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 2 | 200600 | 8 | | | Rep File | | | CAN | IDI | DATE | | COMN | 1ITTEE | ✓ | LOBI | BYIST | | |
|---|-----------------------------|---------------|------------|-----------------------|---------|-------------|------|----------|----------|-------|-----------|--------|-------------|--------------------|----------------|--------------|--------|-----------|----------|
| Name of Filing C | ommittee, Ca | ndidat | e or Lo | bbyist: | | FRIE | ND: | S OF | FARNE | SE | | | | | | | | | |
| Street Address: | C/O SD A | SSOCI | IATES, | P.C.,300 | YORKT | OWI | N PI | LAZA | | | | | | | | | | | |
| City: | ELKINS PA | ARK | | | | | | | State | : | PA | | | Zip Cod | le: 19 | 027 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1 | . X | 2ND FRIDA PRIMARY | Y PRE- | 2 | | 30 DA | | Р | OST- | 3. | | AMENDM REPORT? | Yes | N | 0 | \ | |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4 | | 2ND FRIDA ELECTION | Y PRE | - 5 | | 30 DA | | Р | OST- | 6. | | TERMINA REPORT? | | Yes | ١ | 0 | √ |
| report type) | ANNUAL REP | ORT 7. | | Year 2015 | | | | | OHECK | | _ | | | PAPER | | \checkmark | DISK | ETTE | |
| Name of Office S | ought by Can | didate: | | | | | | | DATE | E OI | F ELE | CTIC | ON | District Number | Office Code | Par | ty Cod | e Cour | |
| SENATOR IN TH | HE GENERAL A | ΔSSEM | IRI Y | | | | | | МО | | DAY | YI | EAR | 1 | STS | DEN | 1 | 51 | |
| SERVITOR IN TI | TE GENERALE | NOOL! | | | | | | | | 11 | | 3 | 2015 | | (SEE INS | TRUCTI | ONS FO | CODES |) |
| Summary of Expenditures | | d | МО | DAY | YEAR | | | | МО | | DAY | Y | EAR | FO | R OFFIC | E USE | ONLY | 7 | |
| Expenditures | irom: | | | 1 1 | 20 |)15 | T | <u> </u> | | 3 | 3 | 30 | 2015 | | | | | | |
| A. Amount Bro | ught Forward | From I | Last Re | eport | | | | \$ | | | | 10, | 039.44 | | | | | | |
| B. Total Moneta | ary Contribution | ons An | d Rece | eipts (From | Sche | dule : | I) | \$ | | | | 47, | 100.07 | | | | | | |
| C. Total Funds | Available (Sui | m Of Li | ines A | and B) | | | | \$ | | | | 57, | 139.51 | | | | | | |
| D. Total Expend | ditures (From | Sched | ule III | 1) | | | | \$ | | | | 51,9 | 991.72 | | | | | | |
| E. Ending Cash | Balance (Sub | tract L | ine D | From Line | C) | | | \$ | | | | 5,1 | L47.79 | | | | | | |
| F. Value Of In- | Kind Contribut | tions R | eceive | ed (From S | chedul | e II) |) | \$ | | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Obligat | ions (F | rom S | chedule IV |) | | | \$ | | | | 35, | 150.00 | | | | | | |
| | | | | | AFF: | IDA' | VI | ΓSE | CTIO | N | | | | | | | | | |
| PART I - If this is | | = | - | _ | | | | | | | | | _ | | | | | | |
| I swear (or affirm) correct and comple | | t, includ | ing the | attached sc | nedules | filed | on | paper | or by el | lectr | onic me | edium | i, are to t | he best of | f my knov | /ledge | and be | lief , tr | ue |
| Sworn to and subs | cribed before me day of | e this | | 20 | | | | | | • | | 5 | Signature | of Person | n Submitt | ing Rep | ort | | _ |
| | Sig | nature | | | | | | - | | | | | | Print | ted Name | | | | |
| My Commission Ex | pires | | | | | | | _ | | - | | | | Emai | i | | | | |
| | МО | | DA | Υ | YR | | | | | | Are | ea Coo | de | Daytim | e Teleph | one Nu | mber | | |
| Part II- If this is | a report of a | candid | late's a | authorized | Comm | ittee | , Ca | andid | ate sh | all s | sign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | | t of my | knowle | dge and beli | ef this | politi | cal | comm | ittee ha | as no | ot violat | ed ar | ny provisi | ions of the | e act of Ju | ine 3,1 | 937 (P | .L. 133 | з, |
| Sworn to and subsc | | this | | 20 | | | | | | | | | Si | ignature o | of Candida | te | | | _ |
| - | day of | | | | | | | - | | | | | | Printe | d Name | | | | - |
| | Signat | ture | | | | | | - | | _ | | | | | | | | | _ |
| My Commission Exp | ires | | | | | | | | | | | | | Emai | il | | | | |
| | мо |) | DA | ΛY | YR | | | • | | | Area | Code | | Da | ytime Te | lephor | e Num | ber | _ |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | Period | | |
|---|-----------|---------|--------------|-----------|
| FRIENDS OF FARNESE | From: | 1/1/201 | <u>5</u> To: | 3/30/2015 |
| 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) | | | \$ | 450.00 |
| All Other Contributions (Part B) | | | \$ | 0.00 |
| TOTAL for the Reporting | Period | (2) | \$ | 450.00 |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 18,000.00 |
| All Other Contributions (Part D) | | | \$ | 28,650.00 |
| TOTAL for the Reporting | Period | (3) | \$ | 46,650.00 |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) | | | | |
| TOTAL for the Reporting | Period | (4) | \$ | 0.07 |
| | | | | |
| Total Monetary Contributions and Receipts During this Reporting Period (Add and totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1 | | | \$ | 47,100.07 |

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 | | | Report | Reporting Period | | | | | | |
|--|--------------------|---------------------------------|--------|------------------|-----------|-------------------------|----|-----------|--|--|
| FRIENDS OF FARNESE | | | From: | | 1/1/20 |) <u>15</u> To : | 1 | 3/30/2015 | | |
| ' | | | | | DATE AMOU | | | | | |
| Full Name of Contributing Committee PHILADELPHIA BUILDERS FOR AFFORDABLE HOUSING | | | | | DAY | YEAR | | | | |
| Mailing Address 1735 MAR | KET STREET SUITE 4 | 132A | | 2 | 25 | 2015 | \$ | 250.00 | | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 19103 |) | _ | 23 | 2013 | | | | |
| Full Name of Contributing Comm UNITED FOOD AND COMMERCIA | | ATIONAL UNION | МС |) | DAY | YEAR | | | | |
| Mailing Address 1775 K ST | REET, N.W. | | | 3 | 11 | 2015 | \$ | 200.00 | | |
| City WASHINGTON | State DC | Zip Code (Plus 4) 20006 | | J | | 2013 | | | | |

