Campaign Finance Report

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

Filer Identificat Number :	ion 2007	306			Report Filed B		CANDI	DATE	СОМ	MITTEE	✓	LOB	BYIST		
Name of Filing	Committee, Candid	ate or L	obbyist:			-	GENE YA	W							
Street Address:															
City:	RALSTON						State:	PA		Zip Co	de: 17	763			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 DA PRIM		POST-	3.	AMENDMENT REPORT?		Yes	V	lo	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		POST-	6.		TERMINATION REPORT?		N	lo	\checkmark
report type)	ANNUAL REPORT	7. X	Year 2024				NG METHO CHECK O			PAPER		\checkmark	DISK	ETTE	
Name of Office	L Sought by Candida	te:					DATE O	F ELEC	TION	District Number	Office Code	Par	ty Cod	e Cou Cod	
							мо	DAY	YEAR						
							11		5 2024		(SEE INS	TRUCTI	ONS FOR	R CODES	5)
	Receipts and	мо	DAY	YEAR			мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	1	
Expenditures	Expenditures from: 11 26 2024 TO 12 31 20						1 2024								
A. Amount Bro	ought Forward Fror	n Last R	eport			\$		1	30,679.77						
B. Total Monetary Contributions And Receipts (From Schedule I)					dule I)	\$		1,500.00							
C. Total Funds Available (Sum Of Lines A and B)						\$		1	32,179.77						
D. Total Expen	ditures (From Sch	edule II	1)			\$			7,888.12						
E. Ending Cash	n Balance (Subtrac	t Line D	From Line	C)		\$		12	24,291.65	4					
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	chedul	le II)	\$			0.00	4					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	()		\$			0.00						
				AFF	IDAVI	T SE	CTION								
	s a Committee rep	-	-							-					
I swear (or affirm correct and compl) that this report, incl lete.	luding the	e attached sc	hedules	s filed on	paper	or by elect	ronic me	dium, are to	the best o	of my know	vledge	and be	lief , ti	rue
Sworn to and sub	scribed before me this day of	5	20						Signatur	e of Perso	on Submitt	ing Rej	oort		_
	Signatu	re				-				Prin	ited Name				-
My Commission E	xpires					_				Ema	il				_
	мо	D	AY	YR				Area	a Code	Daytin	ne Telepho	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee, C	andid	ate shall	sign hei	re.						
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	edge and beli	ef this	political	comm	ittee has n	ot violate	ed any provis	sions of th	e act of Ju	ine 3,1	937 (P	.L. 133	3,
Sworn to and subse	cribed before me this day of		20						S	Signature	of Candida	ite			-
						-				Printe	ed Name				-
My Commission Ex	Signature pires					-				Ema	il				-
	мо	D	AY	YR		-		Area C	ode	D	aytime Te	elephor	ne Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF GENE YAW	From:	<u>11/26/202</u>	2 <u>4</u> To:	<u>12/31/2024</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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	(2)	\$	0.00	
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	1,000.00
All Other Contributions (Part D)			\$	500.00
TOTAL for the Reporting	g Period	(3)	\$	1,500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g 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			\$	1,500.00

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 Candidat	e		Reporting Period					
			From	From: To:				
	DATE AMOUN					AMOUNT		
Full Name of Contributing Committee		мо	DAY	YEAR				
Mailing Address							\$	0.00
City State Zip Code (Plus 4)			•)					
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	0.00

Use this Part to it	emize all other 50.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s wi ortin	ith an ng per	aggreg iod.			rom
Name of Filing Committee or Candidate Reporting Period								
	From: To					Тс	o:	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address	_	_					\$	0.00
City	State	Zip Code (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	0.00

PAGE 5

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					
FRIENDS OF GENE YAW			From:	<u>11/2</u>	6/2024	То:	<u>12</u>	2/31/2024	
				DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR			
PECO PAC							\$	1,000.00	
Mailing Address				12	2	2024			
City	State	Zip Cod	e (Plus 4)	12	-	2021			
						PAGE TOTAL			
nter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.						\$	1,000.00		

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			Repo	orting Pe	riod			
FRIENDS OF GENE YAW			Fron	From:		<u>024</u> To	12/31/2024	
				DA	TE		AMOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$ 500.0	10
AL CLAPPS							φ 500.0	0
Mailing Address				12	13	2024		
City WILLIAMSPORT	State	Zip Code (Plus	; 4)	12	15			
	PA	17701						
Employer Name RETIRED				Occupat	ion	RETIRE	D	
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Sectio	on 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			Report	ing Perio	d				
			From:			To:			
				D	ATE			AMOUNT	
ull Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	•								
									AL
Enter Grand Lotal of Part E on Sched	Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 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 Perio	d	
FRIENDS OF GENE YAW	From:	<u>11/26/2024</u> то:	<u>12/31/2024</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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:			То:		
				DATE		AMOUNT		
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						\$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:						-		
Enter Grand Total of Part F on Sched Section 2.	iled Sum	mary Pag	e,		PAGE TOTA	<u>، ۱</u>		
						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate			Rej	porting I	Period		
			Fro	om:		То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address			-				\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor	•	·		Occupa	ation		•
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kin	d Contributions D	etaile	ed			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name	e of Filing Committee or Candidat	2		Reporti	ng Period					
FRIE	NDS OF GENE YAW			From	<u>11/2</u>	<u>5/2024</u>	То:	<u>12/31/2024</u>		
					DATE			AMOUNT		
To Wr	nom Paid			мо	DAY	YEAR				
DAILY	' REVIEW									
Mailin	g Address			12	3	2024	\$	115.00		
City	TOWANDA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		РА	18848	VETERA	N'S DAY A	D				
	nom Paid			мо	DAY	YEAR				
	E STRATEGIES							4 700 00		
Mailin	g Address	<u>.</u>		12	16	2024	\$	4,780.89		
City	HERSHEY	State	Zip Code (Plus 4)	Descrip	Description of Expenditure					
		РА	17033	FUNDRA						
	To Whom Paid IGNITE STRATEGIES			мо	DAY	YEAR				
	Mailing Address		12	16	2024	\$	136.68			
	-	1	1					100100		
City	HERSHEY	State	Zip Code (Plus 4)	Descrip						
		PA	17033	MILEAGE TO WILLIAMSPORT, PA						
	nom Paid			мо	DAY	YEAR				
				12	20	2024	\$	132.50		
Mailin	g Address	1	T	12	30	2024	₽	152.50		
City	MONTOURSVILLE	State	Zip Code (Plus 4)	-	tion of Exp					
		PA	17754	STORAG	GE OF CAM	PAIGN M	ATERIALS			
	nom Paid ERSHIP LYCOMING			мо	DAY	YEAR				
	g Address			12	30	2024	\$	300.00		
City		State	Zip Code (Plus 4)		tion of Exp					
City	WILIAMSPORT	PA	17701	SPONS		enunture				
	nom Paid		17701							
	GENE YAW			мо	DAY	YEAR				
	g Address			12	30	2024	\$	365.00		
City		State	Zip Code (Plus 4)		tion of Exp					
	MONTOURSVILLE		17754							
		PA	11//34	STAPIPS	STAMPS FOR CARDS					

To Whom Paid			мо	DAY	YEAR			
E. EUGENE YAW			MO		TEAR			
Mailing Address			12	30	2024	\$	1,765.45	
City MONTOURSVILLE	State	Zip Code (Plus 4)	Description of Expenditure					
PA 17754				CHRISTMAS CARDS, STAFF GIFTS				
To Whom Paid				DAY	YEAR			
E. EUGENE YAW			мо		TEAR			
Mailing Address			12	30	2024	\$	292.50	
City MONTOURSVILLE	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	17754	CENTER	FOR RUR	AL PA - JI		RPE	
							PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	7,888.02	