

# Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	82-5154798	Report Filed By (Mark X)	<input type="checkbox"/>	Candidate	<input checked="" type="checkbox"/>	Committee	<input type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		Friends of Craig Lehman							
Street Address		584 Rosehill Drive							
City	Narvon	State	PA	Zip Code	175552018				

Type of Report (Place x under report type)

1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary	4- 6 <sup>th</sup> Tuesday Pre- Election	5- 2 <sup>nd</sup> Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)		11/04/19	Year	2019	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	10/22/19	11/25/19	<div style="border: 1px solid black; padding: 5px; transform: rotate(90deg); transform-origin: center;">                     RECEIVED                      2019 DEC -3 PM 3:35                      COMMONWEALTH OF PENNSYLVANIA                 </div>
A. Amount Brought Forward From Last Report	\$	25866.30	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	36.00	
C. Total Funds Available (Sum of Lines A and B)	\$	25902.30	
D. Total Expenditures (From Schedule III)	\$	311.00	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	25591.3	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0.00	
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 on paper, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 3 day of Dec 20 19

*[Signature]*  
Signature of Person Submitting report

COMMONWEALTH OF PENNSYLVANIA  
NOTARIAL SEAL  
MARY M. LATSHAW, Notary Public  
City of Lancaster, Lancaster County  
My Commission Expires July 2, 2020

MO. DAY YR. Area Code

Jerry Cain  
Printed Name

768-3706  
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 3 day of Dec 20 19

*[Signature]*  
Signature of Candidate

COMMONWEALTH OF PENNSYLVANIA  
NOTARIAL SEAL  
MARY M. LATSHAW, Notary Public  
City of Lancaster, Lancaster County  
My Commission Expires July 2, 2020

MO. DAY YR. Area Code

Craig E. Lehman  
Printed Name

394-4456  
Daytime Telephone Number

SCHEDULE I  
**Contributions and Receipts**  
 Detailed Summary Page

<b>Filer Identification Number</b>	82-5154798
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<b>1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor</b>		
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Total for the reporting period	(1)	\$	0.00
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<b>2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)</b>		
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Contributions Received from Political Committees (Part A)	\$		0.00
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All Other Contributions (Part B)	\$		0.00
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Total for the reporting period	(2)	\$	0.00
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<b>3. Contributions Over \$250.00 (From Part C and Part D)</b>		
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Contributions Received from Political Committees (Part C)	\$		0.00
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All Other Contributions (Part D)	\$		0.00
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Total for the reporting period	(3)	\$	0.00
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<b>4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)</b>		
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Total for the reporting period	(4)	\$	36.00
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Total Monetary Contributions and Receipts during this reporting period <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i>	\$		0.00
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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.

Filer Identification Number	82-5154798
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Full Name	Ephrata Democratic Committee				
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House #	30	Street Address	Kings Court		
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City	Ephrata	State	PA	Zip Code	17522	Date (MM/DD/YYYY)	11/20/2019	\$	36.00
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Receipt Description	Check # 1047 Returned								
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Full Name									
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House #		Street Address							
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City		State		Zip Code		Date (MM/DD/YYYY)		\$	
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Receipt Description									
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Full Name									
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House #		Street Address							
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City		State		Zip Code		Date (MM/DD/YYYY)		\$	
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Receipt Description									
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Full Name									
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House #		Street Address							
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City		State		Zip Code		Date (MM/DD/YYYY)		\$	
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Receipt Description									
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Full Name									
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House #		Street Address							
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City		State		Zip Code		Date (MM/DD/YYYY)		\$	
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Receipt Description									
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Full Name									
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House #		Street Address							
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City		State		Zip Code		Date (MM/DD/YYYY)		\$	
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Receipt Description									
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**SCHEDULE III  
Statement of Expenditures**

Filer Identification Number: 82-5154798

To Whom Paid	<u>Hobie for DA</u>			Date (MM/DD/YYYY)	<u>10/22/2019</u>	\$	<u>150.00</u>
House #	Street Address <u>PO Box 1802</u>			Description of Expenditure			
City	<u>Lancaster</u>	State	<u>PA</u>	Zip Code	<u>17608</u>	<u>Contribution</u>	
To Whom Paid	<u>Lancaster Farmers Trust</u>			Date (MM/DD/YYYY)	<u>10/30/2019</u>	\$	<u>125.00</u>
House #	<u>125</u>	Street Address <u>Lancaster Ave.</u>			Description of Expenditure		
City	<u>Strasburg</u>	State	<u>PA</u>	Zip Code	<u>17579</u>	<u>Contribution</u>	
To Whom Paid	<u>Ephrata Democratic Committee</u>			Date (MM/DD/YYYY)	<u>11/20/2019</u>	\$	<u>36.00</u>
House #	<u>30</u>	Street Address <u>Kings Court</u>			Description of Expenditure		
City	<u>Ephrata</u>	State	<u>PA</u>	Zip Code	<u>17522</u>	<u>Red, White, Blue BBQ</u>	
To Whom Paid				Date (MM/DD/YYYY)		\$	
House #	Street Address			Description of Expenditure			
City		State		Zip Code			
To Whom Paid				Date (MM/DD/YYYY)		\$	
House #	Street Address			Description of Expenditure			
City		State		Zip Code			
To Whom Paid				Date (MM/DD/YYYY)		\$	
House #	Street Address			Description of Expenditure			
City		State		Zip Code			
To Whom Paid				Date (MM/DD/YYYY)		\$	
House #	Street Address			Description of Expenditure			
City		State		Zip Code			