

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 :		20150220		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: CHARLES, BOB FRIENDS OF												
Street Address: PO BOX 1608												
City: CAMPHILL						State: PA			Zip Code: 17011			
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.	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
REPRESENTATIVE IN THE GENERAL ASSEMBLY						MO	DAY	YEAR	87	STH	DEM	21
						8	4	2015	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		7	21	2015		8	14	2015				
A. Amount Brought Forward From Last Report						\$ 9,895.60						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 4,790.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 14,685.60						
D. Total Expenditures (From Schedule III)						\$ 13,398.84						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 1,286.76						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 494.61						
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
CHARLES, BOB FRIENDS OF	From: <u>7/21/2015</u> To: <u>8/14/2015</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 295.00

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)	\$ 2,150.00
TOTAL for the Reporting Period (2)	\$ 2,400.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 1,000.00
All Other Contributions (Part D)	\$ 1,095.00
TOTAL for the Reporting Period (3)	\$ 2,095.00

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.)	\$ 4,790.00
---	-------------

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 CHARLES, BOB FRIENDS OF	Reporting Period From: <u>7/21/2015</u> To: <u>8/14/2015</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 IPAL (IRONWORKERS POL ACTION LEAGUE)			MO	DAY	YEAR	\$ 100.00
Mailing Address 981 N PEIFERS LANE			7	27	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 171090000				

Full Name of Contributing Committee SIERRA CLUB PA PAF			MO	DAY	YEAR	\$ 150.00
Mailing Address PO BOX 60			7	27	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108				

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
CHARLES, BOB FRIENDS OF	From: <u>7/21/2015</u> To: <u>8/14/2015</u>

				DATE		AMOUNT	
Full Name of Contributor RICHARD BILLMAN				MO 7	DAY 30	YEAR 2015	\$ 100.00
Mailing Address 654 ST JOHNS DR							
City CAMP HILL	State PA	Zip Code (Plus 4) 17011					
Full Name of Contributor DAN DELANEY				MO 7	DAY 30	YEAR 2015	\$ 100.00
Mailing Address 2840 SUNSET DR							
City CAMP HILL	State PA	Zip Code (Plus 4) 17011					
Full Name of Contributor CECILIA B VITI				MO 7	DAY 30	YEAR 2015	\$ 250.00
Mailing Address 133 W LOCUST ST, APT 203							
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055					
Full Name of Contributor HOLLY THOMAS				MO 7	DAY 30	YEAR 2015	\$ 250.00
Mailing Address 160 E LAUER LN							
City CAMP HILL	State PA	Zip Code (Plus 4) 17011					
Full Name of Contributor CORINNA WILSON				MO 8	DAY 1	YEAR 2015	\$ 100.00
Mailing Address 500 ARLINGTON RD							
City CAMP HILL	State PA	Zip Code (Plus 4) 17011					
Full Name of Contributor ALEXANDER GAMBILL				MO 8	DAY 1	YEAR 2015	\$ 100.00
Mailing Address 140 WINFIELD DR							
City CAMP HILL	State PA	Zip Code (Plus 4) 17011					

Full Name of Contributor SALLY GAMBILL			MO	DAY	YEAR	\$ 100.00
Mailing Address 803 CONODOGUINET DR			8	1	2015	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011				
Full Name of Contributor JAMES HERTZLER			MO	DAY	YEAR	\$ 150.00
Mailing Address 920 S HUMER ST			8	1	2015	
City ENOLA	State PA	Zip Code (Plus 4) 17025				
Full Name of Contributor JOHN HICKEY			MO	DAY	YEAR	\$ 250.00
Mailing Address 3901 PAMAY DR			8	1	2015	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050				
Full Name of Contributor NICHOLAS PETCHEL			MO	DAY	YEAR	\$ 250.00
Mailing Address 70 SHARON RD			8	1	2015	
City ENOLA	State PA	Zip Code (Plus 4) 17025				
Full Name of Contributor DAVID WILDERMAN			MO	DAY	YEAR	\$ 250.00
Mailing Address 202 N 23RD ST			8	1	2015	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011				
Full Name of Contributor MURIEL BRONAKOSKI			MO	DAY	YEAR	\$ 250.00
Mailing Address 268 N LOCUST POINT RD, PO BOX 85			8	1	2015	
City NEW KINGSTOWN	State PA	Zip Code (Plus 4) 17072				

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

PAGE TOTAL

\$ 2,150.00

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 CHARLES, BOB FRIENDS OF	Reporting Period From: <u>7/21/2015</u> To: <u>8/14/2015</u>
---	--

				DATE			AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$	500.00
BRICKLAYERS & ALLIED CRAFTSMAN LOCAL 5 PAC								
Mailing Address 2163 BERRYHILL ST								
City HARRISBURG		State PA	Zip Code (Plus 4) 17104					
Full Name of Contributing Committee				MO	DAY	YEAR	\$	500.00
DISTRICT COUNCIL 21 PAC								
Mailing Address 2980 SOUTHAMPTON RD								
City PHILADELPHIA		State PA	Zip Code (Plus 4) 19154					

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

PAGE TOTAL
\$ 1,000.00

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 CHARLES, BOB FRIENDS OF	Reporting Period From: <u>7/21/2015</u> To: <u>8/14/2015</u>
---	--

				DATE			AMOUNT
Full Name of Contributor KIRK FABRIZIO				MO	DAY	YEAR	\$ 300.00
Mailing Address 3208 WALNUT AVE				7	23	2015	
City MANHATTAN BEACH	State CA	Zip Code (Plus 4) 90266					
Employer Name 310 NUTRITION				Occupation SELF-EMPLOYED			
Employer Mailing Address/Principal Place of Business 2235 E FLAMINGO RD			City LAS VEGAS		State NV	Zip Code (Plus 4) 89119	
Full Name of Contributor STEPHANIE CHRIST				MO	DAY	YEAR	\$ 300.00
Mailing Address 1701 CREEK VISTA DR				7	30	2015	
City NEW CUMBERLAND	State PA	Zip Code (Plus 4) 17070					
Employer Name BARNES & NOBLE BOOKSELLERS				Occupation MERCHANDISE MANAGER			
Employer Mailing Address/Principal Place of Business 58 S 32ND ST			City CAMP HILL		State PA	Zip Code (Plus 4) 17011	
Full Name of Contributor KENNETH LEE				MO	DAY	YEAR	\$ 495.00
Mailing Address 6329 PENNSBORO DR				7	31	2015	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050					
Employer Name POST & SCHELL PC				Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 17 N 2ND ST, 12TH FLOOR			City HARRISBURG		State PA	Zip Code (Plus 4) 17101	

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

PAGE TOTAL
\$ 1,095.00

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
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

				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	
CHARLES, BOB FRIENDS OF		From: <u>7/21/2015</u> To: <u>8/14/2015</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)	\$ 70.47
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 424.14
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.)			\$ 494.61

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate CHARLES, BOB FRIENDS OF	Reporting Period From: <u>7/21/2015</u> To: <u>8/14/2015</u>
---	--

				DATE	AMOUNT		
Full Name of Contributor STEPHANIE CHRIST				MO	DAY	YEAR	\$ 70.47
Mailing Address 1701 CREEK VISTA DR				7	26	2015	
City NEW CUMBERLAND	State PA	Zip Code (Plus 4) 17070					
Description of Contribution: MAILING SUPPLIES							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							PAGE TOTAL \$ 70.47

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

Name of Filing Committee or Candidate	Reporting Period
CHARLES, BOB FRIENDS OF	From: <u>7/21/2015</u> To: <u>8/14/2015</u>

				DATE		AMOUNT	
Full Name of Contributor CONNIE SAJER				MO	DAY	YEAR	\$ 424.14
Mailing Address 140 RODNEY LN				7	23	2015	
City CAMP HILL		State PA	Zip Code(Plus 4) 17011				
Employer of Contributor CENTRAL PENN BUSINESS JOURNAL				Occupation		ACCOUNT EXECUTIVE	
Employer Mailing Address/Principal Place of Business 1500 PAXTON ST			City HARRISBURG	State PA	Zip Code(Plus 4) 17104	Description of Contribution EVENT FOOD/BEVERAGES	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 424.14	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
CHARLES, BOB FRIENDS OF	From <u>7/21/2015</u> To: <u>8/14/2015</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
PA MEDIA GROUP				
Mailing Address 2020 TECHNOLOGY PKWY, SUITE 300	7	23	2015	\$ 1,000.00
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050	Description of Expenditure INTERNET ADVERTISING	
To Whom Paid	MO	DAY	YEAR	
SQUARE INC				
Mailing Address 1455 MARKET ST, SUITE 600	7	24	2015	\$ 10.65
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 94103	Description of Expenditure SERVICE FEE	
To Whom Paid	MO	DAY	YEAR	
USPS				
Mailing Address 66 W LOUHER ST	7	27	2015	\$ 164.70
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure POSTAGE	
To Whom Paid	MO	DAY	YEAR	
USPS				
Mailing Address 66 W LOUHER ST	7	27	2015	\$ 2,250.00
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure POSTAGE	
To Whom Paid	MO	DAY	YEAR	
USPS				
Mailing Address 66 W LOUHER ST	7	28	2015	\$ 1,078.00
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure POSTAGE	
To Whom Paid	MO	DAY	YEAR	
USPS				
Mailing Address 66 W LOUHER ST	7	30	2015	\$ 1,491.30
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure POSTAGE	

To Whom Paid			MO	DAY	YEAR	\$ 424.00
ALL UNION SIGNS PROMO PRINTING						
Mailing Address 2307 BERRYHILL ST			7	30	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17104	Description of Expenditure LITERATURE PRINTING			

To Whom Paid			MO	DAY	YEAR	\$ 5,735.80
ALL UNION SIGNS PROMO PRINTING						
Mailing Address 2307 BERRYHILL ST			7	30	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17104	Description of Expenditure MAILER PRINTING			

To Whom Paid			MO	DAY	YEAR	\$ 6.04
ACTBLUE						
Mailing Address 366 SUMMER ST			8	3	2015	
City SOMERVILLE	State MA	Zip Code (Plus 4) 02144	Description of Expenditure SERVICE FEE			

To Whom Paid			MO	DAY	YEAR	\$ 14.60
ACTBLUE						
Mailing Address 366 SUMMER ST			8	5	2015	
City SOMERVILLE	State MA	Zip Code (Plus 4) 02144	Description of Expenditure SERVICE FEE			

To Whom Paid			MO	DAY	YEAR	\$ 13.61
SQUARE INC						
Mailing Address 1455 MARKET ST, SUITE 600			8	1	2015	
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 94103	Description of Expenditure SERVICE FEE			

To Whom Paid			MO	DAY	YEAR	\$ 215.00
CENTER STREET GRILLE						
Mailing Address 4 CENTER ST			8	4	2015	
City ENOLA	State PA	Zip Code (Plus 4) 17025	Description of Expenditure ELECTION NIGHT EVENT			

To Whom Paid			MO	DAY	YEAR	\$ 289.83
MATT HAAS						
Mailing Address 103 SGRIGNOLI LN			8	10	2015	
City ENOLA	State PA	Zip Code (Plus 4) 17025	Description of Expenditure REIMBURSEMENT - ROBOCALL			

To Whom Paid			MO	DAY	YEAR	\$ 395.97
STEPHANIE CHRIST						
Mailing Address 1701 CREEK VISTA DR			8	10	2015	
City NEW CUMBERLAND	State PA	Zip Code (Plus 4) 17070	Description of Expenditure REIMBURSEMENT - ELECTION DAY MATERIALS			

To Whom Paid BOB CHARLES			MO	DAY	YEAR	\$ 309.34
Mailing Address 115 WINFIELD DR			8	10	2015	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure REIMBURSEMENT - FUNDRAISER FOOD/BEVERAGES			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 13,398.84

