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 20	06008			Repo		/ :	CANE	OID	DATE		COM	1ITTEE	✓	LOBI	BYIS		
Name of Filing C	ommittee, Cand	idate or L	obbyist:		FRIE	NDS	OF.	FARNES	SE					_				
Street Address:	C/O SD ASS	SOCIATES	5, P.C.,300	YORKT	OWN	N PL	AZA											
City:	ELKINS PAF	ιK						State:		PA			Zip Cod	le: 19	027			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY									AMENDM REPORT?		Yes		No	\			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDA ELECTION	Y PRE	- 5.		30 DA		PC	OST-	6.		TERMINA REPORT?		Yes		No	/
report type)	ANNUAL REPOR	RT 7.	Year 2015					IG METI CHECK		_			PAPER		\	DIS	ETTE	
Name of Office S	ought by Candi	date:			-	-		DATE	OF	ELEC	TIO	N	District Number	Office Code	Par	ty Cod	le Cou	
								МО		DAY	YE	AR	1	STS	DEN	1	51	
SENATOR IN TH	HE GENERAL AS	SEMBLY						1	1		3	2015		(SEE INS	TRUCTI	ONS FC	R CODES	5)
Summary of		МО	DAY	YEAR				МО		DAY	YE	AR	FO	R OFFIC	E USE	ONL	Y	
Expenditures	from:		6 9	20	015	T)		9	1	4	2015						
A. Amount Bro	ught Forward Fr	om Last R	leport		·		\$				86,7	787.86						
B. Total Moneta	ary Contribution	s And Rec	eipts (Fron	n Sched	dule 1	I)	\$				38,2	250.00						
C. Total Funds	Available (Sum	Of Lines A	and B)				\$			1	.25,0	37.86						
D. Total Expend	ditures (From S	chedule II	ΞΙ)				\$				67,4	75.88						
E. Ending Cash	Balance (Subtra	act Line D	From Line	C)			\$				57,5	61.98						
F. Value Of In-	Kind Contribution	ns Receiv	ed (From S	chedul	e II)		\$					0.00						
G. Unpaid Debt	s And Obligation	ns (From S	Schedule IV	/)			\$					0.00		,				
				AFF:	IDA	VIT	SE	CTION	١									
PART I - If this is	a Committee re	eport, trea	surer sign	here. I	f this	s is a	a Car	ndidate	rep	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple		ncluding the	e attached sc	hedules	filed	on p	aper	or by ele	ctro	onic me	dium	, are to t	he best o	f my knov	/ledge	and b	elief , tı	rue
Sworn to and subs	cribed before me t day of	his	20						-		s	ignature	of Perso	n Submitt	ing Rep	ort		_
	Signa	ature							-				Prin	ted Name				
My Commission Ex	pires								-				Emai	il				
	МО	D	AY	YR						Are	a Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ındidate's	authorized	Comm	ittee	, Ca	ndid	ate sha	ll s	ign he	re.							
I swear (or affirm) No 320) as amende		f my knowl	edge and beli	ief this	politic	calo	omm	ittee has	no	t violat	ed an	y provisi	ions of the	e act of Ju	ine 3,1	937 (F	.L. 133	з,
Sworn to and subsc		is										Si	ignature o	f Candida	te			-
	day of 		_ 20										Printe	d Name				-
	Signatur								_					-				_
My Commission Exp	ires												Ema	il				
	мо	D	AY	YR					•	Area (Code		Da	ytime Te	lephor	ie Nur	nber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF FARNESE	From:	6/9/201	<u>5</u> To:	9/14/2015
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)			\$	0.00
All Other Contributions (Part B)			\$	250.00
TOTAL for the Reporting	Period	(2)	\$	250.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	24,500.00
All Other Contributions (Part D)			\$	13,500.00
TOTAL for the Reporting	Period	(3)	\$	38,000.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1, 2,3 and 4; also enter this amount on Page1, Report Cover Page 2, 2,3,4,5,5,5,5,5,5,5,5,5,5,5,5,5,5,5,5,5,5			\$	38,250.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			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.

