### **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 201	1090			Rep File			CANDI	DATE		соми	<b>ITTEE</b>	✓	LOB	BYIST		
Name of Filing C	Committee, Candid	late or L	obbyist:		FRIE	ND	S FOR	JUDY S	CHWAI	٧K							
Street Address:																	
City:	READING							State:	PA			Zip Cod	<b>ie:</b> 19	9612			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY   PRIMARY	PRE-	. 2	2.	30 DA PRIMA		POST-	3. <b>X</b>		AMENDM REPORT		Yes	No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No		<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2024					IG METHO				PAPER		<b>/</b>	DISKE	TTE	
Name of Office S	Sought by Candida	ite:	-					DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YE	AR	11	STS	DEI	1	06	
SENATOR IN TH	HE GENERAL ASS	EMBLY						11		5	2024		(SEE IN	STRUCTI	ONS FOR	CODES	)
	Receipts and	МО	DAY Y	EAR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	s trom:		4 9	20	)24	Т	0	5		13	2024						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			121,1	.80.49						
B. Total Monet	ary Contributions	And Rec	eipts (From S	che	dule	I)	\$			8,4	20.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			129,6	00.49						
D. Total Expend	ditures (From Sch	edule II	I)				\$			4,2	08.00						
E. Ending Cash	Balance (Subtra	t Line D	From Line C)				\$		:	125,3	92.49						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edul	e II)	)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00						
			A	\FF	IDA	VI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign he	re. I	f thi	is is	a Can	ididate r	eport, d	candio	date sig	jn here.					
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	attached sched	lules	filed	l on	paper (	or by elect	ronic m	edium	, are to t	the best o	f my knov	wledge	and beli	ef , trı	ue,
Sworn to and subs	cribed before me the day of	s	20							s	ignature	of Perso	n Submit	ting Re <sub>l</sub>	oort		
	Signate	ıre					-					Prin	ted Name	•			_
My Commission Ex	cpires											Ema	il				_
	мо	D	AY	YR					Ar	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Co	mm	itte	e, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and belief	this	politi	ical	commi	ittee 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										s	ignature o	of Candida	ate			-
	day of —— ————						_					Printa	d Name				_
	Signature						-										_
My Commission Exp	_											Ema	il				
	МО	D	AY	YR			•		Area	Code		Da	aytime T	elephor	ne Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS FOR JUDY SCHWANK	From:	<u>4/9/202</u>	<u>4</u> То:	<u>5/13/2024</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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)			\$	320.00
TOTAL for the Reporting	g Period	(2)	\$	320.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	3,000.00
All Other Contributions (Part D)			\$	5,000.00
TOTAL for the Reporting	J Period	(3)	\$	8,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	j Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	8,420.00

#### **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 Co	andidate	R	eporting	Period			
		F	rom:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Comm	ittee		МО	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)

Nan	me of Filing Committee or Can	didate		Repo	rting Pe	eriod			
FRI	ENDS FOR JUDY SCHWANK			From	n:	4/9/	2024 <b>T</b> o	<b>)</b> :	5/13/2024
						DATE			AMOUNT
Full N	lame of Contributor				мо	DAY	YEAR		
CHAR	RLES CORBIT								
Mailin	ng Address	<u> </u>						\$	120.00
City	READING	State	Zip Code (Plus 4	)	5	4	2024		
		PA	196069626						
Full N	lame of Contributor				мо	DAY	YEAR		
ARTH	UR NAYLOR				М	DAI	ILAK		
Mailin	ng Address							\$	100.00
City	WYOMISSING	State	Zip Code (Plus 4	)	4	9	2024		
		PA	196102114						
Full N	lame of Contributor				мо	DAY	YEAR		
ARTH	UR NAYLOR				М	DAI	ILAK		
Mailin	ng Address							\$	100.00
City	WYOMISSING	State	Zip Code (Plus 4	)	5	9	2024		
		PA	196102114						

