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 200	6008			Repo Filed		CAND	IDATE		СОМ	4ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, Cand	date or L	obbyist:		FRIEN	DS OF	FARNES	E								
Street Address:	C/O SIEGAL	& [DROSSNER	, P.C.,3	300 Y	ORKTO	WN PLAZ	ZA								
City:	ELKINS PAR	K					State:	PA			Zip Cod	ie: 19	027			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 D PRIM		POST-	3. X		AMENDM REPORT		Yes	√ N	0	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D ELEC	AY TION	POST-	6.		TERMINA REPORT		Yes	N	0	\
report type)	ANNUAL REPOR	T 7.	Year 2014				NG METH CHECK (√	DISK	ETTE	
Name of Office S	ought by Candid	ate:	-			-	DATE	OF ELE	CTIC	ON	District Number	Office Code	Par	ty Code	Code	
SENATOR IN TH	HE GENERAL AS	SEMBI Y					МО	DAY	Y	EAR	1	STS	DEN	1	51	
SENTION IN TI	TE GENERAL AG			_			1	1	4	2014		(SEE INS	TRUCTI	ONS FOR	CODES	5)
Summary of Expenditures		МО	DAY	YEAR			МО	DAY		EAR	FO	R OFFIC	E USE	ONLY	,	
-			5 6	20	014	TO		6	9	2014						
	ught Forward Fr		-			\$				979.57						
B. Total Moneta	ary Contributions	s And Rec	eipts (Fron	n Sched	dule I) 4	5		10,	000.02						
C. Total Funds	Available (Sum (Of Lines A	and B)			\$	5		37,	979.59						
D. Total Expenditures (From Schedule III) \$ 15,824.96																
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			5		22,	154.63						
	Kind Contributio				e II)		5			0.00		,				
G. Unpaid Debt	s And Obligation	s (From S	Schedule I\	/)		\$	5		35,	150.00						_
							CTION									
PART I - If this is I swear (or affirm)		•						- '				f my knov	vladaa	and he	lief tr	
correct and comple		icidumig til	e attached sc	iledules	ineu c	п рарег	or by elec	.crome n	lealaii	i, are to t	ile best o	i iliy kilov	vieuge	and be	ilei , ti	ue
Sworn to and subs	cribed before me tl day of —	nis	20						:	Signature	of Perso	n Submitt	ing Re _l	ort		
	Signa	ture				_					Prin	ted Name				
My Commission Ex	pires										Ema	il				
	МО	D	AY	YR				Aı	rea Co	de	Daytim	e Teleph	one Nu	mber		\Box
Part II- If this is	a report of a ca	ndidate's	authorized	Comm	ittee,	Candio	late shal	l sign h	ere.							
I swear (or affirm) No 320) as amende		my knowl	edge and bel	ief this	politic	al comn	nittee has	not viola	ated a	ny provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subsc	ribed before me thi day of	s	20							s	ignature o	of Candida	ite			_
						_					Printe	d Name				-
	Signature	e				_						:.				_
My Commission Exp	ires										Ema	II				
	мо	D	AY	YR				Area	Code		Da	aytime Te	elephor	e Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF FARNESE	From:	<u>5/6/201</u> 4	<u>1</u> To:	6/9/2014
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)			\$	10,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	10,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.02
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			\$	10,000.02

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

PAGE TOTAL \$0.00

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 Fining Committee of Candidate			Reporting Period From: To:					
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	1					

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 Peri	od		
FRIENDS OF FARNESE	From:	5/6/2014	То:	6/9/2014

Full Name of Contributing Committee
CARPENTERS PAC OF PHILA & VICINITY

Mailing Address

1803 SPRING GARDEN STREET

State

Zip Code (Plus 4)

MO
DAY

YEAR

\$ 10,000.00

19130

DATE

.

