# **Campaign Finance Report**

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

Filer Identificat	ian	20007	220			Repo	rt	CA	NDI	DATE		сом	MITTEE		LOBI	BYIST			
Number :	ion	20083	329			Filed								Y					
Name of Filing	Committee, C	andida	ate or L	obbyist:		Friend	s of J	ohn La	awre	nce									
Street Address:	PO BOX	113																	
City:	KEMBLE	SVILLE	Ē					State: PA					Zip Co	<b>Zip Code:</b> 19347-0113					
TYPE OF REPORT	6TH TUESDA		1.	2ND FRI PRIMARY	DAY PRE	- 2. <b>X</b>		DAY MARY	F	POST-	3.		AMENDN REPORT		Yes	Ν	0	$\checkmark$	
(place X to the right of	6TH TUESDA PRE-ELECTIO		4.					0 DAY POST- 6. LECTION				TERMIN/ REPORT	Yes	N	0	$\checkmark$			
report type)	ANNUAL RE	PORT	7.	<b>Year</b> 20	10			ING M ) CHE					PAPER		$\checkmark$	DISK	ETTE		
Name of Office	⊥ Sought by Ca	ndidat	e:					DA	ΓΕ Ο	FELE	СТІС	N	District Number	Office Code	Par	ty Cod	e Cou Cod		
DEDDECENTAT								мо		DAY	YI	EAR		STH	REP	,	15		
REPRESENTATIVE IN THE GENERAL ASSEMBLY									11		2	2010	<b> </b>	(SEE INS	TRUCTI	ONS FOR	CODES	5)	
Summary of	Receipts a	nd	мо	DAY	YEAF	2		мо		DAY	Y	EAR	FC	R OFFIC	E USE	ONLY	,		
Expenditures	s from:			1	1 2	010	то		5		3	2010							
A. Amount Bro	ught Forwar	d From	Last R	eport	-		:	\$		-		311.79							
B. Total Monet	ary Contribu	tions A	nd Rec	eipts (Fr	om Sche	dule I)	:	\$			2,3	300.00							
C. Total Funds	Available (S	um Of	Lines A	and B)			:	\$			2,6	511.79							
D. Total Expen	D. Total Expenditures (From Schedule III) \$ 1,475.00																		
E. Ending Cash	n Balance (Su	btract	Line D	From Lin	e C)			\$			1,1	.36.79							
F. Value Of In-	Kind Contrib	utions	Receiv	ed (From	Schedu	le II)		\$			3,4	82.78	1						
G. Unpaid Deb	ts And Obliga	ations	(From §	Schedule	IV)			\$				0.00							
					AFF	IDAV	IT S	ECTI	ON										
PART I - If this i	s a Committe	e repo	ort, trea	surer sig	n here.	If this i	s a Ca	andida	ite re	eport, c	andi	date sig	gn here.						
I swear (or affirm correct and compl		ort, inclu	uding the	e attached	schedule	s filed or	ı pape	r or by	elect	ronic m	edium	, are to	the best o	f my knov	vledge	and be	lief , tı	rue <sub>.</sub>	
Sworn to and sub	scribed before i day of	me this		20							5	Signaturo	e of Perso	n Submitt	ing Rep	oort		-	
		ignatur	° <b>A</b>				_						Prin	ted Name				-	
My Commission E		<b>J</b>	-										Ema	il				-	
	мо		D	AY	YR					Are	ea Coo	le	Daytin	ie Teleph	one Nu	mber		_	
Part II- If this is	a report of	a cand	idate's	authoriz	ed Comr	nittee,	Candi	idate s	hall	sign he	ere.								
I swear (or affirm) No 320) as amend		est of m	y knowl	edge and b	elief this	s politica	l com	mittee	has n	ot viola	ted ar	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P	L. 133	3,	
Sworn to and subse	cribed before m day of	e this		20								S	ignature	of Candida	ite			_	
													Printe	ed Name				—	
My Commission Ex	-	ature							Email						_				
		10	n	AY	YR	2	_			Area	Code		D	aytime Te	elephon	e Num	ber	_	
			-	-										-	-				

