

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.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2015	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	3	2015	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		3	31	2015		5	4	2015				
A. Amount Brought Forward From Last Report						\$		5,147.79				
B. Total Monetary Contributions And Receipts (From Schedule I)						\$		29,000.05				
C. Total Funds Available (Sum Of Lines A and B)						\$		34,147.84				
D. Total Expenditures (From Schedule III)						\$		5,770.00				
E. Ending Cash Balance (Subtract Line D From Line C)						\$		28,377.84				
F. Value Of In-Kind Contributions Received (From Schedule II)						\$		35,150.00				
G. Unpaid Debts And Obligations (From Schedule IV)						\$		0.00				

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>3/31/2015</u> To: <u>5/4/2015</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)	\$ 27,000.00
All Other Contributions (Part D)	\$ 2,000.00
TOTAL for the Reporting Period (3)	\$ 29,000.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.05

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.)	\$ 29,000.05
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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				Reporting Period			
				From:	To:		
				DATE	AMOUNT		
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL	
\$	0.00

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)					

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 FRIENDS OF FARNESE	Reporting Period From: <u>3/31/2015</u> To: <u>5/4/2015</u>
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				DATE	AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR
CARPENTERS PAC OF PHILA & VICINITY						
Mailing Address						
City	PHILADELPHIA	State	PA	4	27	2015
		Zip Code (Plus 4)	19130			
						\$ 20,000.00
Full Name of Contributing Committee				MO	DAY	YEAR
PREIT STATE PAC						
Mailing Address						
City	PHILADELPHIA	State	PA	4	27	2015
		Zip Code (Plus 4)	19102			
						\$ 1,000.00
Full Name of Contributing Committee				MO	DAY	YEAR
CITIZENS FOR A BETTER COMMONWEALTH						
Mailing Address						
City	HARRISBURG	State	PA	4	27	2015
		Zip Code (Plus 4)	17108			
						\$ 500.00
Full Name of Contributing Committee				MO	DAY	YEAR
LAWPAC						
Mailing Address						
City	HARRISBURG	State	PA	4	4	2015
		Zip Code (Plus 4)	17102			
						\$ 500.00
Full Name of Contributing Committee				MO	DAY	YEAR
CUPAC						
Mailing Address						
City	HARRISBURG	State	PA	4	4	2015
		Zip Code (Plus 4)	17106			
						\$ 500.00
Full Name of Contributing Committee				MO	DAY	YEAR
STATE STREET ADVISORS PAC						
Mailing Address						
City	PHILADELPHIA	State	PA	4	4	2015
		Zip Code (Plus 4)	17101			
						\$ 1,000.00

Full Name of Contributing Committee PENNSYLVANIA BANKERS PUBLIC AFFAIRS COMMITTEE			MO	DAY	YEAR	\$ 500.00
Mailing Address			4	4	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110				
Full Name of Contributing Committee APARTMENT ASSOC. OF PENNSYLVANIA PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address			4	4	2015	
City BALA CYNWYD	State PA	Zip Code (Plus 4) 19004				
Full Name of Contributing Committee IBC PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address			4	4	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103				
Full Name of Contributing Committee DUANE MORRIS GOVT COMMITTEE STATE & LOCAL FUND			MO	DAY	YEAR	\$ 500.00
Mailing Address			4	4	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103				
Full Name of Contributing Committee HEALTH PARTNERS OF PHILADELPHIA PAC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			4	4	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19107				
Full Name of Contributing Committee HIGHMARK HEALTH PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address			4	4	2015	
City CAMP HILL	State PA	Zip Code (Plus 4) 170890089				

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

PAGE TOTAL

\$ 27,000.00

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>3/31/2015</u> To: <u>5/4/2015</u>
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			DATE			AMOUNT
Full Name of Contributor MELISSA HELLER			MO	DAY	YEAR	\$ 1,000.00
Mailing Address City MERION State PA Zip Code (Plus 4) 19066			4	27	2015	
Employer Name COMMONWEALTH STRATEGIES, INC.			Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business			City MERION		State PA	Zip Code (Plus 4) 19066

Full Name of Contributor MALADY & WOOTEN, LLP			MO	DAY	YEAR	\$ 1,000.00
Mailing Address City HARRISBURG State PA Zip Code (Plus 4) 17101			4	27	2015	
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
\$ 2,000.00

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 FRIENDS OF FARNESE	Reporting Period From: <u>3/31/2015</u> To: <u>5/4/2015</u>
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				DATE		AMOUNT	
Full Name HYPERION BANK				MO 4	DAY 30	YEAR 2015	\$ 0.02
Mailing Address							
City	PHILADELPHIA	State PA	Zip Code (Plus 4) 19123				
Receipt Description INTEREST INCOME							
Full Name HYPERION BANK				MO 3	DAY 31	YEAR 2015	\$ 0.03
Mailing Address							
City	PHILADELPHIA	State PA	Zip Code (Plus 4) 19123				
Receipt Description INTEREST INCOME							

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

PAGE TOTAL	
\$	0.05

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>3/31/2015</u> To: <u>5/4/2015</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)	\$ 35,150.00
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.)			\$ 35,150.00

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 FRIENDS OF FARNESE	Reporting Period From: <u>3/31/2015</u> To: <u>5/4/2015</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 35,150.00
CAROSELLI BEACHLER MCTIERNAN & CONBOY				4	30	2015	
Mailing Address							
City PHILADELPHIA	State PA	Zip Code(Plus 4) 19103					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code(Plus 4)	Description of Contribution	
						CANCELLATION OF DEBT FOR LEGAL FEES INCURRED	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.							PAGE TOTAL 35,150.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF FARNESE	From <u>3/31/2015</u> To: <u>5/4/2015</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
WILLIAMS FOR MAYOR				
Mailing Address	4	2	2015	\$ 3,500.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19101	Description of Expenditure DONATION	
To Whom Paid	MO	DAY	YEAR	
WECHT 2015				
Mailing Address	4	2	2015	\$ 250.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15230	Description of Expenditure DONATION	
To Whom Paid	MO	DAY	YEAR	
KEVIN DOUGHERTY FOR PENNSYLVANIA				
Mailing Address	4	2	2015	\$ 500.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19152	Description of Expenditure DONATION	
To Whom Paid	MO	DAY	YEAR	
CARDMEMBER SERVICE				
Mailing Address	4	29	2015	\$ 1,500.00
City ST. LOUIS	State MO	Zip Code (Plus 4) 63179	Description of Expenditure CREDIT CARD	
To Whom Paid	MO	DAY	YEAR	
HYPERION BANK				
Mailing Address	4	30	2015	\$ 10.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19123	Description of Expenditure BANK CHARGE	
To Whom Paid	MO	DAY	YEAR	
HYPERION BANK				
Mailing Address	3	31	2015	\$ 10.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19123	Description of Expenditure BANK CHARGE	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL
				\$ 5,770.00

