

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 : 2004233		Report Filed By :		CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST				
Name of Filing Committee, Candidate or Lobbyist: Fraternal Order of Police Lodge 5										
Street Address: 11630 Caroline Road										
City: Philadelphia			State: PA		Zip Code: 19154					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	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	51			
				11	5	2013	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		6	11	2013	TO	9	16	2013		
A. Amount Brought Forward From Last Report				\$		9,673.57				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		1,180.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		10,853.57				
D. Total Expenditures (From Schedule III)				\$		4,550.00				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		6,303.57				
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 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

My Commission Expires _____

MO DAY YR

Signature of Person Submitting Report

Printed Name

Email

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

My Commission Expires _____

MO DAY YR

Signature of Candidate

Printed Name

Email

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
Fraternal Order of Police Lodge 5	From: <u>6/11/2013</u> To: <u>9/16/2013</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 180.00

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)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 0.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 1,000.00

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.)	\$ 1,180.00
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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:
DATE AMOUNT	

Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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 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	Reporting Period	
	From:	To:

			DATE	AMOUNT
Full Name of Contributor	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	
Mailing Address				\$ 0.00
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	Reporting Period
	From: To:

	DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business	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 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 Fraternal Order of Police Lodge 5	Reporting Period From: <u>6/11/2013</u> To: <u>9/16/2013</u>
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				DATE	AMOUNT	
Full Name			MO	DAY	YEAR	
Citizens for Boyle			7	8	2013	\$ 1,000.00
Mailing Address 15040 Kelvin Ave						
City Philadelphia	State PA	Zip Code (Plus 4) 19116				
Receipt Description Void check 1117						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 1,000.00

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 Fraternal Order of Police Lodge 5	Reporting Period From: <u>6/11/2013</u> To: <u>9/16/2013</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)	\$ 0.00
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.)	\$ 0.00

**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: _____

	DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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				Reporting Period			
				From:		To:	
				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code(Plus 4)	Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL	
						0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Fraternal Order of Police Lodge 5	From <u>6/11/2013</u> To: <u>9/16/2013</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
Friends of Farnese	6	11	2013	\$ 1,000.00
Mailing Address PO Box 22596				
City Philadelphia	State PA	Zip Code (Plus 4) 19110	Description of Expenditure Municipal/local candidate	
To Whom Paid Citizens for Jewell Williams	6	18	2013	\$ 100.00
Mailing Address PO Box 22341				
City Philadelphia	State PA	Zip Code (Plus 4) 19110	Description of Expenditure Municipal/local candidate	
To Whom Paid Friends of Leanna Washington	6	21	2013	\$ 100.00
Mailing Address 33 S 18th Street				
City Philadelphia	State PA	Zip Code (Plus 4) 19103	Description of Expenditure Municipal/local candidate	
To Whom Paid Friends of Bobby 11	6	27	2013	\$ 1,000.00
Mailing Address 1701 Spring Garden				
City Philadelphia	State PA	Zip Code (Plus 4) 19130	Description of Expenditure Municipal/local candidate	
To Whom Paid Democratic County Executive Committee	7	3	2013	\$ 350.00
Mailing Address 219 Spring Garden Street				
City Philadelphia	State PA	Zip Code (Plus 4) 19123	Description of Expenditure Contribution to other PAC	

To Whom Paid Friends of Sheriff Donnelly			MO	DAY	YEAR	
Mailing Address 1835 Lafayette Drive			7	11	2013	
City Southampton	State PA	Zip Code (Plus 4) 18966	Description of Expenditure Municipal/local candidate			
To Whom Paid Squilla for Council			MO	DAY	YEAR	
Mailing Address P.O. Box 37332			8	6	2013	
City Philadelphia	State PA	Zip Code (Plus 4) 19148	Description of Expenditure Municipal/local candidate			
To Whom Paid Friends of Darrell Clark			MO	DAY	YEAR	
Mailing Address PO Box 60093			8	8	2013	
City Philadelphia	State PA	Zip Code (Plus 4) 19102	Description of Expenditure Municipal/local candidate			
To Whom Paid Committee to Re-Elect John Sabatina			MO	DAY	YEAR	
Mailing Address 8100 Castor Ave			8	9	2013	
City Philadelphia	State PA	Zip Code (Plus 4) 19152	Description of Expenditure Municipal/local candidate			
To Whom Paid Friends of Tamika Lane			MO	DAY	YEAR	
Mailing Address PO Box 9190			9	4	2013	
City Philadelphia	State PA	Zip Code (Plus 4) 19139	Description of Expenditure Municipal/local candidate			
To Whom Paid Friends of Labor			MO	DAY	YEAR	
Mailing Address 1310 Wallace Street			9	10	2013	
City Philadelphia	State PA	Zip Code (Plus 4) 19123	Description of Expenditure Municipal/local candidate			

To Whom Paid Citizens to Re-elelct Mike O'Brien			MO	DAY	YEAR	
Mailing Address 714 N 3rd Street			9	10	2013	\$ 300.00
City Philadelphia	State PA	Zip Code (Plus 4) 19123	Description of Expenditure Municipal/local candidate			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 4,550.00