**PAGE TOTAL \$** 320.00

#### **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.

**Reporting Period** 

FRIENDS FOR JUDY SCHWANK			From:	<u>4</u> /	<u>/9/2024</u>	То:	<u>5</u>	5/13/2024
				DA	TE		Α	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
CITIZENS FOR HUGHES							_ \$	1,000.00
Mailing Address				4	9	2024	1	·
City PHILADELPHIA	State	Zip Cod	e (Plus 4)			2024		
	PA	191013	8031					
Full Name of Contributing Committee				мо	DAY	YEAR		
PA AUTOMOTIVE ASSOCIATION							\$	1,000.00
Mailing Address				4	12	2024		·
City HARRISBURG	State	Zip Cod	e (Plus 4)	·		202		
	PA	171022	214					
Full Name of Contributing Committee				мо	DAY	YEAR		
PENN NATIONAL GAMING					2711		\$	500.00
Mailing Address				4	16	2024	7	
City WYOMISSING	State	Zip Cod	e (Plus 4)	7	10	2024		
	PA	196101	.247					
Full Name of Contributing Committee				мо	DAY	YEAR		
SEIU HEALTHCARE PA COPE				1-10		ILAK	\$	500.00
Mailing Address				4	16	2024	7	500.00
City HARRISBURG	State	Zip Cod	e (Plus 4)	4	10	2024		
	PA	171022	2528				<u> </u>	

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

Name of Filing Committee or Candidate

**PAGE TOTAL \$** 3,000.00

### 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 Candidat	e		Rep	orting Pe	riod			
FRIENDS FOR JUDY SCHWANK			Fron	m:	<u>4/9/2</u>	<u>024</u> <b>T</b>	0:	5/13/2024
				D/	ATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		F 000 00
CRAIG STEIN					57(1	,	\$	5,000.00
Mailing Address				5	10	2024	.	
City BLUE BELL	State	Zip Code (Pl	ıs 4)		10	202	`	
	l <sub>PA</sub>	194222475						
Employer Name NOT EMPLOYED				Occupat	tion	NOT EN	1PLO	YED
Employer Mailing Address/Principal P	ace of Business	City			State		Zip	Code (Plus 4)
		BLUE BE	LL		PA		194	4222475
Enter Grand Total of Part C on Sch	edule I, Detailed S	ummarv Page	e, Sectio	on 3.				PAGE TOTAL
	,	,	,				\$	5,000.00

## 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:			То:		
		•		C	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Pl	lus 4)					
Receipt Description	<b>'</b>	<b>.</b>			•			
Futor Curred Total of Bout	Fan Cabadula I. Datailad	I Communication of the Communi		4			F	PAGE TOTAL
Enter Grand Total of Part	E ON Schedule 1, Detalled	i Summary Page, S	ection	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 Period		
FRIENDS FOR JUDY SCHWANK	From:	<u>4/9/2024</u> <b>To:</b>	<u>5/13/2024</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
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, 1		\$	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:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				<b> </b>		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:		•	•			•		
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (	Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidat	e			Re	porting	Period				
				Fro	om:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$	0	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor	•		•		Occup	ation				
Employer Mailing Address/Principal Pl	ace of Business	Ci	ty	Stat	e Zi <sub>l</sub>	Code(Plus 4)	Descr	iptio	on of Contribution	1
Enter Grand Total of Part G on Sc	hedule II. In-K	ind	Contributions D	etaile	ed				PAGE TOTA	\L
Summary Page, Section 3.					"				0	.00

# STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Pe	eriod		
FRIENDS FOR JUDY SCHWANK	From	4/9/2024	То:	5/13/2024

					DATE		AMOUNT
To Whom Paid				МО	DAY	YEAR	
BERKS COUNT	Y DEMOCRATIC COMMIT	TEE					
Mailing Addres	s			4	14	2024	\$ 160.00
City READIN	NG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	196011419	SIGNBO	ARDS AT	POLLS	
To Whom Paid				мо	DAY	YEAR	
BERKS COUNT	Y DEMOCRATIC COMMIT	TEE		MO	DAT	TEAR	
Mailing Addres	s			5	13	2024	\$ 600.00
City READIN	NG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	196011419	TICKETS	S		
To Whom Paid				мо	DAY	YEAR	
BERKS ENCOR	E			MO	DAI	ILAK	
Mailing Addres	s			5	13	2024	\$ 195.00
City READIN	NG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	196013657	SENIOR	EXPO AD		
To Whom Paid							
	E COMMUNICATIONS LLC	2		мо	DAY	YEAR	
	IE COMMUNICATIONS LLO	2		<b>MO</b> 4	<b>DAY</b> 30	<b>YEAR</b> 2024	\$ 2,000.00
BRIT CRAMPSI	IE COMMUNICATIONS LLO	State	Zip Code (Plus 4)	4		2024	\$ 2,000.00
BRIT CRAMPSI  Mailing Address	IE COMMUNICATIONS LLO	Γ	<b>Zip Code (Plus 4)</b> 170133542	4  Descript	30	2024 enditure	\$ 2,000.00
BRIT CRAMPSI  Mailing Address	IE COMMUNICATIONS LLO	State		4  Descript COMMU	30 tion of Exp NICATION	2024 enditure	\$ 2,000.00
BRIT CRAMPSI  Mailing Addres  City CARLIS	IE COMMUNICATIONS LLO	State		4  Descript	30	2024 enditure	\$ 2,000.00
BRIT CRAMPSI  Mailing Addres  City CARLIS  To Whom Paid	IE COMMUNICATIONS LLO	State		4  Descript COMMU	30 tion of Exp NICATION	2024 enditure	\$ 2,000.00
BRIT CRAMPSI  Mailing Addres  City CARLIS  To Whom Paid  SALVATION AR	IE COMMUNICATIONS LLO S S S S RMY	State		4  Descript COMMU  MO	30 tion of Exp NICATION DAY	2024 enditure S YEAR 2024	
Mailing Addres  City CARLIS  To Whom Paid SALVATION AR  Mailing Addres	IE COMMUNICATIONS LLO S S S S RMY	State PA	170133542	4  Descript COMMU  MO	30  tion of Exp  NICATION  DAY  13	2024 enditure S YEAR 2024	
Mailing Addres  City CARLIS  To Whom Paid SALVATION AR  Mailing Addres	IE COMMUNICATIONS LLO S S S S S S S S S S S S S S S S S S	State PA State	170133542  Zip Code (Plus 4)	Descript COMMU MO 4 Descript SPONSO	30  tion of Exp  NICATION  DAY  13  tion of Exp	2024 enditure S YEAR 2024 enditure	
BRIT CRAMPSI  Mailing Addres  City CARLIS  To Whom Paid  SALVATION AR  Mailing Addres  City READIN	IE COMMUNICATIONS LLO S S GLE RMY S NG	State PA State	170133542  Zip Code (Plus 4)	Description 4  Description 4  Description 4	30  tion of Exp  NICATION  DAY  13	2024 enditure S YEAR 2024	
BRIT CRAMPSI  Mailing Addres  City CARLIS  To Whom Paid  SALVATION AR  Mailing Addres  City READIN	IE COMMUNICATIONS LLO IS	State PA State	170133542  Zip Code (Plus 4)	Descript COMMU MO 4 Descript SPONSO	30  tion of Exp  NICATION  DAY  13  tion of Exp	2024 enditure S YEAR 2024 enditure	
Mailing Addres  City CARLIS  To Whom Paid SALVATION AR  Mailing Addres  City READIN  To Whom Paid TROOPER MELI	IE COMMUNICATIONS LLO IS	State PA State	170133542  Zip Code (Plus 4)	Description 4  Description 4  Description 4  Description 5  Description 5  MO  4	30  tion of Exp  NICATION  DAY  13  tion of Exp  DRSHIP  DAY	2024 enditure S YEAR 2024 enditure YEAR 2024	\$ 500.00

To Whom Paid WYOMISSING/READING ROTARY CLUB					мо	DAY	YEAR		
					МО	DAI	ILAK		
Mailing Address					4	13	2024	\$	100.00
City	WYOMISSING	State		Zip Code (Plus 4)	Description of Expenditure				
		PA		196100184	SPONSOR FLAGS				
To Whom Paid					мо	DAY	YEAR		
ZELDA YODER					110		I = Aux		
Mailing Address					4	19	2024	\$	553.00
City	READING	State		Zip Code (Plus 4)	Description of Expenditure				
		PA		196041633	FUNDRA	AISING AN	D POSTA	GE	
									PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.								\$	4,208.00