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

PAGE TOTAL450.00

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)

| (Exclus | de contributions no | in pontical comm | itte | .63 [6] | por teu | ili Pait | ~) | |
|--------------------------|---------------------|-------------------|------------------|---------|---------|------------|------------|------------|
| Name of Filing Committee | e or Candidate | | Reporting Period | | | | | |
| | | | From: To | | |) : | | |
| | | • | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) |) | | | | | |
| | | | | | | | | PAGE TOTAL |

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 | ng Period | | | | | |
|--|-------------------|--------------------------|------------|-----------|----------------|------|-----------|
| FRIENDS OF FARNESE | | | From: | 1/ | <u>/1/2015</u> | То: | 3/30/2015 |
| | | | | DA | TE | | AMOUNT |
| Full Name of Contributing Committee PA FRATERNAL ORDER OF POLICE PAC | | | | МО | DAY | YEAR | \$ 500.00 |
| Mailing Address 2949 N. FRONT STRE | EET | | | 1 | 24 | 2015 | , |
| City HARRISBURG | State PA | Zip Code 17110 | e (Plus 4) | _ | - | 2013 | |
| Full Name of Contributing Committee THE HUNTINGTON BANCSHARES INCOR | МО | DAY | YEAR | \$ 500.00 | | | |
| Mailing Address 41 S. HIGH STREET | | | | 1 | 24 | 2015 | |
| City COLUMBUS | State | Zip Code | e (Plus 4) | | | | |
| | ОН | 43212 | | | | | |
| Full Name of Contributing Committee PECOPAC | | | | МО | DAY | YEAR | \$ 500.00 |
| Mailing Address 2301 MARKET STREE | T, S15-1 | | | 3 | 11 | 2015 | |
| City PHILADELPHIA | State | Zip Code | e (Plus 4) | | | | |
| | PA | 19103 | | | | | |
| Full Name of Contributing Committee PENNSYLVANIA OPTOMETRIC POLITICA | L ACTION COMMITTE | E | | мо | DAY | YEAR | \$ 500.00 |
| Mailing Address 218 NORTH STREET | | | | 3 | 11 | 2015 | , |
| City HARRISBURG | State PA | Zip Code 17101 | e (Plus 4) | | | 2013 | |
| Full Name of Contributing Committee EXELONPAC | | | | мо | DAY | YEAR | \$ 500.00 |
| Mailing Address P.O. BOX 805379 | | | | 3 | 11 | 2015 | 300.00 |
| City CHICAGO | State | Zip Code | e (Plus 4) | | ** | 2013 | |
| | IL | 60680 | | | | | |
| Full Name of Contributing Committee PAMIC PAC | | | | мо | DAY | YEAR | \$ 500.00 |
| Mailing Address C/O STEVEN ELLIOT | TRES 1017 MUMMA | ROAD SU | ITE 103 | 3 | 11 | 2015 | 300.00 |
| City WORMLEYSBURG | State | Zip Code | e (Plus 4) | | '' | 2013 | |
| | PA | 17043 | | | | | |

| | | | | | | | 17.62 0 |
|--|--|--------------|-------------------|----------|----------|----------|-----------------|
| | Full Name of Contributing Committee INSURANCE AGENTS & DROKERS OF PA, INC. | | | | DAY | YEAR | |
| | 5050 RITTER ROAD | JF PA, INC. | | | | | \$ 500.0 |
| City MECHANICS | | State | Zip Code (Plus 4) | 3 | 11 | 2015 | |
| MECHANICS | BOUKG | PA | 17055 | | | | |
| | | ra . | 17033 | <u> </u> | <u> </u> | <u> </u> | 1 |
| Full Name of Contri VISION COMMITTE | • | | | мо | DAY | YEAR | |
| | 2205 STRAWBERRY S | SOLIADE | | | | | \$ 500.0 |
| City HARRISBUR | | State | Zip Code (Plus 4) | 3 | 11 | 2015 | |
| TIARRISBUR | .G | PA | 17101 | | | | |
| | | | 17101 | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
| Full Name of Contri | _ | | | мо | DAY | YEAR | |
| 100 SOUTH STREET | | | | | | | \$ 500.0 |
| | PABAR PAC P.O. BO | T . | | 3 | 11 | 2015 | |
| City HARRISBUR | kG | State | Zip Code (Plus 4) | | | | |
| | | PA | 17108 | | | | 1 |
| Full Name of Contri | buting Committee | | | МО | DAY | YEAR | |
| 1776 P.A.C. | 776 P.A.C. | | | | | | \$ 1,000.0 |
| Mailing Address | 3031 A. WALTON RO | AD STE 201 | | 3 | 11 | 2015 | |
| City PLYMOUTH | MEETING | State | Zip Code (Plus 4) | | | | |
| | | PA | 19462 | | | | |
| Full Name of Contri | buting Committee | | | | | \ | |
| APSCUF/CAP-PA | | | | МО | DAY | YEAR | \$ 1,000.0 |
| Mailing Address | 319 N. FRONT STREE | T | | 3 | 11 | 2015 | 1,000.0 |
| City HARRISBUR | lG | State | Zip Code (Plus 4) |] | '' | 2013 | |
| | | PA | 17101 | | | | |
| Full Name of Contri | huting Committee | | | | | | Ī |
| THE PENNSYLVANI | _ | | | МО | DAY | YEAR | |
| Mailing Address | 1600 MARKET STREE | T SUITE 1720 | | _ | | | \$ 500.0 |
| City PHILADELPH | HIA | State | Zip Code (Plus 4) | 3 | 11 | 2015 | |
| | | PA | 19103 | | | | |
| Full Name of Contri | huting Committee | | | | | 1 | <u> </u> |
| VALUE DRUG COM | • | | | МО | DAY | YEAR | 500.0 |
| Mailing Address | 1 GOLFVIEW DRIVE | | | | | | \$ 500.0 |
| City ALTOONA | | State | Zip Code (Plus 4) | 3 | 11 | 2015 | |
| , ALIGORA | | PA | 166019311 | | | | |
| | | | | | <u> </u> | <u>'</u> | <u>'</u> I |
| Full Name of Contributing Committee PENN NATIONAL INSURANCE/INSERVCO PAC | | мо | DAY | YEAR | | | |
| Mailing Address 2 NORTH 2ND STREET 14TH FLOOR | | | | | \$ 500.0 | | |
| | | State | Zip Code (Plus 4) | 3 | 11 | 2015 | |
| City HARRISBUR | .G | PA | 171012361 | | | | |
| | | ' ^ | 1/1012301 | I | I | I | I |

