Campaign Finance Report

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

					_		CANDI	DATE	6014				BYIST	
Filer Identificat Number :	ion 9500)237			Report Filed B		CANDI	DATE	СОМ	MITTEE	✓	LOB	51131	
Name of Filing (Committee, Candid	late or L	obbyist:		BARRAR	, ste	EPHEN FR	IENDS	OF					
Street Address:	12 BERNARD	ST					_							
City:	ASTON						State:	PA		Zip Co	de: 19	014-2	330	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	2ND FRIDAY PRE- 2. 30 DAY POST- PRIMARY PRIMARY								MENDMENT Yes V EPORT?		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 D/ ELEC	•• •	POST-	5.	TERMIN REPORT		Yes	No	~
report type)	ANNUAL REPORT	7. X	Year 2014				NG METHO			PAPER		\checkmark	DISKE	TTE
Name of Office	- Sought by Candida	te:					DATE O	F ELEC	TION	District Number	Office Code	Par	ty Code	County Code
DEDDECENTAT			EMPLY/				мо	DAY	YEAR	160	STH	REF)	23
REPRESENTAT.	IVE IN THE GENEI	KAL ASS	EMBLY				11		4 2014		(SEE INS	STRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YEAR	FC	DR OFFIC	E USE	ONLY	
Expenditures	s from:		11 25	2	014 T	0	12	3	1 2014					
A. Amount Bro	ught Forward Fro	m Last R	eport			\$		1	14,590.49					
B. Total Monet	ary Contributions	And Rec	eipts (Fron	1 Sche	dule I)	\$			350.00					
C. Total Funds	Available (Sum O	f Lines A	and B)			\$		1	14,940.49					
D. Total Expen	ditures (From Sch	edule II	1)			\$			2,556.16					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$		1	12,384.33	-				
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)	\$			0.00	-				
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	()		\$			0.00					
				AFF	IDAVI	T SE	CTION							
	s a Committee rep	•	-							-	. f		and half	of huma
correct and compl) that this report, inc ete.	iuding the	e attached sc	neaule	s mea on	paper	or by elect	ronic me	num, are to	the best o	л ту кноч	vieuge	and ben	er, true
Sworn to and subs	scribed before me thi day of	S	20						Signatur	e of Perso	n Submitt	ing Rej	port	
	Signatu	ıre				-				Prir	ited Name			
My Commission E	xpires					_				Ema	il			
	мо	D	AY	YR				Area	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comn	nittee, C	andid	ate shall	sign he	re.					
I swear (or affirm) No 320) as amend) that to the best of ı ed.	ny knowle	edge and beli	ef this	political	comm	iittee has n	ot violate	ed any provis	sions of th	e act of Ju	ıne 3,1	937 (P.L	1333,
Sworn to and subse	cribed before me this day of		20						S	Signature	of Candida	ite		
						-				Printe	ed Name			
My Commission Exp	Signature					-				Ema	nil			
,	·													
	МО	D	AY	YR				Area C	ode	D	aytime Te	elephor	ne Numb	er

SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
BARRAR, STEPHEN FRIENDS OF	<u>11/25/201</u>	<u>4</u> To:	<u>12/31/2014</u>	
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			-	
TOTAL for the Reporting	g 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	g Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	350.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	350.00

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						
			Fre	om:		То	:			
					DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City S	tate	Zip Code (Plus	4)							
							Г	PAGE TOTAL		

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

\$

0.00

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 Candidat	e		Rep Froi	orting P m:	eriod	То):		
					DATE			AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							
								PAGE TOTAL	
PAGE TOTAL Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 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							
			From:			То:				
				DA	TE		А	MOUNT		
Full Name of Contributing Committe	ee			мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
						ſ		PAGE TOTAL		
Enter Grand Total of Part C on S	chedule I, Detail	led Summary Pa	age, Sectio	n 3.			\$	0.00		

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	Reporting Period					
	From:	То:				

			D	ATE		AMO	UNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Employer Name			Occupa	tion		•	
Employer Mailing Address/ Business	Principal Place of	City	•	State		Zip Code (Plus 4)
Enter Grand Total of Par	t C on Schedule I, Detail	ed Summary Page, Sect	ion 3.			PAG	E TOTAL
						\$	0.00

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 Cano	didate		Report	ing Perio	d			
BARRAR, STEPHEN FRIENDS OF From:			11/25/201	<u>4</u> To:	: <u>12/31/2014</u>			
				D	ATE			AMOUNT
Full Name					DAY	YEAR		
Kennet Brew Fest				мо	DAY	TEAR		
Mailing Address 600 S Broad	St			12				\$ 100.00
City Kennett Square	State	Zip Code (Zip Code (Plus 4)		31	201	4	
·	PA	19348						
Receipt Description returned	l check	·						
Full Name Chester County Womens Republi	ican			мо	DAY	YEAR	2	
Mailing Address 15 S Church	St							\$ 250.00
City West Chester	State	Zip Code (Plus 4)	12	31	201	4	
	PA	19382						
Receipt Description returned	l check							
								PAGE TOTAL
Enter Grand Total of Part E on S	chedule I, Detailed	l Summary Page,	Section	4.			\$	350.00

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								
BARRAR, STEPHEN FRIENDS OF	From:	<u>11/25/2014</u> то:	<u>12/31/2014</u>							
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	riod (1)	\$	0.00							
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)									
TOTAL for the Reporting Pe	riod (2)	\$	0.00							
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)										
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00							

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate R			Reporting Period						
	From:			То:						
				DATE		АМС	DUNT			
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL			
					4	5	0.00			

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	Reporting Period					
					Fro	om:		То:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor					Occupation					
Employer Mailing Address/Principal Plac Business	e of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate		Reporting Period						
BARRAR, STEPHEN FRIENDS OF			From	<u>11/2</u>	5/2014	То:	<u>12/31/2014</u>	
				AMOUNT				
To Whom Paid Concord Republican Party			мо	DAY	YEAR			
Mailing Address 2203 Lydia Hollow Drive			12	3	2014	\$	250.00	
City Glen Mills	State PA	Zip Code (Plus 4) 19342	Description of Expenditure Reception					
To Whom Paid Warren Kampf			мо	DAY	YEAR			
Mailing Address P. O. Box 1439			12	1	2014	\$	160.00	
City _{Paoli}	State PA	Zip Code (Plus 4) 19301	Description of Expenditure Holiday Luncheon					
To Whom Paid TD Bank			мо	DAY	YEAR			
Mailing Address 214 Wilmington-West Chester Pike			12	10	2014	\$	1,050.00	
City Chadds Ford	State PA	Zip Code (Plus 4) 19317	Description of Expenditure Gift Cards					
To Whom Paid Christine marie Catering			мо	DAY	YEAR			
Mailing Address 126 Station Road			12	9	2014	\$	451.00	
City Glen Mills	State PA	Zip Code (Plus 4) 19342	Description of Expenditure catering services					
To Whom Paid TD Bank			мо	DAY	YEAR			
Mailing Address 214 Wilmington-West Chester Pike			12	23	2014	\$	500.00	
City Chadds Ford	State PA	Zip Code (Plus 4) 19317	Description of Expenditure Gift Cards					

To Whom Paid Verizon			мо	DAY	YEAR		
Mailing Address P. O. Box 25505			12	13	2014	\$	145.16
City Lehigh Valley	State PA	Zip Code (Plus 4) 18002	Description of Expenditure wireless services				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
Enter Grand Total of Expenditures of	on Page 1, Report Co	over Page, Item D.				\$	2,556.16