

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 <input type="checkbox"/> No <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2014	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE <input type="checkbox"/>
Name of Office Sought by Candidate:					DATE OF ELECTION		District Number	Office 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		FOR OFFICE USE ONLY	
		10	21	2014				
A. Amount Brought Forward From Last Report				\$	29,385.48			
B. Total Monetary Contributions And Receipts (From Schedule I)				\$	6,500.10			
C. Total Funds Available (Sum Of Lines A and B)				\$	35,885.58			
D. Total Expenditures (From Schedule III)				\$	22,049.32			
E. Ending Cash Balance (Subtract Line D From Line C)				\$	13,836.26			
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

Printed Name

Signature

Email

My Commission Expires

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>10/21/2014</u> To: <u>11/24/2014</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)	\$ 250.00
All Other Contributions (Part B)	\$ 250.00
TOTAL for the Reporting Period (2)	\$ 500.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 5,500.00
All Other Contributions (Part D)	\$ 500.00
TOTAL for the Reporting Period (3)	\$ 6,000.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.10

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.)	\$ 6,500.10
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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 FRIENDS OF FARNESE	Reporting Period From: <u>10/21/2014</u> To: <u>11/24/2014</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee COMMONWEALTH ASSOC. OF SCH. ADMINISTRATORS TEAMSTERS 1			MO	DAY	YEAR	\$ 250.00
Mailing Address			11	11	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19130				

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

PAGE TOTAL
\$ 250.00

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
FRIENDS OF FARNESE	From: <u>10/21/2014</u> To: <u>11/24/2014</u>

DATE				AMOUNT
Full Name of Contributor				
DAVID DUNPHY				
Mailing Address				
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19125	11 11 2014	\$ 250.00

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

PAGE TOTAL
\$ 250.00

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 FRIENDS OF FARNESE	Reporting Period From: <u>10/21/2014</u> To: <u>11/24/2014</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
LAWPAC				11	11	2014	
Mailing Address							
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17102	
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
THE GLAXOSMITHKLINE POLITICAL ACTION COMMITTEE				11	11	2014	
Mailing Address							
City	RESEARCH TRIANGLE PARK	State	NC	Zip Code (Plus 4)		27709	
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
AFSCME COUNCIL 13				11	11	2014	
Mailing Address							
City	HARRISBURG	State	PA	Zip Code (Plus 4)		171111599	
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
WINDSTREAM POLITICAL ACTION COMMITTEE				11	11	2014	
Mailing Address							
City	LITTLE ROCK	State	AK	Zip Code (Plus 4)		72212	
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
BRICKLAYERS & ALLIED CRAFTWORKERS LOCAL 1 PA/DE PAC				11	11	2014	
Mailing Address							
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		19154	
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
HIGHMARK HEALTH PAC				11	11	2014	
Mailing Address							
City	CAMP HILL	State	PA	Zip Code (Plus 4)		170890089	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 500.00
PENNSYLVANIA BANKERS PUBLIC AFFAIRS COMMITTEE						
Mailing Address			11	11	2014	
City	HARRISBURG	State				PA

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
PENN NATIONAL INSURANCE/INSERVCO PAC						
Mailing Address			11	11	2014	
City	HARRISBURG	State PA				Zip Code (Plus 4) 171012361

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
APARTMENT ASSOC. OF PENNSYLVANIA PAC						
Mailing Address			11	11	2014	
City	BALA CYNWYD	State				PA

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

PAGE TOTAL	
\$	5,500.00

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>10/21/2014</u> To: <u>11/24/2014</u>
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			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
DILWORTH PAXSON LLP	11	11	2014	\$ 500.00
Mailing Address				
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19102		
Employer Name			Occupation	
Employer Mailing Address/Principal Place of Business		City	State PA	Zip Code (Plus 4)

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

PAGE TOTAL
\$ 500.00

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 FRIENDS OF FARNESE	Reporting Period From: <u>10/21/2014</u> To: <u>11/24/2014</u>
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			DATE			AMOUNT
Full Name			MO	DAY	YEAR	
HYPERION BANK						\$ 0.10
Mailing Address						
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19123	10	31	2014	
Receipt Description INTEREST INCOME						

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

PAGE TOTAL
\$ 0.10

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>10/21/2014</u> To: <u>11/24/2014</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>10/21/2014</u> To: <u>11/24/2014</u>

				DATE	AMOUNT		
To Whom Paid HYPERION BANK				MO	DAY	YEAR	\$ 20.00
Mailing Address				10	31	2014	
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)	19123	Description of Expenditure BANK CHARGES	
To Whom Paid PA SDCC				MO	DAY	YEAR	\$ 2,500.00
Mailing Address				10	21	2014	
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)	19102	Description of Expenditure DONATION	
To Whom Paid 39 B WARD EXECUTIVE COMMITTEE				MO	DAY	YEAR	\$ 200.00
Mailing Address				10	28	2014	
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)	19148	Description of Expenditure DONATION	
To Whom Paid CARDMEMBER SERVICE				MO	DAY	YEAR	\$ 3,819.09
Mailing Address				10	29	2014	
City	ST. LOUIS	State	MO	Zip Code (Plus 4)	63179	Description of Expenditure CREDIT CARD	
To Whom Paid PUBLIC SERVICE PAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				10	31	2014	
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)	19145	Description of Expenditure DONATION	
To Whom Paid SEVEN POINTS CONSULTING, LLC				MO	DAY	YEAR	\$ 3,784.74
Mailing Address				11	12	2014	
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17108	Description of Expenditure CONSULTING FEE	

To Whom Paid STRATEGIC AFFAIRS CONSULTING			MO	DAY	YEAR	\$ 5,812.50
Mailing Address			11	12	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19125	Description of Expenditure CONSULTING FEE			

To Whom Paid FRIENDS OF RITTENHOUSE SQUARE			MO	DAY	YEAR	\$ 2,000.00
Mailing Address			11	12	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure DONATION			

To Whom Paid 8TH WARD DEMOCRATIC EXECUTIVE COMMITTEE			MO	DAY	YEAR	\$ 1,500.00
Mailing Address			11	19	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19102	Description of Expenditure DONATION			

To Whom Paid CARDMEMBER SERVICE			MO	DAY	YEAR	\$ 1,412.99
Mailing Address			11	21	2014	
City ST. LOUIS	State MO	Zip Code (Plus 4) 63179	Description of Expenditure CREDIT CARD			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 22,049.32

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>10/21/2014</u> To: <u>11/24/2014</u>
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				DATE		Outstanding Balance of Debt	
Name of Creditor				MO	DAY	YEAR	\$ 35,150.00
CAROSELLI BEACHLER MCTIERNAN & CONBOY							
Mailing Address				9	7	2012	
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