## 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 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 300.00 All Other Contributions (Part B) \$ **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 1,000.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 2,000.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 2,300.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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

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 Candida	te		Rep	oorting Po	eriod				
Friends of John Lawrence			Fro	m:	<u>1/1/2</u>	<u>2010</u> То	):	<u>5/3/2010</u>	
					DATE			AMOUNT	
Full Name of Contributor Mike & Patty Mooney				мо	DAY	YEAR			
Mailing Address 10 Holly Drive		•					\$	100.00	
City West Grove	<b>State</b> PA	<b>Zip Code (Plus 4</b> 19390	)	4	23	2010			
Full Name of Contributor Joanne Adda & John S. Lawrence				мо	DAY	YEAR			
Mailing Address P.O. Box 41		1					\$	100.00	
City Kemblesville	<b>State</b> PA	<b>Zip Code (Plus 4</b> 19347	)	4	23	2010			
Full Name of Contributor Robin L. Marcello		мо	DAY	YEAR					
Mailing Address 127 Elkview Road					\$	100.00			
City West Grove	<b>State</b> PA	<b>Zip Code (Plus 4</b> 19390	)	4	23	2010			

PAGE TOTAL

\$

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

300.00

### 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 John Lawrence				<u>1/1/2010</u> <b>To:</b>				<u>5/3/2010</u>	
				DA	TE		A	MOUNT	
Full Name of Contributing Committee Friends of Joe Pitts				мо	DAY	YEAR	\$	1,000.00	
Mailing Address P.O. Box 775				4	23	2010		_,	
<b>City</b> Unionville	<b>State</b> PA	<b>Zip Cod</b> 19375	e (Plus 4)						
Enter Grand Total of Part C on Schee	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.				PAGE TOTAL	
	· · , · · · · · ·		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					orting Pe	riod				
Friends of John Lawrence				Fron	n:	<u>1/1/2</u>	2010 <b>To:</b>		: <u>5/3/2010</u>	
					D/	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR		<b>\$</b> 500.00	
Michael D. & Dolores J. Zander									<b>\$</b> 500.00	
Mailing Address 1658 Bush Road					4	23	201	0		
City Cochranville	State	Zip	o Code (Plus	4)						
	РА	19	330							
Employer Name Unknown					Occupat	ion	Unkno	wn		
Employer Mailing Address/Principal Plac	e of Business		City			State		z	ip Code (Plus 4)	
			Unknown			PA				
Full Name of Contributor					мо	DAY	YEAR			
Amanda K. Konyk					MO	DAT	TEAR		<b>\$</b> 500.00	
Mailing Address 12 Wilderness Way					1	28	201	_		
City Chadds Ford	State	Zip	o Code (Plus	4)	1	20	201	~		
	РА	19	317							
Employer Name Self					Occupat	ion	Attorne	∋у		
Employer Mailing Address/Principal Plac	e of Business		City			State		z	ip Code (Plus 4)	
			Media			PA		1	.9063	
						-	Г		PAGE TOTAL	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	umn	nary Page,	Sectio	on 3.					
								\$	1,000.00	

