

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.	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

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

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

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 250.00
All Other Contributions (Part B)	\$ 150.00
TOTAL for the Reporting Period (2)	\$ 400.00

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

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.)	\$ 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.**

Name of Filing Committee or Candidate FRIENDS OF JOHN LAWRENCE				Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>			
DATE						AMOUNT	
Full Name of Contributing Committee FIRST PAC				MO	DAY	YEAR	\$ 250.00
Mailing Address 500 N 3RD ST				11	20	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					

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

PAGE TOTAL
\$ 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)

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

				DATE			AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$150.00	
JOHN & JAN SCHOFF								
Mailing Address602 PARKER CT				11	20	2024		
CityWILMINGTON		StateDE	Zip Code (Plus 4)19808					

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

PAGE TOTAL
\$ 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.

Name of Filing Committee or Candidate FRIENDS OF JOHN LAWRENCE	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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				DATE	AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR
NFIB PAC				10	30	2024
Mailing Address 555 12TH T						
City WASHINGTON	State DC	Zip Code (Plus 4) 20004				
Full Name of Contributing Committee				MO	DAY	YEAR
AMERICAN KENNEL CLUB PAC				10	26	2024
Mailing Address 101 PARK AV						
City NEW YORK	State NY	Zip Code (Plus 4) 10178				
Full Name of Contributing Committee				MO	DAY	YEAR
FARMER PAC				11	18	2024
Mailing Address 510 S 3RD ST						
City CAMP HILL	State PA	Zip Code (Plus 4) 17001				
Full Name of Contributing Committee				MO	DAY	YEAR
PA MEDICAL PAC				11	18	2024
Mailing Address 400 WINDING CREEK BLVD						
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050				
Full Name of Contributing Committee				MO	DAY	YEAR
COMMONWEALTH CHILDRENS CH FD				11	18	2024
Mailing Address 420 N 3RD ST						
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				

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

PAGE TOTAL
\$ 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.)**

Name of Filing Committee or Candidate FRIENDS OF JOHN LAWRENCE	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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				DATE	AMOUNT		
Full Name of Contributor GEORGE KEYES				MO	DAY	YEAR	\$ 400.00
Mailing Address 119 LANTANA DR				10	30	2024	
City KENNET SQ	State PA	Zip Code (Plus 4) 19348					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
Full Name of Contributor GWENNE ALEXANDER				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 123 RIVERSIDE LANE				10	26	2024	
City COATESVILLE	State PA	Zip Code (Plus 4) 19320					
Employer Name				Occupation RETIRED			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
Full Name of Contributor MICHAEL ECKMAN				MO	DAY	YEAR	\$ 1,500.00
Mailing Address 63 BERRY CREEK				10	30	2024	
City CHRISTIANA	State PA	Zip Code (Plus 4) 17509					
Employer Name JD ELKMAN INC				Occupation SR. VICE PRES			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
4771 LOWER VALLEY RD			ATGLEN		PA		
Full Name of Contributor JEFFREY NOWLAND				MO	DAY	YEAR	\$ 300.00
Mailing Address 203 HOOKERS CREAMERY RD				11	1	2024	
City OXFORD	State PA	Zip Code (Plus 4) 19363					
Employer Name NOWLAND ASSOC				Occupation VP OF OPERATIONS			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
2004 OGLETOWN RD			NEWARK		DE		

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

PAGE TOTAL
\$ 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.

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 JOHN LAWRENCE		From: <u>10/22/2024</u> To: <u>11/25/2024</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)	\$ 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: To:

			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 FRIENDS OF JOHN LAWRENCE	Reporting Period 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 3501 N FRONT ST				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 3501 N FRONT ST				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

Name of Filing Committee or Candidate	Reporting Period
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 PO BOX 556				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				

To Whom Paid WINRED			MO	DAY	YEAR	\$ 1.97
Mailing Address			11	4	2024	
City	State	Zip Code (Plus 4)	Description of Expenditure FEES			
To Whom Paid JOHN LAWRENCE			MO	DAY	YEAR	\$ 1,799.47
Mailing Address PO BOX 331			11	8	2024	
City WEST GROVE	State	Zip Code (Plus 4)	Description of Expenditure REIMBURSEMENTS			
	PA	19350				
To Whom Paid LIGHTHOUSE YOUTH CENTER			MO	DAY	YEAR	\$ 250.00
Mailing Address			11	9	2024	
City OXFORD	State	Zip Code (Plus 4)	Description of Expenditure DONATION			
	PA	19363				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 23,077.88