0.00

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)

 Name of Filing Committee or Candidate
 Reporting Period

 FRIENDS OF FARNESE
 From:
 6/9/2015
 To:
 9/14/2015

DATE AMOUNT

Full Name of Contributor AVI D. EDEN	МО	DAY	YEAR			
Mailing Address 329 S. 16TH STREET						\$ 250.00
PHILADELPHIA	State PA	Zip Code (Plus 4) 19102	7	7	2015	

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	Reporting	Period						
FRIENDS OF FARNESE			From:	<u>6/</u>	9/2015	То:	9/14	<u>4/2015</u>
				DA	TE		АМО	UNT
Full Name of Contributing Committee				мо	DAY	YEAR		
PREIT STATE PAC				140	DAI	ILAK		
Mailing Address 200 SOUTH BROAD S	200 SOUTH BROAD STREET						\$	2,500.00
City PHILADELPHIA	State	ze Zip Code (Plus 4)			7	2015		
	PA	19102						
Full Name of Contributing Committee				мо	DAY	YEAR		
SHEET METAL WORKERS UNION LOCAL	. 19			140	DAI	ILAK		
Mailing Address THE LEAGUE FOR PC COLUMBUS BLVD.	LITICAL EDUCATION	1301 S.					\$	5,000.00
City PHILADELPHIA	State	Zip Cod	e (Plus 4)	7	7	2015		
	PA	19147						
Full Name of Contributing Committee				мо	DAY	YEAR		
IBC PAC				140	DAI	ILAK		
Mailing Address 1901 MARKET STREE	ĒΤ						\$	1,250.00
City PHILADELPHIA	State	Zip Cod	e (Plus 4)	7	7	2015		
	PA	19103						
Full Name of Contributing Committee				мо	DAY	YEAR		
CHAPTER 830 DRIVE				140		12/11		
Mailing Address 12298 TOWNSEND R	COAD						\$	1,000.00
City PHILADELPHIA	State	Zip Cod	e (Plus 4)	7	7	2015		
	PA	19154						
Full Name of Contributing Committee				мо	DAY	YEAR		
HEALTH PARTNERS OF PHILADELPHIA PAC						LAK		
Mailing Address 901 MARKET STREET SUITE 500							\$	1,000.00
City PHILADELPHIA	State	Zip Cod	e (Plus 4)	7	7	2015		
	PA	19107						

Full Name of Con	tributing Committee			мо	DAY	YEAR	
IBC PAC						12/11	
Mailing Address	1901 MARKET STREE	ΞT					\$ 1,250.00
City PHILADE	I PHTA	State	Zip Code (Plus 4)	7	7	2015	
11112(32)		PA	19103				
Full Name of Con	tributing Committee			мо	DAY	YEAR	
PLUMBERS UNIO	N LOCAL 690			МО	DAI	ILAK	
Mailing Address ELECTION POLITICAL ACTION FUND 2791 SOUTHAMPTON ROAD							\$ 7,500.00
City PHILADE	LPHIA	State	Zip Code (Plus 4)	7	7	2015	
		PA	19154				
Full Name of Con	tributing Committee			мо	DAY	YEAR	
Mailing Address	249 FIFTH AVENUE			_			\$ 1,000.00
City PITTSBU	RGH	State	Zip Code (Plus 4)	7	28	2015	
		PA	15222				
	tributing Committee	TE & LOCAL FUN	ID	МО	DAY	YEAR	
	tributing Committee GOVT COMMITTEE STA 30 SOUTH 17TH STR	·	ND	МО	DAY	YEAR	\$ 2,000.00
DUANE MORRIS Mailing Address	GOVT COMMITTEE STA	·	Zip Code (Plus 4)	MO 7	DAY 28	YEAR 2015	\$ 2,000.00
DUANE MORRIS Mailing Address	GOVT COMMITTEE STA	EET					\$ 2,000.00
Mailing Address City PHILADE	GOVT COMMITTEE STA	EET	Zip Code (Plus 4)				\$ 2,000.00
DUANE MORRIS Mailing Address City PHILADEI Full Name of Con-	GOVT COMMITTEE STA 30 SOUTH 17TH STR	State PA	Zip Code (Plus 4)	7 MO	28 DAY	2015 YEAR	\$ 2,000.00
DUANE MORRIS Mailing Address City PHILADE Full Name of Cont LAWPAC Mailing Address	GOVT COMMITTEE STA 30 SOUTH 17TH STR LPHIA tributing Committee 800 NORTH THIRD S	State PA	Zip Code (Plus 4)	7	28	2015	
DUANE MORRIS Mailing Address City PHILADE Full Name of Contact LAWPAC Mailing Address	GOVT COMMITTEE STA 30 SOUTH 17TH STR LPHIA tributing Committee 800 NORTH THIRD S	State PA TREET	Zip Code (Plus 4) 19103	7 MO	28 DAY	2015 YEAR	
DUANE MORRIS Mailing Address City PHILADE Full Name of Contact LAWPAC Mailing Address City HARRISB	GOVT COMMITTEE STA 30 SOUTH 17TH STR LPHIA tributing Committee 800 NORTH THIRD S URG	State PA TREET	Zip Code (Plus 4) 19103 Zip Code (Plus 4)	7 MO	28 DAY	2015 YEAR	
DUANE MORRIS Mailing Address City PHILADE Full Name of Cont LAWPAC Mailing Address City HARRISB	GOVT COMMITTEE STA 30 SOUTH 17TH STR LPHIA tributing Committee 800 NORTH THIRD S	State PA TREET State PA	Zip Code (Plus 4) 19103 Zip Code (Plus 4)	7 MO	28 DAY	2015 YEAR	
DUANE MORRIS Mailing Address City PHILADE Full Name of Cont LAWPAC Mailing Address City HARRISB	GOVT COMMITTEE STA 30 SOUTH 17TH STR LPHIA tributing Committee 800 NORTH THIRD S URG	State PA TREET State PA	Zip Code (Plus 4) 19103 Zip Code (Plus 4)	7 MO 9	28 DAY 10	2015 YEAR 2015	
DUANE MORRIS Mailing Address City PHILADEI Full Name of Contact Address City HARRISB Full Name of Contact Address City HARRISB	30 SOUTH 17TH STR 30 SOUTH 17TH STR LPHIA tributing Committee 800 NORTH THIRD S URG tributing Committee BETTER COMMONWEA PO BOX 12090	State PA TREET State PA	Zip Code (Plus 4) 19103 Zip Code (Plus 4)	7 MO 9	28 DAY	2015 YEAR 2015	\$ 1,000.00

