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 2021	0181			Repoi		CAN	ונט	DATE		COM	AITTEE	✓	LC	JDD I	151	
Name of Filing C	ommittee, Candid	ate or L	obbyist:		FOR-W	/ARD F	AC									•	
Street Address:	P.O. BOX 83						_										
City:	HARRISBURG						State:		PA			Zip Co	de: 1	7108	3		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 DA		Р	POST-	3.		AMENDN REPORT		Ye	S	No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D/ ELEC		Р	POST-	6.		TERMIN/ REPORT		Ye	s	No	\
report type)	ANNUAL REPORT	7.	Year 2025				NG MET					PAPER		V		ISKET	TE
Name of Office S	ought by Candida	te:	•		•		DATE	0	F ELEC	CTIO	N	District Number	Office Code		Party	Code	County Code
							МО		DAY	YE	AR		•	·			
								3	2	.5	2025		(SEE II	NSTRU	CTION	S FOR CO	DDES)
	Receipts and	МО	DAY	YEAR			МО		DAY	YE	AR	FC	R OFFI	CE U	SE C	NLY	
Expenditures	Trom:		1 7	20	025	ГО		3	1	.0	2025						
A. Amount Bro	ught Forward Fron	n Last R	eport			\$			2	200,4	38.12						
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$					0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			2	200,4	38.12						
D. Total Expend	ditures (From Sch	edule II	I)			\$				27,7	50.00						
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$			1	72,6	88.12						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	le II)	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)		\$					0.00			'			
				AFF	IDAV	IT SE	CTIO	N									
	a Committee rep	*	_								_		f my kno	owled	ge an	d belief	f . true
correct and comple	ete.					. pupu	J. 2, J.				,		,		.		
Sworn to and subs	cribed before me this day of		20			_				S	ignature	of Perso	n Submi	tting	Repo	rt	
	Signatu	re				_						Prin	ted Nam	ne			
My Commission Ex	xpires					_		•				Ema	il				
	МО	D.	AY	YR					Are	a Cod	e	Daytin	ne Telep	hone	Num	ber	_
	a report of a cand				•						_						
No 320) as amende		ny knowle	edge and beli	ief this	politica	I comm	ittee ha	s no	ot violat	ed an	y provis	ions of th	e act of .	June 3	3,193	7 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20								s	ignature (of Candid	date			
						_						Printe	ed Name				
My Commission Exp	Signature ires					_						Ema	il				-
	МО	D	AY	YR		_			Area (Code		D	aytime '	Telepi	none	Numbe	 r

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FOR-WARD PAC	From:	1/7/20	25 To :	3/10/2025
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	g 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)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	0.00
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			\$	0.00

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 Commit	tee or Candidate	R	eporting	Period			
		Fi	rom:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing	g Committee		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.

Name of Filing Commi	ttee or Candidate		Reporti	ng P	eriod			
			From:			To	o:	
					DATE			AMOUNT
Full Name of Contributor			м	0	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
					1	1	ı	

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:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	age, Sectio	n 3.			\$	(0.00

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 Candidate			Rep	orting Pe	riod			
			Fror	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	on 3.		:	\$	PAGE TOTAL 0.00

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:			To:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'						<u> </u>	
	- C		. .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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 Period		
FOR-WARD PAC	From:	<u>1/7/2025</u> To:	<u>3/10/2025</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Car	ndidate		Reportin	g Period				
			From:			To	:	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	ımary Pa	ge,		PAGE TOTAL	•
Section 2.						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

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

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	riod		
FOR-WARD PAC	From	<u>1/7/2025</u>	То:	3/10/2025