PΑ

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

PAGE TOTAL \$ 10,000.00

AMOUNT

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.)

ame of Filing Committee or Candidate			Reporting Period							
				From:				То:		
			_		D	ATE		А	MOUNT	
Full Name of Contributor					МО	DAY	YEAR			
Mailing Address								\$	0.00	
City	State	Zi	p Code (Plus	4)						
Employer Name					Occupa	tion	•	•		
Employer Mailing Address/Principa Business	l Place of		City		•	State		Zip Cod	de (Plus 4)	
Enter Grand Total of Part C on	Schedule I, Deta	iled Sumr	mary Page,	Section	on 3.			F \$	PAGE TOTAL 0.00	

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 Candid	ate		Reporti	ng Perio	d			
FRIENDS OF FARNESE			From:		5/6/201	<u>4</u> To:	6/9/2014	<u>1</u>
				D	ATE		AMOUNT	
Full Name HYPERION BANK				МО	DAY	YEAR		
Mailing Address 199 WEST GIRA	RD AVENUE			_			\$	0.02
City PHILADELPHIA	State	Zip Code (Plu	us 4)	5	31	2014		
	PA	19123						

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

INTEREST INCOME

Receipt Description

PAGE TOTAL \$0.02

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		
FRIENDS OF FARNESE	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 Candidat	:e		Reporting Period					
			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	ame of Filing Committee or Candidate				Reporting	Period			
					From:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus	4)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reportir	ng Period			
FRIENDS OF FARNESE			From	<u>5/6</u>	5/2014	То:	6/9/2014
				DATE			AMOUNT
To Whom Paid STRATEGIC AFFAIRS CONSULTI	NG		мо	DAY	YEAR		
Mailing Address 1130 MARLB	OROUGH STREET		5	9	2014	\$	6,217.50
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19125	1	otion of Exp		2	
To Whom Paid SD ASSOCIATES, P.C.			МО	DAY	YEAR		
Mailing Address 300 YORKTO	WN PLAZA		5	9	2014	\$	750.00
City ELKINS PARK	State PA	Zip Code (Plus 4) 19027	Descrip ACCOU	ntion of Exp	enditure		
To Whom Paid NGP VAN, INC.			мо	DAY	YEAR		
Mailing Address 1101 15TH S	STREET, NW		5	13	2014	\$	870.00
City WASHINGTON	State DC	Zip Code (Plus 4) 20005		otion of Exp			
To Whom Paid COMMITTEE TO ELECT MIKE ST.	ACK	·	МО	DAY	YEAR		

To Whom Paid 15TH WARD DEMOCRATIC EXECUTIVE	МО	DAY	YEAR				
Mailing Address 2932 OGDEN STREE		5	14	2014	\$	500.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19130	Description of Expenditure DONATION				

18940

Zip Code (Plus 4)

5

DONATION

2014

14

Description of Expenditure

Mailing Address

NEWTOWN

City

P.O. BOX 292

State

PΑ

2,000.00

To Whom Paid SEVEN POINTS CONSULTING, I	мо	DAY	YEAR					
Mailing Address P.O. BOX 391				19	2014	\$	1,500.00	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CONSULTING FEE					
To Whom Paid CARDMEMBER SERVICE	МО	DAY	YEAR					
Mailing Address P.O. BOX 790408				23	2014	\$	2,477.46	
City ST. LOUIS	State MO	Zip Code (Plus 4) 63179	Description of Expenditure CREDIT CARD					
To Whom Paid PHILADELPHIA CITY DEMOCRATIC EXECUTIVE COMMITTEE			МО	DAY	YEAR			
Mailing Address 219 SPRING GARDEN STREET			6	2	2014	\$	1,500.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19123	Description of Expenditure JEFFERSON JACKSON DINNER TICKETS					
To Whom Paid HYPERION BANK				DAY	YEAR			
Mailing Address 199 WEST (GIRARD AVENUE		5	31	2014	\$	10.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19123	Description of Expenditure BANK SERVICE CHARGE					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL 15,824.96	

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period						
FRIENDS OF FARNESE			From:		<u>5/6/2014</u> To:			6/9/2014	
					DATE			Outstanding Balance of Debt	
Name of Creditor CAROSELLI BEACHLER MCTIERNAN & CONBOY					DAY	YEAR			
Mailing Address 1845 WALNUT STREET 15TH FLOOR					7	2012	2 \$	35,150.00	
City PHILADELPHIA	State	Zip Code (Pl	us 4)	Description of Debt					
	PA 19103		LEGAL FEES PENDING OUTCOME OF FEE AWARD APPEAL						
								PAGE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.								35,150.00	