOUNT VIEW AVENUE	3	15	2024	\$ 1,266.00
City MONTOURSVILLE	State PA	Zip Code (Plus 4) 17754	Description of Expenditure REIMBURSE SENATE GIFTS	
To Whom Paid	MO	DAY	YEAR	
E. E. YAW				
Mailing Address 1965 MOUNT VIEW AVENUE	3	15	2024	\$ 49.00
City MONTOURSVILLE	State PA	Zip Code (Plus 4) 17754	Description of Expenditure REIMBURSE PETITION MEETING	

To Whom Paid E. E. YAW			MO	DAY	YEAR	\$ 417.52
Mailing Address 1965 MOUNT VIEW AVENUE			3	15	2024	
City MONTOURSVILLE	State PA	Zip Code (Plus 4) 17754	Description of Expenditure REIMBURSE CHRISTMAS CARDS			

To Whom Paid E. E. YAW			MO	DAY	YEAR	\$ 2,777.27
Mailing Address 1965 MOUNT VIEW AVENUE			3	15	2024	
City MONTOURSVILLE	State PA	Zip Code (Plus 4) 17754	Description of Expenditure REIMBURSE PA SOCIETY EXPENSE			

To Whom Paid LORI KNOWLDEN			MO	DAY	YEAR	\$ 800.00
Mailing Address PO BOX 56			3	24	2024	
City RALSTON	State PA	Zip Code (Plus 4) 17763	Description of Expenditure BOOKKEEPING SERVICES			

To Whom Paid NICK TROUTMAN			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 362 MAIN CAPITAL			3	25	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17120	Description of Expenditure REIMBURSE PA SOCIETY EXPENSE			

To Whom Paid ELIZABETH WEITZEL			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 362 MAIN CAPITAL			3	25	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17120	Description of Expenditure REIMBURSE PA SOCIETY EXPENSE			

To Whom Paid FRIENDS OF NRA			MO	DAY	YEAR	\$ 1,700.00
Mailing Address BLUEBIRD LANE			3	28	2024	
City COGAN STATION	State PA	Zip Code (Plus 4) 17728	Description of Expenditure CONTRIBUTION			

To Whom Paid GRAPHIC HIVE			MO	DAY	YEAR	\$ 297.25
Mailing Address 124 REYNOLDS STREET			3	28	2024	
City SOUTH WILLIAMSPORT	State PA	Zip Code (Plus 4) 17702	Description of Expenditure STAFF VESTS			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 10,208.46