I

## 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 Can	Name of Filing Committee or Candidate			ing Perio	od		
			From:			То:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (	Plus 4)				
Receipt Description							
			<b>.</b>				PAGE TOTAL
Enter Grand Total of Part E on S	schedule I, Detailed	i 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	<b>Reporting Period</b>		
Friends of John Lawrence	From:	<u>1/1/2010</u> <b>To:</b>	<u>5/3/2010</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)	\$	602.55
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	2,880.23
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		\$	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	g Period						
Friends of John Lawrence			From:	-	<u>L/1/2010</u>	To: <u>5/3/201(</u>		
				DATE			AMOUNT	
Full Name of Contributor				DAY	YEAR			
Friends of Joe Pitts			мо	DAY	TEAR	\$	110.80	
Mailing Address P.O. Box 775		_	4	10	2010	1 *	110.80	
City Unionville	State	Zip Code (Plus 4)						
	PA	10375						
Description of Contribution: Refreshm	ents/coffee		•					
Full Name of Contributor								
John Lawrence			мо	DAY	YEAR	<u>.</u>	21.74	
Mailing Address P.O. Box 113			5	2	2010	\$	21.74	
City Kemblesville	State	Zip Code (Plus 4)		_				
	РА	19347						
Description of Contribution: Website F	Registration Fee	1			-			
Full Name of Contributor			NO	DAY	VEAD			
John Lawrence			мо	DAY	YEAR	\$	29.99	
Mailing Address P.O. Box 113			4	23	2010	<b>, ,</b>	29.99	
City Kemblesville	State	Zip Code (Plus 4)						
	РА	19347						
Description of Contribution: Office Su	pplies / Office Depo	i it						
Full Name of Contributor								
John Lawrence			мо	DAY	YEAR		218.92	
Mailing Address P.O. Box 113			4	18	2010	\$	218.92	
City Kemblesville	State	Zip Code (Plus 4)						
	PA	19347						
Description of Contribution: Office Su	pplies / Office Depo	i t	*	•				
Full Name of Contributor								
Friends of Joe Pitts			мо	DAY	YEAR		120.00	
Mailing Address P.O. Box 775			3	8	2010	\$	120.00	
City Unionville	State	Zip Code (Plus 4)						
	РА	19375						
Description of Contribution: Notary w	ork	1						
Full Name of Contributor				DAY	VEAD			
John Lawrence			мо	DAY	YEAR	\$	101.10	
Mailing Address P.O. Box 113			3	8	2010	ļ T	101.10	
City Kemblesville	State	Zip Code (Plus 4)						
	PA	19347						
Description of Contribution: USPS - m	oney order							

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.	PAGE TOTAL
	\$ 602.55

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

Name of Filing Committee or Candidate				Rep	port	ing P	eriod			
Friends of John Lawrence				Fro	m:		<u>1/1/201</u>	<u>.0</u> <b>To:</b> <u>5/3/2010</u>		
							DATE			AMOUNT
Full Name of Contributor John Lawrence					м	D	DAY	YEAR		
Mailing Address P.O. Box 113						4	8	2010	\$	1,408.00
City Kemblesville	State	State Zip Code(Plus 4)								
	PA	A 19347								
Employer of Contributor JP Morgan Chase Bank					Oc	cupa	<b>tion</b> Cl	ient Service Associate		
Employer Mailing Address/Principal Plac	e of Business	Ci	ty	State	e	Zip (	Code(Plus 4)	Descrip	ption of	Contribution
500 Stanton Christiana Road		Ne	ewark	DE	197		13	USPS -	- postage	
Full Name of Contributor John Lawrence					м	D	DAY	YEAR		
Mailing Address P.O. Box 113						4	20	2010	\$	681.97
City Kemblesville	<b>State</b> PA		<b>Zip Code(Plus 4)</b> 19347							
Employer of Contributor JP Morgan	L Chase Bank		ļ		Occupation (			Client Service Associate		
Employer Mailing Address/Principal Plac	e of Business	Ci	ty	State	ite Zip		Code(Plus 4)	Description of Contribution		Contribution
500 Stanton Christiana Road		Ne	ewark	DE	1		19713		- Sir Sp	eedy
Full Name of Contributor HRCC		-		_	м	D	DAY	YEAR		
Mailing Address PO Box 11787						4	12	2010	\$	790.26
City Harrisburg	State		Zip Code(Plus 4)		1					
	PA		17108							
Employer of Contributor			•		Oc	cupa	tion			
Employer Mailing Address/Principal Place of Business City				State	ate Zip		Code(Plus 4)	Descrip	ption of	Contribution
								Data & Door-To-Door Materials		o-Door
Enter Grand Total of Part G on Schedule II, In-Kind Contributions I					d					PAGE TOTAL
Summary Page, Section 3.										2,880.23

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
Friends of John Lawrence	From	<u>1/</u>	То:	<u>5/3/2010</u>			
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
Hallowell & Branstetter							
Mailing Address 3031 Logan Street			4	23	2010	\$	1,475.00
City Camp Hill	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17011	Consult	ing fees			
			_				PAGE TOTAL
Enter Grand Total of Expenditures	on Page 1, Repor	rt Cover Page, Item I	<b>D.</b>			\$	1,475.00