Campaign Finance Report

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

Filer Identificati Number :	on 950	00237			Rep File			CAND	IDA [°]	TE		COMN	1ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Cand	idate or L	obbyist:		BAR	RAF	R, STE	PHEN F	RIEN	NDS	OF							
Street Address:	12 BERNAR	D ST																
City:	ASTON							State:	PA	4			Zip Cod	le: 19	014-2	330		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2	2.	30 DA		POST- 3. X			AMENDM REPORT?	Yes	N	lo	√		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5	5.	30 DA		POS	ST-	6.		TERMINA REPORT?		Yes	N	lo	\
report type)	ANNUAL REPOR	T 7.	Year 2014					NG METH CHECK (PAPER		√	DISK	ETTE	
Name of Office S	ought by Candid	late:	-		_			DATE (OF E	LEC	TIO	N	District Number	Office Code	Par	ty Cod	e Coui	
DEDDECENTATI	VE IN THE GEN	EDAL ACC	SEMBLY					МО	DA	ΑY	YE	AR	160	STH	REP	1	23	
REFRESENTATI	VE IN THE GEN	LNAL ASS	DEMOET					1	1	,	4	2014		(SEE INS	TRUCTI	ONS FOR	R CODES	5)
Summary of Expenditures		МО	DAY	YEAR	1			МО	DA	AY	YE	AR	FO	R OFFIC	E USE	ONLY	7	
expenditures	irom:		5 6	20	014	Т	0		6		9	2014						
A. Amount Bro	ught Forward Fr	om Last R	Report				\$			1	15,0	30.77						
B. Total Moneta	ary Contribution	s And Rec	eipts (Fron	n Sche	dule	I)	\$				21,1	.75.00						
C. Total Funds	Available (Sum	Of Lines A	and B)				\$			1	36,2	205.77						
D. Total Expend	ditures (From So	hedule II	II)				\$				4,5	06.96						
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$			1	31,6	98.81						
F. Value Of In-	Kind Contributio	ns Receiv	red (From S	chedu	le II)	\$					0.00						
G. Unpaid Debt	s And Obligation	s (From	Schedule IV	/)			\$					0.00						
				AFF	IDA	VI	T SE	CTION										
PART I - If this is			_						=	-		_						
I swear (or affirm) correct and comple		icluaing th	e attacned sc	neaules	s filea	on	paper	or by elec	ctroni	ic me	aium,	, are to t	ne best o	r my knov	/leage	and be	iiet , tr	ue
Sworn to and subs	cribed before me to day of	his	20								s	ignature	of Perso	1 Submitt	ing Rep	ort		_
	Signa	ture					-		_				Prin	ted Name				
My Commission Ex	pires						_						Emai	I				
	МО	D	AY	YR						Area	a Cod	е	Daytim	e Teleph	one Nu	mber		ᆜ
Part II- If this is	a report of a ca	ndidate's	authorized	Comn	nitte	e, C	andid	ate shal	l sig	n he	re.							
I swear (or affirm) No 320) as amende		f my knowl	edge and beli	ief this	politi	ical	comm	ittee has	not v	/iolate	ed an	y provisi	ions of the	e act of Ju	ne 3,1	937 (P	.L. 133	3,
Sworn to and subsc	ribed before me th day of	is	20						_			Si	ignature o	f Candida	te			_
							-		_				Printe	d Name				-
	Signatur	e					-		_				F					_
My Commission Exp	ires												Emai					
	мо	D	AY	YR			-		A	rea C	ode		Da	ytime Te	lephor	e Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
BARRAR, STEPHEN FRIENDS OF	From:	<u>5/6/201</u>	<u>4</u> To:	6/9/2014
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	250.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	750.00
All Other Contributions (Part B)			\$	1,175.00
TOTAL for the Reporting) Period	(2)	\$	1,925.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	11,000.00
All Other Contributions (Part D)			\$	8,000.00
TOTAL for the Reporting	Period	(3)	\$	19,000.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	21,175.00