| Full Name of Contributing Con POLITICAL LABOR ACTION-N | | | МО | DAY | YEAR | <u>_</u> | F00 00 |
|--|---|--|-----------|--------------|------------------|-----------|----------|
| Mailing Address 904 N. 2N | D STREET | | 2 | 11 | 2015 | \$ | 500.00 |
| City HARRISBURG | State | Zip Code (Plus 4) | 3 | 11 | 2015 | | |
| | PA | 17102 | | | | | |
| Full Name of Contributing Con | ımittee | | МО | DAY | YEAR | \$ | 1,000.00 |
| Mailing Address 20 N. MAR | RKET SQUARE SUITE 800 | | 3 | 11 | 2015 | 1 * | 1,000.00 |
| City HARRISBURG | State | Zip Code (Plus 4) |] | '' | 2013 | | |
| | PA | 17101 | | | | | |
| Full Name of Contributing Con | | | МО | DAY | YEAR | | |
| Mailing Address 1816 CHESTNUT STREET | | | | | | \$ | 1,000.00 |
| ty PHILADELPHIA State Zip Code (Plus 4) | | 3 | 11 | 2015 | | | |
| ore, This is a line | PA | 19103 | | | | | |
| Full Name of Contributing Con | | | МО | DAY | YEAR | | |
| PLUMBERS UNION LOCAL 690 Mailing Address | | 3 | 11 | 2015 | \$ | 2,000.00 | |
| City PHILADELPHIA | State | Zip Code (Plus 4) | - | | | | |
| | PA | 19154 | | | | | |
| Full Name of Contributing Con INT'L UNION OF OPERATING | | OLITICA | МО | DAY | YEAR | \$ | 1,000.00 |
| Mailing Address 1375 VIRO | GINIA DRIVE SUITE 100 | | 3 | 11 | 2015 |] ` | _, |
| City FORT WASHINGTON | State | Zip Code (Plus 4) |] | | 2015 | | |
| | | ' ' ' | 1 | 1 | | | |
| | PA | 19034 | | | | | |
| Full Name of Contributing Con | | 19034 | мо | DAY | YEAR | | 500.00 |
| Full Name of Contributing Con | | 19034 | | | | \$ | 500.00 |
| Full Name of Contributing Con | nmittee | 19034 Zip Code (Plus 4) | мо 3 | DAY 11 | YEAR 2015 | . \$ | 500.00 |
| Full Name of Contributing Con PHARMPAC Mailing Address 508 NORT | nmittee H THIRD STREET | | | | | \$ | 500.00 |
| Full Name of Contributing Con PHARMPAC Mailing Address 508 NORT | H THIRD STREET State PA | Zip Code (Plus 4) | | | | | |
| Full Name of Contributing Con PHARMPAC Mailing Address 508 NORT City HARRISBURG Full Name of Contributing Con PA REALTORS POLITICAL ACT | H THIRD STREET State PA | Zip Code (Plus 4) | . 3 | 11 DAY | 2015 YEAR | , \$ | 500.00 |
| Full Name of Contributing Con PHARMPAC Mailing Address 508 NORT City HARRISBURG Full Name of Contributing Con PA REALTORS POLITICAL ACT | H THIRD STREET State PA mmittee FION COMMITTEE | Zip Code (Plus 4) | 3 | 11 | 2015 | | |
| Full Name of Contributing Con PHARMPAC Mailing Address 508 NORT City HARRISBURG Full Name of Contributing Con PA REALTORS POLITICAL ACT Mailing Address 500 N. 12 | TH STREET State PA PA PION COMMITTEE TH STREET | Zip Code (Plus 4) 17101 | . 3 | 11 DAY | 2015 YEAR | | |
| Full Name of Contributing Con PHARMPAC Mailing Address 508 NORT City HARRISBURG Full Name of Contributing Con PA REALTORS POLITICAL ACT Mailing Address 500 N. 12 | TH THIRD STREET State PA PA THIRD STREET State PA THE STREET State PA | Zip Code (Plus 4) 17101 Zip Code (Plus 4) | . 3 | 11 DAY | 2015 YEAR | \$ | 500.00 |
| Full Name of Contributing Contributing Address 508 NORT City HARRISBURG Full Name of Contributing Contributing Contributing Address 500 N. 12 City LEMOYNE Full Name of Contributing Cont | TH THIRD STREET State PA PA THIRD STREET State PA THE STREET State PA | Zip Code (Plus 4) 17101 Zip Code (Plus 4) 17043 | мо - 3 | DAY 11 DAY | 2015 YEAR 2015 | | |
| Full Name of Contributing Contributing Contributing Address 508 NORT City HARRISBURG Full Name of Contributing Contributing Contributing Address 500 N. 12 City LEMOYNE Full Name of Contributing Co | TH THIRD STREET State PA PA THE STREET State TH STREET State PA PA PA | Zip Code (Plus 4) 17101 Zip Code (Plus 4) 17043 | мо - 3 | 11 DAY | 2015 YEAR 2015 | \$ | 500.00 |