Full Name of Contributing Committee DEMOCRACY FUND	МО	DAY	YEAR			
Mailing Address P.O. BOX 12090	Mailing Address P.O. BOX 12090					\$ 500.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	9	10	2015	

PAGE TOTAL\$ 24,500.00

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

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 Co	ommittee or Candidate				Rep	orting Pe	riod			
FRIENDS OF FAI	RNESE				Fron	n:	<u>6/9/2</u>	015 To	o :	9/14/2015
						DA	ATE		АМ	IOUNT
Full Name of Con						мо	DAY	YEAR		
Mailing Address	9 PROSPECT HILL AVE	ENUE							\$	1,000.00
City SUMMIT		State	Zip	Code (Plus	4)	9	10	2015	5	
3011111		NJ	07	901						
Employer Name	E. W. HEINEL & amp;	ASSOCIATES				Occupat	tion	CONSUL	TANT	
Employer Mailing Business	Address/Principal Place	e of		City			State		Zip Code	e (Plus 4)
9 PROSPECT HIL	L AVENUE			SUMMIT			NJ		17901	
Full Name of Con ANGELO MORELL						МО	DAY	YEAR		
Mailing Address	708 CHRISTIAN STRE	ET							\$	500.00
City PHILADE	LPHIA	State	Zip	Code (Plus	i 4)	7	7	2015	5	
		PA	19	147						
Employer Name	RETIRED					Occupat	tion			
Employer Mailing Business	Address/Principal Plac	e of		City		1	State		Zip Code	e (Plus 4)
business							PA			
Full Name of Con						мо	DAY	YEAR		
Mailing									4	
Address	4582 SOUTH ULSTER	STREET SUITE 110	0			_	_		\$	2,500.00
City DENVER		State	Zip	Code (Plus	4)	7	7	2015	·	
		СО	80	237						
Employer Name				Occupation						
Employer Mailing Business	Address/Principal Place	e of		City			State		Zip Code	e (Plus 4)
							PA			