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 Rep			Repo	Reporting Period						
BARRAR, STEPHEN FRIENDS OF			From	ı:	<u>5/6/20</u>) <u>14</u> To	:	6/9/2014		
					DATE			AMOUNT		
Full Name of Contributing Committee Upper Chichester Republican Party			,	мо	DAY	YEAR				
Mailing Address P. O. Box 2106							\$	250.00		
City Boothwyn	State PA	Zip Code (Plus of 19061	4)	5	8	2014				
Full Name of Contributing Committee PA Podiatry PAC			,	мо	DAY	YEAR				
Mailing Address 757 Poplar Church	n Rd						\$	250.00		
City Camp Hill	State PA	Zip Code (Plus	4)	5	8	2014				
Full Name of Contributing Committee SRW & A PAC			,	мо	DAY	YEAR				
Mailing Address 200 S BROAD ST	STE 850						\$	250.00		
City PHILADELPHIA	State PA	Zip Code (Plus 4 191020000	4)	5	8	2014				

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

PAGE TOTAL 750.00

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				eporting Period							
BARRAR, STEPHEN FRIENDS OF			Froi	m:	<u>5/6/</u> 2	2 <u>014</u> To):	6/9/2014			
					DATE			AMOUNT			
Full Name of Contributor Richard Romano				МО	DAY	YEAR					
Mailing Address 1115 Oak Hollow D	r						\$	250.00			
City Downingtown	State PA	Zip Code (Plus 4) 19355		6	9	2014					
Full Name of Contributor Thomas Corcoran					DAY	YEAR					
Mailing Address 3519 Silverside Rd							\$	150.00			
City Wilmington	State DE	Zip Code (Plus 4) 19810		6	9	2014					
Full Name of Contributor Michael Rody					DAY	YEAR					
Mailing Address 934 Sconnelltown F	Rd						\$	250.00			
City West Chester	State PA	Zip Code (Plus 4) 19382		6	9	2014					
Full Name of Contributor Stephen Conrad				МО	DAY	YEAR					
Mailing Address 61 Smithbridge Rd City Glen Mills	State	Zip Code (Plus 4)		5	8	2014	\$	250.00			
City Glen Mills	PA	19342									
Full Name of Contributor Raymond Iacobucci				МО	DAY	YEAR					
Mailing Address 1 Raymond dr							\$	62.50			
City Havertown	State PA	Zip Code (Plus 4) 19083		5	8	2014					

Full Name of Contributor Francis Iacobucci				DAY	YEAR		
Mailing Address 3 Raymond Dr						\$	62.50
City Havertown	State PA	Zip Code (Plus 4) 19083	5	8	2014		
Full Name of Contributor Ronald Koran				DAY	YEAR		
						1	
Mailing Address 14 Green	Lane		6	9	2014	\$	150.00

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

PAGE TOTAL
\$ 1,175.00

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	ame of Filing Committee or Candidate Report			ng Period						
BARRAR, STEPHEN FRIENDS OF			From:	<u>5/</u>	6/2014	То:		6/9/2014		
				DA	TE		A	AMOUNT		
Full Name of Contributing Committee ENERGY TRANSFER EMPLOYEE MANAGE	EMENT COMPANY PAC			МО	DAY	YEAR				
Mailing Address 400 W 15TH ST, STE 720							\$	500.00		
City AUSTIN	State Zip Code (Plus 4) TX 78701-1661			6	9	2014	1			
Full Name of Contributing Committee Friends Of Nick Miccarelli					DAY	YEAR				
Mailing Address 901 11th St							\$	10,000.00		
City Prospect Park	State PA	Zip Code 19076	e (Plus 4)	6	9	2014	1			
Full Name of Contributing Committee Citizens for Stan Saylor				МО	DAY	YEAR				
Mailing Address 122 N. Franklin St							\$	500.00		
City Red Lion St	State PA	Zip Code 17356	e (Plus 4)	5	8	2014	1			
							-	PAGE TOTAL		
Enter Grand Total of Part C on Scheo	lule I, Detailed Sum	nmary Pa	age, Sectio	n 3.			\$	11.000.00		

