

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 113												
City: KEMBLESVILLE						State: PA		Zip Code: 19347-0113				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	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.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2010	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
REPRESENTATIVE IN THE GENERAL ASSEMBLY						MO	DAY	YEAR	STH	REP	15	
						11	2	2010	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		1	1	2010		5	3	2010				
A. Amount Brought Forward From Last Report						\$		311.79				
B. Total Monetary Contributions And Receipts (From Schedule I)						\$		2,300.00				
C. Total Funds Available (Sum Of Lines A and B)						\$		2,611.79				
D. Total Expenditures (From Schedule III)						\$		1,475.00				
E. Ending Cash Balance (Subtract Line D From Line C)						\$		1,136.79				
F. Value Of In-Kind Contributions Received (From Schedule II)						\$		3,482.78				
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>1/1/2010</u> To: <u>5/3/2010</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting 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)	\$ 300.00
TOTAL for the Reporting Period (2)	\$ 300.00

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)	\$ 1,000.00
TOTAL for the Reporting Period (3)	\$ 2,000.00

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.)	\$ 2,300.00
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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 Friends of John Lawrence	Reporting Period From: <u>1/1/2010</u> To: <u>5/3/2010</u>
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DATE					AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Robin L. Marcello				4	23	2010	
Mailing Address 127 Elkview Road							
City West Grove	State PA	Zip Code (Plus 4) 19390					
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Joanne Adda & John S. Lawrence				4	23	2010	
Mailing Address P.O. Box 41							
City Kemblesville	State PA	Zip Code (Plus 4) 19347					
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Mike & Patty Mooney				4	23	2010	
Mailing Address 10 Holly Drive							
City West Grove	State PA	Zip Code (Plus 4) 19390					

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

PAGE TOTAL
\$ 300.00

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>1/1/2010</u> To: <u>5/3/2010</u>
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				DATE			AMOUNT		
Full Name of Contributing Committee					MO	DAY	YEAR	\$	1,000.00
Friends of Joe Pitts									
Mailing Address					4	23	2010		
P.O. Box 775									
City	Unionville		State	PA	Zip Code (Plus 4)	19375			

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

PAGE TOTAL \$ 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 Friends of John Lawrence	Reporting Period From: <u>1/1/2010</u> To: <u>5/3/2010</u>
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				DATE		AMOUNT	
Full Name of Contributor Michael D. & Dolores J. Zander				MO 4	DAY 23	YEAR 2010	\$ 500.00
Mailing Address 1658 Bush Road							
City Cochranville	State PA	Zip Code (Plus 4) 19330					
Employer Name Unknown				Occupation Unknown			
Employer Mailing Address/Principal Place of Business			City Unknown		State PA		Zip Code (Plus 4)
Full Name of Contributor Amanda K. Konyk				MO 1	DAY 28	YEAR 2010	\$ 500.00
Mailing Address 12 Wilderness Way							
City Chadds Ford	State PA	Zip Code (Plus 4) 19317					
Employer Name Self				Occupation Attorney			
Employer Mailing Address/Principal Place of Business			City Media		State PA		Zip Code (Plus 4) 19063

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

PAGE TOTAL
\$ 1,000.00

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>1/1/2010</u> To: <u>5/3/2010</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)	\$ 602.55
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 2,880.23
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.)			\$ 3,482.78

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period
Friends of John Lawrence	From: <u>1/1/2010</u> To: <u>5/3/2010</u>

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 110.80
Friends of Joe Pitts				4	10	2010	
Mailing Address P.O. Box 775							
City Unionville	State PA	Zip Code (Plus 4) 10375					
Description of Contribution: Refreshments/coffee							
Full Name of Contributor				MO	DAY	YEAR	\$ 21.74
John Lawrence				5	2	2010	
Mailing Address P.O. Box 113							
City Kemblesville	State PA	Zip Code (Plus 4) 19347					
Description of Contribution: Website Registration Fee							
Full Name of Contributor				MO	DAY	YEAR	\$ 29.99
John Lawrence				4	23	2010	
Mailing Address P.O. Box 113							
City Kemblesville	State PA	Zip Code (Plus 4) 19347					
Description of Contribution: Office Supplies / Office Depot							
Full Name of Contributor				MO	DAY	YEAR	\$ 218.92
John Lawrence				4	18	2010	
Mailing Address P.O. Box 113							
City Kemblesville	State PA	Zip Code (Plus 4) 19347					
Description of Contribution: Office Supplies / Office Depot							
Full Name of Contributor				MO	DAY	YEAR	\$ 120.00
Friends of Joe Pitts				3	8	2010	
Mailing Address P.O. Box 775							
City Unionville	State PA	Zip Code (Plus 4) 19375					
Description of Contribution: Notary work							
Full Name of Contributor				MO	DAY	YEAR	\$ 101.10
John Lawrence				3	8	2010	
Mailing Address P.O. Box 113							
City Kemblesville	State PA	Zip Code (Plus 4) 19347					
Description of Contribution: USPS - money order							

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL

\$

602.55

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

Name of Filing Committee or Candidate	Reporting Period
Friends of John Lawrence	From: <u>1/1/2010</u> To: <u>5/3/2010</u>

					DATE		AMOUNT	
Full Name of Contributor John Lawrence					MO	DAY	YEAR	\$ 1,408.00
Mailing Address P.O. Box 113					4	8	2010	
City Kemblesville	State PA	Zip Code(Plus 4) 19347						
Employer of Contributor JP Morgan Chase Bank					Occupation		Client Service Associate	
Employer Mailing Address/Principal Place of Business 500 Stanton Christiana Road			City Newark	State DE	Zip Code(Plus 4) 19713		Description of Contribution USPS - postage	
Full Name of Contributor John Lawrence					MO	DAY	YEAR	\$ 681.97
Mailing Address P.O. Box 113					4	20	2010	
City Kemblesville	State PA	Zip Code(Plus 4) 19347						
Employer of Contributor JP Morgan Chase Bank					Occupation		Client Service Associate	
Employer Mailing Address/Principal Place of Business 500 Stanton Christiana Road			City Newark	State DE	Zip Code(Plus 4) 19713		Description of Contribution Flyers - Sir Speedy	
Full Name of Contributor HRCC					MO	DAY	YEAR	\$ 790.26
Mailing Address PO Box 11787					4	12	2010	
City Harrisburg	State PA	Zip Code(Plus 4) 17108						
Employer of Contributor					Occupation			
Employer Mailing Address/Principal Place of Business			City	State PA	Zip Code(Plus 4)		Description of Contribution Data & Door-To-Door Materials	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.								PAGE TOTAL 2,880.23