| Full Name of Contributing Committee | | | мо | DAY | YEAR | |
|---|---|---------------------------------|-----------|------------|------------------|------------------------|
| FIRST PAC | | | 140 | | ILAK | \$ 500.00 |
| Mailing Address P.O. BOX 5319 | | | 3 | 11 | 2015 | 300.00 |
| City HARRISBURG | State | Zip Code (Plus 4) |] | 1 | 2013 | |
| | PA | 171105319 | | | | |
| Full Name of Contributing Committee | • | | мо | DAY | YEAR | |
| GGR, INC. PAC | | | 140 | | ILAK | \$ 500.00 |
| Mailing Address 212 LOCUST STREET SUITE 600 | | | | 11 | 2015 | 300.00 |
| City HARRISBURG | State | Zip Code (Plus 4) | 3 | 1 | 2013 | |
| | PA | 17101 | | | | |
| Full Name of Contributing Committee | | | | DAY | YEAR | |
| CRISCI ASSOCIATES PAC | | | | | ILAK | \$ 500.00 |
| Mailing Address 204 STATE STREET | | | 3 | 11 | 2015 | 300.00 |
| City HARRISBURG | State | Zip Code (Plus 4) |] | | 2015 | |
| | PA | 17101 | | | | |
| | | | | | | |
| Full Name of Contributing Committee | | | МО | DAY | YEAR | |
| Full Name of Contributing Committee PPFFA PAC-FUND | | | МО | DAY | YEAR | \$ 500.00 |
| _ | STREET SUITE 403 | | | DAY 11 | | \$ 500.00 |
| PPFFA PAC-FUND | STREET SUITE 403 | Zip Code (Plus 4) | MO | | YEAR 2015 | \$ 500.00 |
| PPFFA PAC-FUND Mailing Address 240 NORTH THIRD S | T | Zip Code (Plus 4) 17101 | | | | \$ 500.00 |
| PPFFA PAC-FUND Mailing Address 240 NORTH THIRD S | State | | . 3 | 11 | 2015 | \$ 500.00 |
| PPFFA PAC-FUND Mailing Address 240 NORTH THIRD S City HARRISBURG | State PA | | | | | |
| PPFFA PAC-FUND Mailing Address 240 NORTH THIRD S City HARRISBURG Full Name of Contributing Committee | State PA INSYLVANIA | | . 3 | DAY | 2015 YEAR | \$ 500.00 \$ 500.00 |
| PPFFA PAC-FUND Mailing Address 240 NORTH THIRD S City HARRISBURG Full Name of Contributing Committee CENTURYLINK EMPLOYEES' PAC OF PEN | State PA INSYLVANIA | | . 3 | 11 | 2015 | |
| PPFFA PAC-FUND Mailing Address 240 NORTH THIRD S City HARRISBURG Full Name of Contributing Committee CENTURYLINK EMPLOYEES' PAC OF PEN Mailing Address 240 NORTH 3RD STI | State PA INSYLVANIA REET SUITE 300 | 17101 | . 3 | DAY | 2015 YEAR | |
| PPFFA PAC-FUND Mailing Address 240 NORTH THIRD S City HARRISBURG Full Name of Contributing Committee CENTURYLINK EMPLOYEES' PAC OF PEN Mailing Address 240 NORTH 3RD STI | State PA INSYLVANIA REET SUITE 300 State | 17101 Zip Code (Plus 4) | мо . 3 | 11 DAY 11 | 2015 YEAR 2015 | |
| PPFFA PAC-FUND Mailing Address 240 NORTH THIRD S City HARRISBURG Full Name of Contributing Committee CENTURYLINK EMPLOYEES' PAC OF PEN Mailing Address 240 NORTH 3RD STI City HARRISBURG | State PA INSYLVANIA REET SUITE 300 State | 17101 Zip Code (Plus 4) | . 3 | DAY | 2015 YEAR | \$ 500.00 |
| PPFFA PAC-FUND Mailing Address 240 NORTH THIRD S City HARRISBURG Full Name of Contributing Committee CENTURYLINK EMPLOYEES' PAC OF PEN Mailing Address 240 NORTH 3RD STI City HARRISBURG Full Name of Contributing Committee | State PA INSYLVANIA REET SUITE 300 State PA | 17101 Zip Code (Plus 4) | мо . 3 | DAY 11 DAY | 2015 YEAR 2015 | |
| PPFFA PAC-FUND Mailing Address 240 NORTH THIRD S City HARRISBURG Full Name of Contributing Committee CENTURYLINK EMPLOYEES' PAC OF PEN Mailing Address 240 NORTH 3RD STI City HARRISBURG Full Name of Contributing Committee AFSCME COUNCIL 13 | State PA INSYLVANIA REET SUITE 300 State PA | 17101 Zip Code (Plus 4) | мо . 3 | 11 DAY 11 | 2015 YEAR 2015 | \$ 500.00 |
| PPFFA PAC-FUND Mailing Address 240 NORTH THIRD S City HARRISBURG Full Name of Contributing Committee CENTURYLINK EMPLOYEES' PAC OF PEN Mailing Address 240 NORTH 3RD STI City HARRISBURG Full Name of Contributing Committee AFSCME COUNCIL 13 Mailing Address 4031 EXECUTIVE PA | State PA INSYLVANIA REET SUITE 300 State PA RK DRIVE | 17101 Zip Code (Plus 4) 17101 | мо . 3 | DAY 11 DAY | 2015 YEAR 2015 | \$ 500.00 |

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

PAGE TOTAL 18,000.00

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 Candidate | | | | eporting Period | | | | | |
|---|------------------|---------------|-------|-------------------|--------------|---------------|-------------------|-------------------|--|
| FRIENDS OF FARNESE | | | Fron | n: | <u>1/1/2</u> | <u>015</u> To | : <u>3</u> | 3/30/201 <u>5</u> | |
| | | | | D/ | ATE | | АМО | UNT | |
| Full Name of Contributor | | | | мо | DAY | YEAR | | | |
| LORRAINE BROWN | | | | MO | DAT | ILAK | \$ | 2,500.00 | |
| Mailing Address 17 SPRINGHOUSE L | ANE | | | 1 | 24 | 2015 | | | |
| City NEWTOWN | State | Zip Code (Plu | s 4) |] | 2 ' | 2013 | | | |
| | PA | 19073 | | | | | | | |
| Employer Name THE TEMPLE GROUP | | | | Occupat | tion | CEO | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | | | State | | Zip Code (Plus 4) | | |
| 230 SOUTH BROAD STREETSUITE 1101 | | PHILADE | LPHIA | | PA | | 19102 | | |
| Full Name of Contributor | | <u>-</u> | | мо | DAY | YEAR | | 2 000 00 | |
| CHADWICK S. SMITH | | | | 140 | DAI | ILAK | \$ | 2,000.00 | |
| Mailing Address 767 BEVERSREDE TRL | | | | 2 | 6 | 2015 | | | |
| City WEST CHESTER | State | Zip Code (Plu | s 4) | | | | | | |
| | PA | 19382 | | | | | | | |
| Employer Name STULL INVESTMENTS, | LP | | | Occupat | tion | MANAG | ING PARTN | ER | |
| Employer Mailing Address/Principal Plac | e of Business | City | | | State | | Zip Code (| Plus 4) | |
| 100 LAKESIDE LANE | | MEDIA | | | PA | | 19063 | | |
| Full Name of Contributor | | | | | | V=45 | | | |
| MATTHEW S. PAPPAJOHN | | | | МО | DAY | YEAR | \$ | 1,000.00 | |
| Mailing Address 1118 E MONTGOME | RY AVENUE | | | 2 | 6 | 2015 | 7 | | |
| City PHILADELPHIA | State | Zip Code (Plu | s 4) |] [| | 2013 | Ī | | |
| | PA | 19125 | | | | | 1 | | |
| Employer Name PAPPAJOHN WOODWO | RKING | | | Occupat | tion | OWNER | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | | | State | | Zip Code (| Plus 4) | |
| 1118 E MONTGOMERY AVENUE | | PHILADE | LPHIA | | PA | | 19125 | | |
| Full Name of Contributor | | | | 140 | DAY | VEAD | | | |
| ARTHUR KEEGAN | | | | МО | DAY | YEAR | \$ | 300.00 | |
| Mailing Address 218 W. EUCLID AVE | | | | 2 | 6 | 2015 | | | |
| City HADDONFIELD | State | Zip Code (Plu | s 4) | [[| | | | | |
| | NJ | 08033 | | | <u> </u> | | <u> </u> | | |
| Employer Name NO INFORMATION-BE | ST EFFORTS TO OB | ΓAIN | | Occupation | | | | | |
| Employer Mailing Address/Principal Place of Business City | | | | State Zip Code (F | | | Plus 4) | | |
| | | | | | 1 | | | | |