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 Commit	tee or Candidate				Rep	orting Pe	riod				
BARRAR, STEPHEN FR	RIENDS OF				Fron	n:	<u>5/6/</u>	201	<u>4</u> To:	:	6/9/2014
						D <i>A</i>	ATE			АМС	DUNT
Full Name of Contribute David Kelleher	or					мо	DAY	Y	/EAR		
Mailing 9 Por	well Ct									\$	6,000.00
City Glen Mills		State	Zip	Code (Plus	4)	6	9	1	2014		
		PA	19	342							
Employer Name David	d Dodge					Occupat	ion	Owi	ner		
Employer Mailing Addre	ess/Principal Place	e of		City			State			Zip Code	(Plus 4)
1801 Route 202				Glen Mills	5		PA			19342	
Full Name of Contribute John McCarrin	or					МО	DAY	Y	/EAR		
Mailing 530 Address	WoodHaven Rd									\$	500.00
City Thornbury		State	Zip	Code (Plus	4)	6	9	1	2014		
·		PA	19	382							
Employer Name one						Occupat	ion	Owi	ner		
Employer Mailing Addre	ess/Principal Place	e of		City			State			Zip Code	(Plus 4)
one				Media			PA			19063	
Full Name of Contribute	or							١.,			
Michael Makowski						МО	DAY		EAR		
Mailing 645	Conchester Hwy									\$	500.00
City Concordville		State	Zip	Code (Plus	4)	6	g	' :	2014		
		PA	19	331							
Employer Name Mulc	h Man					Occupat	ion	Owi	ner		
Employer Mailing Addre	ess/Principal Place	e of		City		•	State			Zip Code	(Plus 4)
645 Conchester Hwy				Concordy	rille		PA			19331	

Full Name of Contributor Peter Schatzberg				МО	DAY	YEAR		
Mailing Address 22 Thomas Speakman Dr						2014	\$ 1,000.00	
City Glen Mills	State PA		p Code (Plus 4) 9342	6	9	2014		
Employer Name one	·	•		Occupation Self employed				
Employer Mailing Address/Principal Place of Business			City	State Zip Cod			Zip Code (Plus 4)	
one			one	PA			19063	

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

PAGE TOTAL	
\$ 8,000.00	

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		Report	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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		
BARRAR, STEPHEN FRIENDS OF	From:	<u>5/6/2014</u> To:	6/9/2014
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
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,		\$	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					
F			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL	
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate			Reporting Period								
			Fro	From:			То:				
					<u> </u>		DATE			,	AMOUNT
Full Name of Contributor					мо	DAY	YEAR	1			
Mailing Address								_	\$	0.00	
City	State		Zip Code(F	Plus 4)							
Employer of Contributor						Occupa	ation		·		
Employer Mailing Address/Principal Place of Business				State		Zip Code(Plus 4)		Desc	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed							PAGE TOTAL				
Summary Page, Section 3.				0.00				0.00			

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
BARRAR, STEPHEN FRIENDS OF	From	<u>5/6/2014</u>	То:	6/9/2014			

				DATE		AMOUNT		
To Whom Paid CEFA			мо	DAY	YEAR			
Mailing Address 1565 Hillcrest lane			5	7	2014	\$	100.00	
City Aston State Zip Code (Plus 4) PA 19014			Description of Expenditure donation					
To Whom Paid Friends of Jamie Santora			МО	DAY	YEAR			
Mailing Address 321 West From	nt St		5	7	2014	\$	250.00	
City Media	State PA	Zip Code (Plus 4) 19063	Descrip Recepti	otion of Exp				
To Whom Paid Latino Luncheon			МО	DAY	YEAR			
Mailing Address 217 W. State St			5	7	2014	\$	30.00	
City Kennett Square State Zip Code (Plus 4) PA 19348			Description of Expenditure luncheon					
To Whom Paid Chichester Rotary Club			мо	DAY	YEAR			
Mailing Address P. O. Box 1848			5	7	2014	\$	150.00	
City Boothwyn	State PA	Zip Code (Plus 4) 19061	Description of Expenditure donation					
To Whom Paid Pete Peterson			МО	DAY	YEAR			
Mailing Address 431 Doe Run	Lane		5	19	2014	\$	3,270.68	
City Springfield State Zip Code (Plus 4) PA 19064			Descrip advertis	otion of Exp sing	penditure			
	I	T						

To Whom Paid Citi Cards			мо	DAY	YEAR			
Mailing Address P. O. Box 6004			5	22	2014	\$	635.98	
City Sioux Falls State Zip Code (Plus 4) SD 57117			Description of Expenditure laptop					
To Whom Paid Verizon Wireless			мо	DAY	YEAR			
Mailing Address P. O. Box 25505			5	9	2014	\$	70.30	
City Lehigfh Valley PA Zip Code (Plus 4) Description of Experiment				enditure				
Enter Crand Tatal of Evnanditures on Page 1 Page 1 Page 1 Page 1 Page 1						PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	4,506.96	