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	20060	14				Repo Filed			CAI	NDII	DATE		СОМИ	MITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, C	andida	te or Lo	bbyis	st:		COX, I	IIM F	RIE	ENDS	OF									
Street Address:	Р О ВОХ	(2550																		
City:	WEST LA	AWN								State	e:	PA			Zip Cod	Zip Code: 19609-0000				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND I PRIM	FRIDAY ARY	PRE-	2.	30 PRI	DA'		Р	OST-	3.		AMENDM REPORT?		Yes		lo	\
(place X to the right of	6TH TUESDAY PRE-ELECTIO		4.	2ND I	FRIDAY TION	PRE-	- 5.)	30 ELE		Y ION	Р	OST-	6.		TERMINA REPORT		Yes	ľ	lo	/
report type)	ANNUAL RE	PORT	7.	Year	2014					G ME		_			PAPER		√	DISK	ETTE	
Name of Office S	ought by Ca	ndidate	e:				•			DAT	E O	F ELE	CTI	ON	District Number	Office Code	Par	ty Cod	e Cou	
REPRESENTATI	VE IN THE G	SENER/	AL ASS	EMBL'	Y			МО				DAY	Υ	/EAR	129	STH	REF	•	06	
			1								11		4	2014		(SEE INS	TRUCTI	ONS FO	R CODES	5)
Summary of Expenditures		nd	МО	DA		YEAR				МО		DAY		/EAR		R OFFIC	E USE	ONL	′	
				6	10	20	14	TO			10		20	2014	ļ					
A. Amount Bro				•					\$,042.65	_					
B. Total Moneta	ary Contribut	tions A	nd Rec	eipts	(From	Sched	lule I)	<u> </u>	\$,550.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 10,592.65																				
D. Total Expenditures (From Schedule III) \$ 2,409.47																				
E. Ending Cash Balance (Subtract Line D From Line C)								_	\$				8,	183.18						
F. Value Of In-							e II)		\$					0.00	1					
G. Unpaid Debt	s And Obliga	ations (From S	chedu	ule IV)				\$					0.00						_
						AFFI	DAV	IT S	SE(CTIC	N									
PART I - If this is		-	-		_															
I swear (or affirm) correct and comple		ort, inclu	ding the	attaci	ned sch	edules	filed o	n pape	er o	or by e	lectr	onic m	ediur	n, are to t	the best o	my knov	vledge	and be	elief , tr	ue
Sworn to and subs	cribed before r day of	me this		20							•			Signature	of Perso	n Submitt	ing Rep	ort		
	- <u> </u>	ignature	÷	_				_							Prin	ted Name				_
My Commission Ex	rpires							_							Ema	il				
	МО		D#	λY		YR						Ar	ea Co	ode	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	a candi	date's	autho	rized (Commi	ittee,	Cand	lida	ate sh	nall s	sign h	ere.							
I swear (or affirm) No 320) as amende		est of my	/ knowle	dge ar	nd belie	f this p	politica	l com	nmit	ttee h	as no	ot viola	ted a	ny provis	ions of the	e act of Ju	ıne 3,1	937 (P	.L. 133	3,
Sworn to and subsc	ribed before m day of	e this		20										s	ignature o	of Candida	ite			_
				-				_							Printe	d Name				- $ $
My Commission Exp	_	ature						_			-				Ema	il				- $ $
, commission exp								_												_
	М	10	DA	AY		YR						Area	Code	è	Da	aytime Te	elephor	ne Nun	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -							
Name of Filing Committee or Candidate	Reporting	g Period					
COX, JIM FRIENDS OF	From:	6/10/2014	<u>1</u> To:	10/20/2014			
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)			\$	200.00			
All Other Contributions (Part B)	All Other Contributions (Part B)						
TOTAL for the Reporting) Period	(2)	\$	200.00			
3. Contributions Received Over \$250.00 (From Part C and Part D)							
Contributions Received From Political Committees (Part C)			\$	2,350.00			
All Other Contributions (Part D)			\$	0.00			
TOTAL for the Reporting) Period	(3)	\$	2,350.00			
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			\$	2,550.00			

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	Reporting	Period		
COX, JIM FRIENDS OF	From:	6/10/2014	То:	10/20/2014
		DATE		AMOUNT