| Full Name of Contributor | | | | мо | DAY | YEAR | | 1 000 00 |
|---|-----------------|----|-----------------|---|----------|----------|-------------|----------|
| 1311 SPRUCE STREET PARTNERS LP | | | | 1.10 | DAI | ILAK | \$ | 1,000.00 |
| Mailing Address 2424 EAST YORK S | TREET SUITE 216 | | | 2 | 6 | 2015 | | |
| City PHILADELPHIA | State | Zi | p Code (Plus 4) | | | | | |
| | PA | 19 | 125 | | | | | |
| Employer Name | | | | Occupat | ion | | | |
| Employer Mailing Address/Principal Plac | ce of Business | | City | | State | | Zip Code | (Plus 4) |
| | | | | | | | | |
| Full Name of Contributor | | | | МО | DAY | YEAR | | 1 000 00 |
| QUEEN VILLAGE LOFTS, LP | | | | 1-10 | DAI | ILAK | \$ | 1,000.00 |
| Mailing Address 2424 EAST YORK S | TREET SUITE 216 | | | 2 | 6 | 2015 | | |
| City PHILADELPHIA | State | Zi | p Code (Plus 4) | | | | | |
| | PA | 19 | 125 | | | | | |
| Employer Name | | | | Occupat | ion | | | |
| Employer Mailing Address/Principal Plac | ce of Business | | City | | State | | Zip Code | (Plus 4) |
| | | | | | | | | |
| Full Name of Contributor | | | | мо | DAY | YEAR | | |
| CHRISTOPHER SOMERS | | | | MO | DAT | TEAR | \$ | 1,000.00 |
| Mailing Address 837 NORTH 2ND ST | REET | | | 2 | 6 | 2015 | | |
| City PHILADELPHIA | State | Zi | p Code (Plus 4) |] - | | 2013 | | |
| | PA | 19 | 123 | | | | | |
| Employer Name REMAX | | | | Occupat | ion | REALTO | R | |
| Employer Mailing Address/Principal Place of Business City | | | | | State | | Zip Code | (Plus 4) |
| 1033 NORTH 2ND ST PHILADELPHIA | | | | | PA | | 19123 | |
| Full Name of Contributor | | | | | | | | |
| KEVIN R. BAIRD | | | | МО | DAY | YEAR | \$ | 1,000.00 |
| Mailing Address 2612 ELLSWORTH S | STREET | | | 2 | 6 | 2015 | | |
| City PHILADELPHIA | State | Zi | p Code (Plus 4) |] [| 0 | 2013 | | |
| | PA | 19 | 9146 | | | | | |
| Employer Name KRB PROPERTIES | | | | Occupat | ion | PRESID | ENT | |
| Employer Mailing Address/Principal Plac | ce of Business | | City | | State | | Zip Code | (Plus 4) |
| 2612 ELLSWORTH STREET | | | PHILADELPHIA | | PA | | 19146 | |
| Full Name of Contributor | | | | | | | | |
| WHARTON STREET LOFTS, LP | | | | МО | DAY | YEAR | \$ | 2,000.00 |
| Mailing Address 2424 E. YORK STRE | ET SUITE 216 | | | 2 | 6 | 2015 | | |
| City PHILADELPHIA | State | Zi | p Code (Plus 4) |] [| 0 | 2013 | | |
| | PA | 19 | 125 | | | | | |
| Employer Name | | | | Occupat | ion | | | |
| Employer Mailing Address/Principal Plac | ce of Business | | City | | State | | Zip Code | (Plus 4) |
| | | | | | | | | |
| Full Name of Contributor | | | | 110 | DAW | V= - | | |
| GARY A. JONAS | | | | МО | DAY | YEAR | \$ | 4,000.00 |
| Mailing Address 305 JULIAN COURT | | | | 2 | 6 | 2015 | | |
| City PLYMOUTH MEETING | State | Zi | p Code (Plus 4) |] [| 0 | 2013 | | |
| | PA | 19 | 9462 | <u> </u> | <u> </u> | <u> </u> | <u> </u> | |
| Employer Name ADVANCED MORTGAGE CONCEPTS | | | Occupat | ion | OWNER | | | |
| Employer Mailing Address/Principal Plac | ce of Business | | City | | State | | Zip Code | (Plus 4) |
| 101 E. 8TH AVESUITE 310 | | | CONSHOHOCKE | N | PA | | 19428 | |
| | | | | | <u> </u> | | | |

