

# 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:											
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.	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. X	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		
		10	22	2024		11	25	2024			
A. Amount Brought Forward From Last Report					\$ 39,718.39						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 15,472.04						
C. Total Funds Available (Sum Of Lines A and B)					\$ 55,190.43						
D. Total Expenditures (From Schedule III)					\$ 23,077.88						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 32,112.55						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 33,455.56						
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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF JOHN LAWRENCE	From: <u>10/22/2024</u> To: <u>11/25/2024</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 72.04

<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>	\$ 250.00
<b>All Other Contributions (Part B)</b>	\$ 150.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 400.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 12,000.00
<b>All Other Contributions (Part D)</b>	\$ 3,200.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 15,200.00

<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>	\$ 15,672.04
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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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF JOHN LAWRENCE	<b>Reporting Period</b>  <b>From:</b> <u>10/22/2024</u> <b>To:</b> <u>11/25/2024</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"><b>DATE</b></td> <td style="width: 40%; border: none;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

<b>Full Name of Contributing Committee</b> FIRST PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b>			11	20	2024	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101				

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

<b>PAGE TOTAL</b>
\$ 250.00

**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>	<b>Reporting Period</b>
FRIENDS OF JOHN LAWRENCE	From: <u>10/22/2024</u> To: <u>11/25/2024</u>

DATE				AMOUNT
<b>Full Name of Contributor</b>				
JOHN & JAN SCHOFF				
<b>Mailing Address</b>				
<b>City</b> WILMINGTON	<b>State</b> DE	<b>Zip Code (Plus 4)</b> 19808		
		11	20	2024
				\$ 150.00

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

<b>PAGE TOTAL</b>
\$ 150.00

## 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>10/22/2024</u> <b>To:</b> <u>11/25/2024</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 300.00
NFIB PAC				10	30	2024	
Mailing Address							
City	WASHINGTON	State	DC	Zip Code (Plus 4)		20004	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
AMERICAN KENNEL CLUB PAC				10	26	2024	
Mailing Address							
City	NEW YORK	State	NY	Zip Code (Plus 4)		10178	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 700.00
FARMER PAC				11	18	2024	
Mailing Address							
City	CAMP HILL	State	PA	Zip Code (Plus 4)		17001	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PA MEDICAL PAC				11	18	2024	
Mailing Address							
City	MECHANICSBURG	State	PA	Zip Code (Plus 4)		17050	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 10,000.00
COMMONWEALTH CHILDRENS CH FD				11	18	2024	
Mailing Address							
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17101	

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

<b>PAGE TOTAL</b>
\$ 12,000.00

**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>  From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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				DATE	AMOUNT		
<b>Full Name of Contributor</b> JEFFREY NOWLAND				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 300.00
<b>Mailing Address</b> City OXFORD State PA Zip Code (Plus 4) 19363				11	1	2024	
<b>Employer Name</b> NOWLAND ASSOC				<b>Occupation</b> VP OF OPERATIONS			
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b> NEWARK		<b>State</b> DE	<b>Zip Code (Plus 4)</b>
<b>Full Name of Contributor</b> MICHAEL ECKMAN				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,500.00
<b>Mailing Address</b> City CHRISTIANA State PA Zip Code (Plus 4) 17509				10	30	2024	
<b>Employer Name</b> JD ELKMAN INC				<b>Occupation</b> SR. VICE PRES			
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b> ATGLEN		<b>State</b> PA	<b>Zip Code (Plus 4)</b>
<b>Full Name of Contributor</b> GWENNE ALEXANDER				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> City COATESVILLE State PA Zip Code (Plus 4) 19320				10	26	2024	
<b>Employer Name</b>				<b>Occupation</b> RETIRED			
<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> GEORGE KEYES				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 400.00
<b>Mailing Address</b> City KENNET SQ State PA Zip Code (Plus 4) 19348				10	30	2024	
<b>Employer Name</b>				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>

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

<b>PAGE TOTAL</b>
\$ 3,200.00

## 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>  <b>From:</b> <b>To:</b>
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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>10/22/2024</u> To: <u>11/25/2024</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)	\$ 33,455.56
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.)			\$ 33,455.56

**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**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF JOHN LAWRENCE	<b>Reporting Period</b>  From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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				DATE		AMOUNT	
Full Name of Contributor REPUBLICAN PARTY OF PA				MO	DAY	YEAR	\$ 25,326.60
Mailing Address				10	25	2024	
City	HARRISBURG	State	PA	Zip Code(Plus 4)		17110	
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution CAMPAIGN LIT & POSTAGE	
Full Name of Contributor REPUBLICAN PARTY OF PA				MO	DAY	YEAR	\$ 8,128.96
Mailing Address				10	25	2024	
City	HARRISBURG	State	PA	Zip Code(Plus 4)		17110	
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution CAMPAIGN LIT & POSTAGE	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.							PAGE TOTAL 33,455.56

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF JOHN LAWRENCE	From <u>10/22/2024</u> To: <u>11/25/2024</u>

				DATE	AMOUNT		
To Whom Paid HRCC				MO	DAY	YEAR	\$ 8,900.00
Mailing Address				10	23	2024	
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17108	Description of Expenditure DONATION	
To Whom Paid WIN RED				MO	DAY	YEAR	\$ 0.99
Mailing Address				10	29	2024	
City		State		Zip Code (Plus 4)		Description of Expenditure FEES	
To Whom Paid POSTMASTER				MO	DAY	YEAR	\$ 3,660.45
Mailing Address				10	25	2024	
City	WEST GROVE	State	PA	Zip Code (Plus 4)	19390	Description of Expenditure POSTAGE	
To Whom Paid AD PRO				MO	DAY	YEAR	\$ 600.00
Mailing Address				10	26	2024	
City		State		Zip Code (Plus 4)		Description of Expenditure NEWSPAPER AD	
To Whom Paid PATHFINDER COMMUNICATIONS				MO	DAY	YEAR	\$ 6,415.00
Mailing Address				10	24	2024	
City		State		Zip Code (Plus 4)		Description of Expenditure TXT INVOICE	
To Whom Paid PATHFINDER COMMUNICATIONS				MO	DAY	YEAR	\$ 1,450.00
Mailing Address				10	26	2024	
City		State		Zip Code (Plus 4)		Description of Expenditure TXT INVOICE	

<b>To Whom Paid</b> WINRED			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 1.97
<b>Mailing Address</b>			11	4	2024	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> FEES			
<b>To Whom Paid</b> JOHN LAWRENCE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 1,799.47
<b>Mailing Address</b>			11	8	2024	
<b>City</b> WEST GROVE	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> REIMBURSEMENTS			
	PA	19350				
<b>To Whom Paid</b> LIGHTHOUSE YOUTH CENTER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 250.00
<b>Mailing Address</b>			11	9	2024	
<b>City</b> OXFORD	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> DONATION			
	PA	19363				
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> <b>\$</b> 23,077.88

