

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 :		2008205		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FARRY, FRANK FRIENDS OF												
Street Address: PO BOX 231												
City: LANGHORNE						State: PA		Zip Code: 19047-0221				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2013	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
						MO	DAY	YEAR	-1		REP	09
						11	5	2013	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		5	7	2013		6	10	2013				
A. Amount Brought Forward From Last Report						\$ 62,192.17						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 1,000.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 63,192.17						
D. Total Expenditures (From Schedule III)						\$ 293.78						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 62,898.39						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 600.00						
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 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
FARRY, FRANK FRIENDS OF	From: <u>5/7/2013</u> To: <u>6/10/2013</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)	\$ 0.00
TOTAL for the Reporting 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)	\$ 1,000.00
TOTAL for the Reporting Period (3)	\$ 1,000.00

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.)	\$ 1,000.00
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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	Reporting Period
	From: To:
<div style="display: flex; justify-content: space-between;"> DATE AMOUNT </div>	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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

PAGE TOTAL
\$ 0.00

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	Reporting Period	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 0.00

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 FARRY, FRANK FRIENDS OF	Reporting Period From: <u>5/7/2013</u> To: <u>6/10/2013</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Russell S. Dunleavy, III							
Mailing Address 5068 Ryan Road				6	3	2013	\$ 1,000.00
City Pipersville	State PA	Zip Code (Plus 4) 18947					
Employer Name Gilmore & Associates				Occupation Civil Engineer			
Employer Mailing Address/Principal Place of Business 65 East Butler Avenue			City New Britain		State PA	Zip Code (Plus 4) 18901	

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
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

			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	
FARRY, FRANK FRIENDS OF		From: <u>5/7/2013</u> To: <u>6/10/2013</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)		\$	0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	600.00
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.)		\$	600.00

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

Name of Filing Committee or Candidate	Reporting Period From: To:
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate FARRY, FRANK FRIENDS OF	Reporting Period From: <u>5/7/2013</u> To: <u>6/10/2013</u>
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					DATE		AMOUNT	
Full Name of Contributor Four Lanes End					MO	DAY	YEAR	\$ 600.00
Mailing Address 106 Maple Avenue					6	1	2013	
City Langhorne	State PA		Zip Code(Plus 4) 19047					
Employer of Contributor n/a					Occupation n/a			
Employer Mailing Address/Principal Place of Business n/a			City n/a	State PA	Zip Code(Plus 4) 19047		Description of Contribution rent	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.								PAGE TOTAL 600.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FARRY, FRANK FRIENDS OF	From <u>5/7/2013</u> To: <u>6/10/2013</u>

DATE				AMOUNT		
To Whom Paid The Temperance House			MO	DAY	YEAR	\$ 100.00
Mailing Address 5 South State Street			5	15	2013	
City Newtown	State PA	Zip Code (Plus 4) 18940	Description of Expenditure dining			
To Whom Paid Langhorne Hotel			MO	DAY	YEAR	\$ 50.75
Mailing Address 100 West Maple Avenue			5	15	2013	
City Langhorne	State PA	Zip Code (Plus 4) 19047	Description of Expenditure dining			
To Whom Paid Carmellas Trattoria			MO	DAY	YEAR	\$ 35.50
Mailing Address 17 North 2nd Street			5	15	2013	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure dining			
To Whom Paid OfficeMax			MO	DAY	YEAR	\$ 47.68
Mailing Address 1045 Bustleton Pike			5	15	2013	
City Feasterville	State PA	Zip Code (Plus 4) 19047	Description of Expenditure office supplies			
To Whom Paid Federal Express			MO	DAY	YEAR	\$ 21.34
Mailing Address 3610 Hacks Cross Road			5	15	2013	
City Memphis	State TN	Zip Code (Plus 4) 38116	Description of Expenditure mailing			

To Whom Paid American Express			MO	DAY	YEAR	
Mailing Address Po Box 1270			5	15	2013	
City Newark	State NJ	Zip Code (Plus 4) 07101	Description of Expenditure fees			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 293.78