| Full Name of Contributor | | | | мо | DAY | YEAR | \$ | 2,000.00 |
|---|---|------|-----------------|---------|--------|----------|----------|----------|
| JASON A. NUSBAUM | | | | | | | 1 | _,000.00 |
| Mailing Address 1824 SPRUCE STR | EET SUITE 100 | | | 2 | 6 | 2015 | 1 | |
| City PHILADELPHIA | State | Zi | p Code (Plus 4) | | | | | |
| | PA | 19 | 9103 | | | | l | |
| Employer Name CITY LIVING | | | | Occupat | ion | OWNER | | |
| Employer Mailing Address/Principal Pla | ace of Business | | City | | State | | Zip Code | (Plus 4) |
| 1824 SPRUCE STREETSUITE 100 | | | PHILADELPHIA | | PA | | 19103 | |
| Full Name of Contributor | | | | МО | DAY | YEAR | \$ | 1,000.00 |
| DILWORTH PAXSON LLP | | | | | | | <u> </u> | 1,000.00 |
| Mailing Address 1500 MARKET STR | EET SUITE 3500E | | | 2 | 25 | 2015 | 1 | |
| City PHILADELPHIA | State | Zi | p Code (Plus 4) | | | | | |
| | PA | 19 | 9102 | | | | ļ | |
| mployer Name | | | Occupat | ion | | | | |
| Employer Mailing Address/Principal Place of Business City | | | | State | | Zip Code | (Plus 4) | |
| | | | | | PA | | | |
| Full Name of Contributor | | | | мо | DAY | YEAR | \$ | 2,500.00 |
| ANDREW B. SACKS | | | | | | |] * | 2,300.00 |
| Mailing Address 114 YORK ROAD | | | | 2 | 25 | 2015 | | |
| City JENKINTOWN | State | Zi | p Code (Plus 4) | | | | | |
| | PA | 19 | 9046 | | | | 1 | |
| Employer Name SACKS WESTON PET | RELLI DIAMOND &an | np; | MILLSTEIN, LLC | Occupat | ion | ATTORN | IEY | |
| Employer Mailing Address/Principal Pla | ace of Business | | City | | State | | Zip Code | (Plus 4) |
| 1845 WALNUT STREETSUITE 1600 | | | PHILADELPHIA | | PA | | 19103 | |
| Full Name of Contributor | | | | | | | | |
| THOMAS J. PETRELLI, JR. | | | | МО | DAY | YEAR | \$ | 1,000.00 |
| Mailing Address 1616 WALNUT ST | REET SUITE 2323 | | | _ | | | 1 | |
| City PHILADELPHIA | State | Zi | p Code (Plus 4) | 2 | 25 | 2015 | | |
| - | PA | | 9103 | | | | | |
| Employer Name SELF-EMPLOYED | 1177 | | .103 | Occupat | ion | ATTORN | IFY | |
| Employer Mailing Address/Principal Pla | oce of Rusiness | | City | Тоссири | State | ATTORIN | | (Plus 4) |
| | ice of business | | PHILADELPHIA | | PA | | 19103 | (1143 4) |
| 1616 WALNUT STREETSUITE 2323 | | | PHILADELPHIA | | PA | | 19103 | |
| Full Name of Contributor | | | | мо | DAY | YEAR | \$ | 1,000.00 |
| SAVAS TSITIRIDIS Mailing Address 4536 NORTH FLST | ON AVENUE | | | | | | - | |
| 5 1000 1101111 2201 | State | 7: | p Code (Plus 4) | 3 | 11 | 2015 | | |
| City CHICAGO | 1 | · ' | , , | | | | | |
| | IL | 1 60 | 0630 | | • | | I | |
| Employer Name DISPATCH TAXI, LLC | | | Г | Occupat | 1 | MANAG | NG MEMI | |
| Employer Mailing Address/Principal Pla | ace of Business | | City | | State | | - | (Plus 4) |
| 4536 NORTH ELSTON AVENUE | | | CHICAGO | | IL | | 60630 | |
| Full Name of Contributor | | | | МО | DAY | YEAR | \$ | 1,000.00 |
| CHRISTOPHER KEITH | | | | | | | 4 | _, |
| Mailing Address 103 DELAWARE CI | 1 | | | 3 | 11 | 2015 | 1 | |
| City WOOLWICH TWP | State | Zi | p Code (Plus 4) | | | | | |
| | l NJ | 90 | 3085 | | | | ı | |
| Employer Name LOCKTON COMPANIES | | | Occupat | ion | PRESID | ENT | | |
| Employer Mailing Address/Principal Pla | Employer Mailing Address/Principal Place of Business City | | | | State | | Zip Code | (Plus 4) |
| 751 ARBOR WAY | | | BLUE BELL | | PA | | 19422 | |
| | | | | | | | | |

| Full Name of Contributor | | | | | DAY | YEAR | | |
|---|---|-------------------|-----------------|---------|-------|----------|----------|----------|
| PAUL MARKOWICH | | | | МО | DAT | TEAR | \$ | 350.00 |
| Mailing Address 319 FULTON STR | EET | | | 3 | 11 | 2015 | | |
| City PHILADELPHIA | State | Zip Code (Plus 4) | |] | | 2013 | | |
| | PA | 19147 | | | | | | |
| Employer Name FIRST TRUST FINANCIAL RESOURCES | | | | Occupat | ion : | SENIOR | VICE PRE | SIDENT |
| Employer Mailing Address/Principal Place of Business City | | | | State | | Zip Code | (Plus 4) | |
| 1818 MARKET STREET, #23 PHILADELPHIA | | | | | PA | | 19103 | |
| Full Name of Contributor | | | | мо | DAY | YEAR | | 4 000 00 |
| EVERETT M. ABITBOL | | | | 140 | DAI | ILAK | \$ | 4,000.00 |
| Mailing Address 1425 LOCUST ST | REET UNIT 6B | | | 3 | 11 | 2015 | | |
| City PHILADELPHIA | State | Zi | p Code (Plus 4) | | | | | |
| | PA | 19 | 9102 | | | | | |
| Employer Name FREEDOM TAXI | | | | Occupat | ion (| OWNER | | |
| Employer Mailing Address/Principal P | Employer Mailing Address/Principal Place of Business City | | | | State | | Zip Code | (Plus 4) |
| 351 S. SWANSON STREET PHILADELPHIA | | | | PA | | 19148 | | |
| | | | | | | - | | |

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

PAGE TOTAL \$ 28,650.00

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 Candidate Rep | | | | orting Period | | | | | |
|---|---------------------|------------|---------|---------------|---------|--------------|----|------------|--|
| FRIENDS OF FARNESE | | | From: | | 1/1/201 | <u>5</u> To: | | 3/30/2015 | |
| | | | | D | ATE | | | AMOUNT | |
| Full Name | | | | мо | DAY | YEAR | \$ | 0.04 | |
| HYPERION BANK | | | | | | | | | |
| Mailing Address 199 WEST GIRARD AV | /ENUE | | | 1 | 31 | 2015 | 5 | | |
| City PHILADELPHIA | State | Zip Code (| Plus 4) | | | | | | |
| | PA | 19123 | | | | | | | |
| Receipt Description INTEREST INCOM | ИЕ | • | | | | | | | |
| Full Name | | | | мо | DAY | YEAR | \$ | 0.03 | |
| HYPERION BANK | | | | МО | DAT | TEAK | * | 0.03 | |
| Mailing Address 199 WEST GIRARD AV | /ENUE | | | 2 | 28 | 2015 | | | |
| City PHILADELPHIA | State | Zip Code (| Plus 4) | 2 | 20 | 2013 | ` | | |
| | PA | 19123 | | | | | | | |
| Receipt Description INTEREST INCOM | ME | • | | | | | • | | |
| | | _ | | _ | | ſ | | PAGE TOTAL | |
| Enter Grand Total of Part E on Schedu | ie 1, Detailed Sumn | nary Page, | Section | 4. | | | \$ | 0.07 | |