	Full Name of Contributing Committee PA PT PAC					YEAR	
Mailing Address 2 LEMOYNE DR, SUITE 200						\$ 200.00	
City	LEMOYNE	State PA	Zip Code (Plus 4) 17043	6	26	2014	

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

PAGE TOTAL \$ 200.00

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 Filling Committee of Candidate			Reporting Period From: To:					
			l		DATE			AMOUNT
Full Name of Contributor				МО	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 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					
COX, JIM FRIENDS OF			From:	<u>6/1</u>	0/2014	То:	10/20/2014
				DA	TE		AMOUNT
Full Name of Contributing Committee ENERGY TRANSFER EMPLOYEE MANAGI	EMENT COMPANY PAC			МО	DAY	YEAR	
Mailing Address 400 W 15TH ST, STE	720						\$ 500.00
City AUSTIN	State TX	Zip Code 78701-1	(Plus 4)	7	16	2014	
Full Name of Contributing Committee PABAR PAC (PA BAR ASSN)				МО	DAY	YEAR	
Mailing Address 100 SOUTH STREET City HARRISBURG	State Zip Code (Plus 4) PA 171010000				27	2014	\$ 300.00
Full Name of Contributing Committee BERKS CO COM FOR AFFORDABLE HOL	ISING			мо	DAY	YEAR	
Mailing Address 25 STEVENS AVE	BLDG B, STE 1				20	2014	\$ 500.00
City WEST LAWN	State PA	Zip Code 19609-1	(Plus 4)	9	30	2014	
Full Name of Contributing Committee TURZAI, MIKE FRIENDS OF				МО	DAY	YEAR	
Mailing Address PO BOX 721 City WEXFORD	State PA	Zip Code 15090	e (Plus 4)	8	29	2014	\$ 750.00
Full Name of Contributing Committee PA BANKERS PUB AFFAIRS (PABPAC)					DAY	YEAR	
Mailing Address 3897 N FRONT ST				0	22	2014	\$ 300.00
City HARRISBURG	State PA	Zip Code	(Plus 4)	9	23	2014	

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

PAGE TOTAL

\$ 2,350.00

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 Committee or Cand	idate			Rep	orting Pe	riod			
				Fro	m:		To) :	
					D	ATE		Al	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	al Place of		City		•	State		Zip Cod	le (Plus 4)
Enter Grand Total of Part C on	Schedule I, Deta	iled Sumr	mary Page,	Secti	on 3.			P	AGE 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 Can	didate		Report	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name		-		МО	DAY	YEAR		-
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description								
Enter Grand Total of Part E on S	Schedule I Detailer	d Summary Page	Section	4		[P	PAGE TOTAL
zneci Grana rotar or r art z on o	renedure 1/ Detaned	· Summary rage,	Section	•			\$	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 Perio	d	
COX, JIM FRIENDS OF	From:	6/10/2014 To:	10/20/2014
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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 Candida	te		Reporting	g Period			
			From:			To:	
				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 Sci Section 2.	nedule II, In-Kir	nd Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTAL
occuon 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	1				Re	porting l	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									- \$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate		Reporti	ng Period			
COX, JIM FRIENDS OF			From	<u>6/1</u> 0	0/2014	То:	10/20/2014
				DATE			AMOUNT
To Whom Paid B& H Photo Video			мо	DAY	YEAR		
Mailing Address 420 Ninth A	Ave		7	13	2014	\$	2,204.97
City New York	State NY	Zip Code (Plus 4) 10001	Description of Expenditur Laptop, Printer and Softv				
To Whom Paid Lowe's			МО	DAY	YEAR		
Mailing Address 2625 Shillington Rd			6	29	2014	\$	84.78
City Sinking Spring	State PA	Zip Code (Plus 4) 19608	Description of Expenditure Storage Shelves				
To Whom Paid Target	·		МО	DAY	YEAR		
Mailing Address 2769 Paper	rmill Rd		7	4	2014	\$	86.72
City Wyomissing	State PA	Zip Code (Plus 4) 19610	1	otion of Exp e Storage (
To Whom Paid PA Taxidermist Assoc.			МО	DAY	YEAR		
Mailing Address 134 Degler	Lane		9	9	2014	\$	33.00
City Bethel	State PA	Zip Code (Plus 4) 19507		otion of Exp 's Show Pla			
Futor Cuand Tatal of Funon	ditures on Page 1. Pe	port Cover Page, Item D).				PAGE TOTAL

2,409.47