Full Name of Contributor				MO	DAY	YEAR		
MARK CEMENT CONTRACTORS				МО	DAY	TEAK		
Mailing 2415 S. 18TH STREET	-						4	
Address							\$ 1,000.00	
City PHILADELPHIA	State	Zip	Code (Plus 4)	7	7	2015		
	PA	19	145					
				_	_			
Employer Name				Occupat	ion			
Employer Mailing Address/Principal Place	e of	I	City		State		Zip Code (Plus 4)	
Business								
Full Name of Contributor								
DILWORTH PAXSON LLP				МО	DAY	YEAR		
Mailing 1500 MADKET CTREET							4	
Address 1500 MARKET STREET	SUITE 3500E						\$ 1,000.00	
City PHILADELPHIA	State	Zip	Code (Plus 4)	7	7	2015		
THIS IS ELLTHA	PA	19	102					
				_	_			
Employer Name				Occupation				
Employer Mailing Address/Principal Place of City					State		Zip Code (Plus 4)	
Business			City				,	
					PA			
Full Name of Contributor								
HOWARD FISCHER				МО	DAY	YEAR		
Mailing 1420 LOCUST STREET	- ADT 221/						4	
Address 1420 LOCUST STREET	AP1. 22K						\$ 500.00	
City PHILADELPHIA	State	Zip	Code (Plus 4)	7	7	2015		
	PA	19	102					
Employer Name		<u> </u>		Occupat	ion	<u> </u>		
Employer Name HOWARD FISCHER AS	SSOCIATES			Occupat		OWNER		
Employer Mailing Address/Principal Place	e of		City	I	State		Zip Code (Plus 4)	
Business 1800 KENNEDY BOULEVARDSUITE 700			PHILADELPHIA				10102	
1800 KENNEDT BOOLEVARDSOITE 700			PHILADELPHIA		PA		19103	
Full Name of Contributor				мо	DAY	YEAR		
ANNA MARIE WHITMYER				MO	DAI	ILAK		
Mailing 1528 MAYSLANDING F	ROAD						3,000,00	
Address	- -		_	7	7	2015	\$ 2,000.00	
City FOLSOM	State	Zip	Code (Plus 4)	'	'	2013		
	NJ	08	037					
Employer Name JERSEY CONSTRUCTION				Occupat	ion	CONTRA	CTOR	
- , JLKSLI CONSTRUCTIO	JIN CO.					CONTRA	LIUK	
Employer Mailing Address/Principal Place Business	e of		City		State		Zip Code (Plus 4)	
838 PINEY HOLLOW ROADP.O. BOX 557	7		HAMMONTON		NJ		08037	
COST INC. HOLLOW ROADF.O. BOX 337	,		HARRIONTON		1,,,			

Full Name of Contributor DAVID SELTZER				мо	DAY	YEAR	
A4-19-							4
Address 724 PINE STREET				_	_	2015	\$ 1,000.00
City PHILADELPHIA	State		p Code (Plus 4)	7	7	2015	`
	PA	19	9106				
Employer Name MERCATOR ADVISORS	S, LLC			Occupat	t ion P	RINCIP	AL
Employer Mailing Address/Principal Plac Business	e of		City		State		Zip Code (Plus 4)
1629 LOCUST STREET			PHILADELPHIA		PA		19103
Full Name of Contributor GAETANO PICCIRILLI				МО	DAY	YEAR	
Mailing 1947 W. RITNER STRI	EET						\$ 1,000.00
C:h.	State	Zi	p Code (Plus 4)	7	7	2015	· ·
PHILADELPHIA	PA	19	9145				
Employer Name DILLWORTH PAXSON	<u>l</u> LLP			Occupat	tion	TTORN	<u> </u>
Employer Mailing Address/Principal Place	e of		City		State		Zip Code (Plus 4)
Business 1500 MARKET STREET 3500E			PHILADELPHIA		PA		19102
Full Name of Contributor					•	I	1
LISA A. FALASCA				МО	DAY	YEAR	
Mailing 5496 E. CHESTNUT A	VENUE						\$ 1,000.00
City VINELAND	State	Zi	p Code (Plus 4)	7	7	2015	
	NJ	30	3360				
Employer Name FALASCA MECHANICA	L, INC.			Occupat	tion A	CCOUN	ITANT
Employer Mailing Address/Principal Place Business	e of		City		State		Zip Code (Plus 4)
3329 N. MILL ROAD			VINELAND		NJ		08360
Full Name of Contributor CHIMCLES & CHIMCLES				мо	DAY	YEAR	
Mailing ONE HAVERFORD CEN	NTRE 361 W. LANCA	STE	ER AVE.				\$ 1,000.00
C:h.	State	Zi	p Code (Plus 4)	7	7	2015	· ·
HAVERFORD	PA	19	0041				
Employer Name	<u> </u>			Occupat	tion	<u> </u>	1
Employer Mailing Address/Principal Place	e of		City	<u> </u>	State		Zip Code (Plus 4)
Business					PA		
					ı	I	

Full Name of Contributor SEAN M. REILLY	мо	DAY	YEAR			
Mailing 826 KERPER STREET Address				_		\$ 1,000.00
City PHILADELPHIA	State PA	7	7	2015		
Employer Name ROSCOMMON INTERN	ATIONAL		Occupat	ion P	RESIDE	NT
Employer Mailing Address/Principal Place of Business City				State		Zip Code (Plus 4)
TWO BALA PLAZASUITE 300 BALA CYNWYD				PA		19005

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

PAGE TOTAL
\$ 13,500.00

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		Report	ting Perio	bd			
			From:			To:		
				D	ATE		,	AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•				
Enter Grand Total of Part E	on Schedule T. Detailer	d Summary Page	Section	4			P	PAGE TOTAL
	on Joneau.c 1, