

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 :		2006008		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF FARNESE											
Street Address:											
City: ELKINS PARK						State: PA		Zip Code: 19027			
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.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2014		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
SENATOR IN THE GENERAL ASSEMBLY					MO	DAY	YEAR	1	STS	DEM	51
					11	4	2014	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		9	16	2014		10	20	2014			
A. Amount Brought Forward From Last Report					\$ 39,026.61						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 19,800.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 58,826.61						
D. Total Expenditures (From Schedule III)					\$ 29,441.13						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 29,385.48						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 35,150.00						

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

Signature

Printed Name

My Commission Expires

Email

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
FRIENDS OF FARNESE	From: <u>9/16/2014</u> To: <u>10/20/2014</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)	\$ 16,800.00
All Other Contributions (Part D)	\$ 3,000.00
TOTAL for the Reporting Period (3)	\$ 19,800.00

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.)	\$ 19,800.00
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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
FRIENDS OF FARNESE	From: <u>9/16/2014</u> To: <u>10/20/2014</u>

			DATE		AMOUNT	
Full Name of Contributing Committee EXELONPAC			MO	DAY	YEAR	\$ 500.00
Mailing Address			10	17	2014	
City CHICAGO	State IL	Zip Code (Plus 4) 60680				
Full Name of Contributing Committee PAMIC PAC			MO	DAY	YEAR	\$ 300.00
Mailing Address			10	17	2014	
City WORMLEYSBURG	State PA	Zip Code (Plus 4) 17043				
Full Name of Contributing Committee ZARWIN BAUM GOOD GOVERNMENT PAC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			10	17	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103				
Full Name of Contributing Committee CARPENTERS PAC OF PHILA & VICINITY			MO	DAY	YEAR	\$ 2,000.00
Mailing Address			10	17	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19130				
Full Name of Contributing Committee PLUMBERS UNION LOCAL 690 ELECTION POLITICAL ACTION FU			MO	DAY	YEAR	\$ 5,000.00
Mailing Address			10	17	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19154				
Full Name of Contributing Committee INSURANCE AGENTS & BROKERS OF PA, INC.			MO	DAY	YEAR	\$ 500.00
Mailing Address			10	17	2014	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055				

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
PA CABLE PAC			10	17	2014	
Mailing Address						
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17101

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
CITIZENS FOR A GROWING ECONOMY			10	17	2014	
Mailing Address						
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17108

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
THE PENNSYLVANIA INSURANCE PAC			10	17	2014	
Mailing Address						
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		19103

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
CITIZENS FOR A BETTER COMMONWEALTH			10	17	2014	
Mailing Address						
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17108

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
KINSER GROUP PAC			10	17	2014	
Mailing Address						
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		191023850

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
VISION COMMITTEE			10	17	2014	
Mailing Address						
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17101

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
POLITICAL LABOR ACTION-NOW P.L.A.N.			10	17	2014	
Mailing Address						
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17102

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
BLUE CROSS VOICE			10	17	2014	
Mailing Address						
City	WILKES-BARRE	State	PA	Zip Code (Plus 4)		18711

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
BIKE PAC			10	17	2014	
Mailing Address						
City	MECHANICSBURG	State	PA	Zip Code (Plus 4)		17055

Full Name of Contributing Committee			MO	DAY	YEAR	\$1,000.00
PFT COMMITTEE TO SUPPORT PUBLIC EDUCATION			10	17	2014	
Mailing Address						
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		19103

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
CENTURYLINK EMPLOYEES' PAC OF PENNSYLVANIA			10	17	2014	
Mailing Address						
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17101

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
VALUE DRUG COMPANY VALUE PAC			10	17	2014	
Mailing Address						
City	ALTOONA	State	PA	Zip Code (Plus 4)		166019311

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
CAPITAL BLUE PAC			10	17	2014	
Mailing Address						
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17106

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
HEALTH PARTNERS OF PHILADELPHIA PAC			10	17	2014	
Mailing Address						
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		19107

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

PAGE TOTAL
\$ 16,800.00

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 FRIENDS OF FARNESE	Reporting Period From: <u>9/16/2014</u> To: <u>10/20/2014</u>
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				DATE			AMOUNT
Full Name of Contributor SCOTT E. DIAMOND				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				10	17	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103					
Employer Name SACKS, WESTON, PETRELLI, DIAMOND & MILLSTEIN, LLC				Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business			City PHILADELPHIA		State PA	Zip Code (Plus 4) 19103	
Full Name of Contributor SEAN M. REILLY				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				10	17	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19111					
Employer Name ROSCOMMON INTERNATIONAL				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business			City BALA CYNWYD		State PA	Zip Code (Plus 4) 19005	
Full Name of Contributor HOWARD FISCHER				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				10	17	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19102					
Employer Name HOWARD FISCHER ASSOCIATES				Occupation OWNER			
Employer Mailing Address/Principal Place of Business			City PHILADELPHIA		State PA	Zip Code (Plus 4) 19103	