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 | | | | | | |
|--|-----------------|----------------------------|------------------|--|--|--|--|--|
| FRIENDS OF FARNESE | From: | <u>1/1/2015</u> To: | <u>3/30/2015</u> | | | | | |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR | | | | | | | | |
| TOTAL for the Reporting Pe | eriod (1) | \$ | 0.00 | | | | | |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candidate | | | Reporting Period | | | | | |
|---------------------------------------|------------------|----------------------|------------------|----------|------|-------------|-----------|------|
| F | | | From: | | | То: | | |
| | | | | DATE | | | AMOUNT | |
| Full Name of Contributor | | | МО | DAY | YEAR | | | |
| Mailing Address | | | | | | 7 \$ | | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | | |
| Description of Contribution: | - | - | • | • | • | | | |
| | | | | | | | | |
| Enter Grand Total of Part F on Sche | dule II, In-Kind | d Contributions Deta | iled Sum | mary Pag | ge, | | PAGE TOTA | L |
| Section 2. | | | | | | \$ | | 0.00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | | | Reporting Period | | | | | | | |
|---|----------------|-------|------------------|--------|-------------------|----------------|-------|------|-----------------|-------|
| | | | Fro | m: | То: | | | | | |
| | | | | | | DATE | | | AMOUN | IT |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | | | 1 | \$ | 0.00 |
| City | State | | Zip Code(Plus 4) | | | | | | | |
| Employer of Contributor | | | | | Occup | oation | | | | |
| Employer Mailing Address/Principal Place of Business City | | | ty | Stat | e Zi _l | p Code(Plus 4) | Descr | ipti | ion of Contribu | ution |
| Enter Grand Total of Part G on Sch | edule II. In-K | ind (| Contributions D | etaile | ed | | | | PAGE T | OTAL |
| Summary Page, Section 3. | | | | | - | | | | | 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting Per | riod | | |
|---------------------------------------|---------------|----------|-----|------------------|
| FRIENDS OF FARNESE | From | 1/1/2015 | То: | <u>3/30/2015</u> |

| | | | | DATE | | | AMOUNT | | | | |
|---|---------------|-------------------|----------------------------|-------------|----------|----|----------|--|--|--|--|
| To Whom Paid | | | МО | DAY | YEAR | | | | | | |
| ST. MONICA'S FATHER & amp; SO | ONS | | | | | | | | | | |
| Mailing Address 2422 SOUTH | 17TH STREET | | 1 | 9 | 2015 | \$ | 100.00 | | | | |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | | |
| | PA | 19145 | DONAT | ION | | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | | |
| SOUTH PHILLY VIKINGS N.Y.B. | | | MO | DAI | ILAK | | | | | | |
| Mailing Address 1815 S. 11TH | I STREET | | 1 | 13 | 2015 | \$ | 500.00 | | | | |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | | |
| | PA | 19148 | DONAT | ION | | | | | | | |
| To Whom Paid | | | МО | DAY | YEAR | | | | | | |
| STRATEGIC AFFAIRS CONSULTIN | NG . | | MO | DAI | ILAK | | | | | | |
| Mailing Address 1130 MARLBO | DROUGH STREET | | 1 | 16 | 2015 | \$ | 5,500.00 | | | | |
| City PHILADELPHIA State Zip Code (Plus 4) | | | Descrip | tion of Exp | enditure | | | | | | |
| | PA | 19125 | CONSU | LTING FEE | | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | | |
| CARDMEMBER SERVICE | | | МО | DAT | TEAK | | | | | | |
| Mailing Address P.O. BOX 790 | 408 | | 1 | 16 | 2015 | \$ | 2,000.00 | | | | |
| City ST. LOUIS | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | | |
| | МО | 63179 | CREDIT | CARD | | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | | |
| SEVEN POINTS CONSULTING, LL | С | | 140 | JA. | ILAK | | | | | | |
| Mailing Address P.O. BOX 391 | | | 1 | 16 | 2015 | \$ | 1,500.00 | | | | |
| City HARRISBURG | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | | |
| | PA | 17108 | CONSULTING FEE | | | | | | | | |
| To Whom Paid | | | МО | DAY | YEAR | | | | | | |
| STRATEGIC AFFAIRS CONSULTIN | NG | | 140 | DAT | ILAK | | | | | | |
| Mailing Address 1130 MARLBO | DROUGH STREET | | 2 | 4 | 2015 | \$ | 6,425.00 | | | | |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | | |
| | PA | 19125 | CONSU | LTING FEE | | | | | | | |
| | - | • | - | | | | | | | | |

| | | | | | | PAGE | 18 | | | | |
|---|-------------|-------------------|----------------------------|----------------------------|----------|------|----------|--|--|--|--|
| To Whom Paid | | | мо | DAY | YEAR | | | | | | |
| THE WS GROUP | 1-10 | | 1 = Aux | | | | | | | | |
| Mailing Address P.O. BOX 391 | | | 2 | 17 | 2015 | \$ | 3,000.00 | | | | |
| City HARRISBURG | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | | |
| | PA | 17108 | CONSU | LTING FEE | | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | | |
| CARDMEMBER SERVICE | | | MO | | ILAK | | | | | | |
| Mailing Address P.O. BOX 790408 | | | 2 | 24 | 2015 | \$ | 1,000.00 | | | | |
| City ST. LOUIS State Zip Code (Plus 4) | | | | Description of Expenditure | | | | | | | |
| | МО | 63179 | CREDIT | CARD | | | | | | | |
| To Whom Paid | | | МО | DAY | YEAR | | | | | | |
| STAN FIELD | | | МО | DAY | TEAK | | | | | | |
| Mailing Address 1420 LOCUST STRE | EET APT 15K | | 2 | 24 | 2015 | \$ | 100.00 | | | | |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | | |
| | PA | 19102 | VOLUNT | TEER STIPE | END | | | | | | |
| To Whom Paid | • | • | | | | | | | | | |
| FRALINGER STRING BAND | | | МО | DAY | YEAR | | | | | | |
| Mailing Address 39 CRIMSON COUR | T EAST | | 2 | 24 | 2015 | \$ | 100.00 | | | | |
| City SEWELL State Zip Code (Plus 4) | | | | tion of Exp | enditure | | | | | | |
| | LNJ | 08080 | DONATION | | | | | | | | |
| To Whom Paid | | | | l _{DAY} | VEAD | | | | | | |
| SOUTH PHILADELPHIA BUSINESS ASS | OCIATION | | МО | DAY | YEAR | | | | | | |
| Mailing Address P.O. BOX 31425 | | | 2 | 24 | 2015 | \$ | 250.00 | | | | |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | | |
| | PA | 19147 | DONATI | ION | | | | | | | |
| To Whom Paid | | | | DAY | VEAD | | | | | | |
| FRIENDS OF HELEN GYM | | | МО | DAY | YEAR | | | | | | |
| Mailing Address P.O. BOX 11766 | | | 3 | 2 | 2015 | \$ | 1,000.00 | | | | |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | | |
| | PA | 19101 | DONATI | ION | | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | | |
| FRIENDS OF BLONDELL REYNOLDS BR | OWN | | | | | | | | | | |
| Mailing Address P.O. BOX 22556 | | | 3 | 2 | 2015 | \$ | 1,000.00 | | | | |
| City PHILADELPHIA State Zip Code (Plus 4) | | | Descrip | tion of Exp | enditure | | | | | | |
| PA 19102 | | | | ION | | | | | | | |
| To Whom Paid | | | | DAY | YEAR | | | | | | |
| WILLIAMS FOR MAYOR | | | МО | | LAK | | | | | | |
| Mailing Address P.O. BOX 34845 | | | 3 | 6 | 2015 | \$ | 7,000.00 | | | | |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | | |
| | PA | 19101 | DONATI | ION | | | | | | | |
| | | | | | | | | | | | |

| | | | | | | | OL 19 | | | |
|---|----------------|-------------------|--|----------------------------|---------------|----------|-----------|--|--|--|
| To Whom Paid | | | МО | DAY | YEAR | | | | | |
| SD ASSOCIATES, P.C. Mailing Address 300 YORKTOWN P | 1.0.7.0 | | - | 12 | 2015 | \$ | 1,000.00 | | | |
| | 1 | 1 | 3 | 12 | 2015 | т | 1,000.00 | | | |
| City ELKINS PARK | State | Zip Code (Plus 4) | Description of Expenditure ACCOUNTING SERVICES | | | | | | | |
| | PA | 19027 | ACCOU | NTING SER | RVICES | | | | | |
| To Whom Paid PHILADELPHIA READS | | | мо | DAY | YEAR | | | | | |
| | DEET CHITE 002 | | 3 | 12 | 2015 | \$ | 50.00 | | | |
| | 1 | 1 | | | | | | | | |
| City PHILADELPHIA State Zip Code (Plus 4) | | | | Description of Expenditure | | | | | | |
| | PA | 19106 | DONATI | ION | | | | | | |
| To Whom Paid PHILADELPHIA PERFORMING ARTS CI | МО | DAY | YEAR | | | | | | | |
| Mailing Address 1600 VINE STREE | Г | | 3 | 12 | 2015 | \$ | 50.00 | | | |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | |
| | PA | 19102 | DONATI | ION | | | | | | |
| To Whom Paid | | | МО | DAY | YEAR | | | | | |
| METHODIST HOSPITAL FOUNDATION | | | MO | DAT | TEAR | | | | | |
| Mailing Address 2301 SOUTH BROA | AD STREET | | 3 | 14 | 2015 | \$ | 250.00 | | | |
| City PHILADELPHIA | State | Zip Code (Plus 4) |) Description of Expenditure | | | | | | | |
| | PA | 19148 | DONATION | | | | | | | |
| To Whom Paid | | | МО | DAY | YEAR | | | | | |
| THE WS GROUP | | | М | | TEAK | | | | | |
| Mailing Address P.O. BOX 391 | | | 3 | 18 | 2015 | \$ | 2,109.22 | | | |
| City HARRISBURG | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | PA | 17108 | CONSU | LTING FEE | | | | | | |
| To Whom Paid CARDMEMBER SERVICE | | | МО | DAY | YEAR | | | | | |
| Mailing Address P.O. BOX 790408 | | | 3 | 18 | 2015 | \$ | 135.00 | | | |
| City ST. LOUIS | State | Zip Code (Plus 4) | Descript | l tion of Exp | l enditure | | | | | |
| 511 E0015 | MO | 63179 | CREDIT | | | | | | | |
| To Whom Paid SDCC | | <u>'</u> | мо | DAY | YEAR | | | | | |
| Mailing Address P.O. BOX 59358 | | | 3 | 18 | 2015 | \$ | 10,000.00 | | | |
| | T | Τ. | | | | · · | | | | |
| City PHILADELPHIA State Zip Code (Plus 4) | | | | tion of Exp | enditure | | | | | |
| PA 19102 | | | | ION | | | | | | |
| To Whom Paid STRATEGIC AFFAIRS CONSULTING | | | мо | DAY | YEAR | | | | | |
| Mailing Address 1130 MARLBOROL | GH STREET | | 3 | 18 | 2015 | \$ | 6,902.50 | | | |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Descrip | l tion of Exp | enditure | <u> </u> | | | | |
| | PA | 19125 | CONSU | LTING FEE | | | | | | |
| | | | | _ | | | | | | |

| | | | | | | | FAGL 20 | |
|---|--------------------|-------------------------|----------------------------|-------------|----------|----|------------|--|
| To Whom Paid | | | МО | DAY | YEAR | | | |
| WILLIAMS FOR MAYOR | | | MO | DAI | ILAK | | | |
| Mailing Address P.O. BOX 3484 | 45 | | 3 | 18 | 2015 | \$ | 1,000.00 | |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| PA 19101 | | | | ION | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | |
| GREENLEE FOR COUNCIL AT LARGE | | | | DAT | TEAR | | | |
| Mailing Address 2932 OGDEN STREET | | | | 18 | 2015 | \$ | 500.00 | |
| City PHILADELPHIA State Zip Code (Plus 4) | | | | tion of Exp | enditure | | | |
| | PA | 19130 | DONATI | ION | | | | |
| To Whom Paid EOM ATHLETIC ASSOCIATION | МО | DAY | YEAR | | | | | |
| Mailing Address 1244 JOHNST | ON STREET | | 3 | 30 | 2015 | \$ | 500.00 | |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Description of Expenditure | | | | | |
| | PA | 19148 | DONATI | ION | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | |
| HYPERION BANK | | | МО | DA1 | ILAK | | | |
| Mailing Address 199 WEST GIF | RARD AVENUE | | 1 | 31 | 2015 | \$ | 10.00 | |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | PA | 19123 | BANK S | ERVICE CH | IARGE | | | |
| To Whom Paid HYPERION BANK | | | МО | DAY | YEAR | | | |
| Mailing Address 199 WEST GIF | RARD AVENUE | | 2 | 28 | 2015 | \$ | 10.00 | |
| City PHILADELPHIA | State | Zip Code (Plus 4) | Description of Expenditure | | | | | |
| | PA | 19123 | BANK S | ERVICE CH | IARGE | | | |
| | | | | | | | PAGE TOTAL | |
| Enter Grand Total of Expendit | ures on Page 1, Re | port Cover Page, Item D |). | | | \$ | 51,991.72 | |

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: | | 1/1/201 | <u>5</u> To: | | <u>3/3</u> | <u>30/2015</u> |
| | | | | | DATE | | | | anding ce of Debt |
| Name of Creditor CAROSELLI BEACHLER MCTIERNAN & DONBOY | | | | мо | DAY | YEAR | 2 | | |
| Mailing Address 1845 WALNUT STRE | ET 15TH FLOOR | | | 9 | - | 201 | 12 | \$ | 35,150.00 |
| City PHILADELPHIA | State | Zip Code (P | lus 4) | Descript | tion of De | bt | | | |
| | PA | 19103 | LEGAL FEES PENDING OUTCOM APPEAL | | | | | COME C |)F FEE AWARD |
| | | | | | | | | I | PAGE TOTAL |
| Enter Grand Total of Unpaid Debt | s on Page 1, Repo | rt Cover Pa | ge, Item | G. | | | \$ | • | 35,150.00 |