Mo								
Mo					DATE			AMOUNT
Mailing Address P.O. BOX 2487 2 7 2025 \$ 25,000.00	To Whom Paid			МО	DAY	YEAR		
City LANCASTER State Zip Code (Plus 4) Description of Expenditure CONTRIBUTION To Whom Paid Mo DAY YEAR PA 17608 PA PA PA PA PA PA PA P	FRIENDS OF JOSH PARSONS			1.10				
PA	Mailing Address P.O. BOX 248	37		2	7	2025	\$	25,000.00
No Day YEAR	City LANCASTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
Mo		PA	17608	CONTRI	BUTION			
City NORTH HUNTINGDON State PA 15642 Zip Code (Plus 4) Description of Expenditure CONTRIBUTION To Whom Paid FRIENDS OF DOUG WEIMER Mailing Address 22 DUNHAM DR City GREENSBURG State Zip Code (Plus 4) Description of Expenditure CONTRIBUTION To Whom Paid FRIENDS OF JON WIAN To Whom Paid FRIENDS OF JON WIAN Mo DAY YEAR FRIENDS OF JON WIAN Mo DAY YEAR FRIENDS OF JON WIAN Mailing Address 109 KENNETH DR State Zip Code (Plus 4) Description of Expenditure CONTRIBUTION To Whom Paid FRIENDS OF JON WIAN Mailing Address 109 KENNETH DR State Zip Code (Plus 4) Description of Expenditure CONTRIBUTION Friends Address 109 KENNETH DR PA 15626 PA 15626 PAGE TOTAL	To Whom Paid FRIENDS OF ANTONIO LIO			мо	DAY	YEAR		
TO Whom Paid FRIENDS OF DOUG WEIMER Mailing Address 22 DUNHAM DR City GREENSBURG State Zip Code (Plus 4) Description of Expenditure PA 15601 CONTRIBUTION TO Whom Paid FRIENDS OF JON WIAN Mailing Address 109 KENNETH DR State Zip Code (Plus 4) Description of Expenditure CONTRIBUTION To Whom Paid FRIENDS OF JON WIAN Mailing Address 109 KENNETH DR State Zip Code (Plus 4) Description of Expenditure CONTRIBUTION PAGE TOTAL PAGE TOTAL	Mailing Address 2080 NORTH	VIEW DR		2	10	2025	\$	250.00
TO Whom Paid FRIENDS OF DOUG WEIMER Mailing Address 22 DUNHAM DR State Zip Code (Plus 4) Description of Expenditure PA 15601 TO Whom Paid FRIENDS OF JON WIAN Mailing Address 109 KENNETH DR State Zip Code (Plus 4) Description of Expenditure CONTRIBUTION To Whom Paid FRIENDS OF JON WIAN Mailing Address 109 KENNETH DR State Zip Code (Plus 4) Description of Expenditure CONTRIBUTION To Whom Paid FRIENDS OF JON WIAN Mailing Address 109 KENNETH DR State Zip Code (Plus 4) Description of Expenditure PA 15626 CONTRIBUTION PAGE TOTAL PAGE TOTAL	City NORTH HUNTINGDON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
FRIENDS OF DOUG WEIMER Mailing Address 22 DUNHAM DR State Zip Code (Plus 4) Description of Expenditure CONTRIBUTION To Whom Paid FRIENDS OF JON WIAN Mailing Address 109 KENNETH DR State Zip Code (Plus 4) Description of Expenditure CONTRIBUTION To Whom Paid FRIENDS OF JON WIAN Mailing Address 109 KENNETH DR State Zip Code (Plus 4) Description of Expenditure CONTRIBUTION City DELMONT State Zip Code (Plus 4) Description of Expenditure CONTRIBUTION PAGE TOTAL PAGE TOTAL		PA	15642	CONTRI	BUTION			
Mailing Address 22 DUNHAM DR 2 12 2025 \$ 500.00 City GREENSBURG State PA 15601 CONTRIBUTION To Whom Paid FRIENDS OF JON WIAN Mailing Address 109 KENNETH DR State Zip Code (Plus 4) Description of Expenditure 2 2 2 2 2025 \$ 500.00 City DELMONT State Zip Code (Plus 4) Description of Expenditure PA 15626 CONTRIBUTION PAGE TOTAL PAGE TOTAL	To Whom Paid			мо	DAY	YEAR		
To Whom Paid FRIENDS OF JON WIAN Mailing Address 109 KENNETH DR State Zip Code (Plus 4) Description of Expenditure PA 15626 Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. CONTRIBUTION PAGE TOTAL		DR		2	12	2025	\$	500.00
To Whom Paid FRIENDS OF JON WIAN Mailing Address 109 KENNETH DR State Zip Code (Plus 4) Description of Expenditure PA 15626 PAGE TOTAL PAGE TOTAL	City GREENSBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u>I</u>	
FRIENDS OF JON WIAN Mailing Address 109 KENNETH DR State Zip Code (Plus 4) Description of Expenditure PA 15626 PAGE TOTAL PAGE TOTAL		PA	15601	CONTRI	BUTION			
City DELMONT State Zip Code (Plus 4) Description of Expenditure CONTRIBUTION PA 15626 CONTRIBUTION PAGE TOTAL Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	To Whom Paid FRIENDS OF JON WIAN			мо	DAY	YEAR		
PA 15626 CONTRIBUTION PAGE TOTAL Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	Mailing Address 109 KENNETH	H DR		3	4	2025	\$	2,000.00
PAGE TOTAL Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	City DELMONT	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.		PA	15626	CONTRI	BUTION			
			·					PAGE TOTAL
\$ 27,750.00	Enter Grand Total of Expendit	tures on Page 1, Re	port Cover Page, Item D).			\$	27,750.00