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

PAGE TOTAL
\$ 3,000.00

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 From: To:
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			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	
FRIENDS OF FARNESE		From: <u>9/16/2014</u> To: <u>10/20/2014</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:
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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	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
FRIENDS OF FARNESE	From <u>9/16/2014</u> To: <u>10/20/2014</u>

DATE				AMOUNT
To Whom Paid				
STRATEGIC AFFAIRS CONSULTING				
Mailing Address				
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19125	Description of Expenditure CONSULTING FEE	
To Whom Paid				
SEVEN POINTS CONSULTING, LLC				
Mailing Address				
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CONSULTING FEES	
To Whom Paid				
CARDMEMBER SERVICE				
Mailing Address				
City ST. LOUIS	State MO	Zip Code (Plus 4) 63179	Description of Expenditure CREDIT CARD	
To Whom Paid				
LARRY FARNESE				
Mailing Address				
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure EXPENSE REIMBURSEMENT	
To Whom Paid				
SD ASSOCIATES, P.C.				
Mailing Address				
City ELKINS PARK	State PA	Zip Code (Plus 4) 19027	Description of Expenditure ACCOUNTING FEES	
To Whom Paid				
JOHN KANE FOR SENATE				
Mailing Address				
City CLIFTON HEIGHTS	State PA	Zip Code (Plus 4) 19018	Description of Expenditure DONATION	

To Whom Paid			MO	DAY	YEAR	\$ 1,000.00
FRIENDS OF JUDY SCHWANK						
Mailing Address			10	8	2014	
City	READING	State	Zip Code (Plus 4)		Description of Expenditure	
		PA	19612		DONATION	
To Whom Paid			MO	DAY	YEAR	\$ 6,440.00
STRATEGIC AFFAIRS CONSULTING						
Mailing Address			10	10	2014	
City	PHILADELPHIA	State	Zip Code (Plus 4)		Description of Expenditure	
		PA	19125		CONSULTING FEE	
To Whom Paid			MO	DAY	YEAR	\$ 600.00
COOPER'S FERRY PARTNERSHIP						
Mailing Address			10	10	2014	
City	CAMDEN	State	Zip Code (Plus 4)		Description of Expenditure	
		NJ	08103		DONATION	
To Whom Paid			MO	DAY	YEAR	\$ 250.00
30TH WARD EXECUTIVE COMMITTEE						
Mailing Address			10	16	2014	
City	PHILADELPHIA	State	Zip Code (Plus 4)		Description of Expenditure	
		PA	19146		DONATION	
To Whom Paid			MO	DAY	YEAR	\$ 300.00
THE 1492 SOCIETY						
Mailing Address			10	16	2014	
City	PHILADELPHIA	State	Zip Code (Plus 4)		Description of Expenditure	
		PA	19145		DONATION	
To Whom Paid			MO	DAY	YEAR	\$ 1,000.00
KENNEY FOR COUNCIL						
Mailing Address			10	17	2014	
City	PHILADELPHIA	State	Zip Code (Plus 4)		Description of Expenditure	
		PA	19102		DONATION	
To Whom Paid			MO	DAY	YEAR	\$ 200.00
EASTER SEALS OF SOUTHEASTERN PA						
Mailing Address			10	17	2014	
City	PHILADELPHIA	State	Zip Code (Plus 4)		Description of Expenditure	
		PA	19103		DONATION	
To Whom Paid			MO	DAY	YEAR	\$ 1,000.00
DEMOCRATIC CAMPAIGN COMMITTEE OF PHILA						
Mailing Address			10	20	2014	
City	PHILADELPHIA	State	Zip Code (Plus 4)		Description of Expenditure	
		PA	19123		DONATION	

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$ 29,441.13

SCHEDULE IV

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 FRIENDS OF FARNESE	Reporting Period From: <u>9/16/2014</u> To: <u>10/20/2014</u>
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			DATE	Outstanding Balance of Debt
Name of Creditor CAROSELLI BEACHLER MCTIERNAN & CONBOY			MO 9	DAY 7
Mailing Address			YEAR 2012	\$ 35,150.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Debt LEGAL FEES PENDING OUTCOME OF FEE AWARD APPEAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.				PAGE TOTAL \$ 35,150.00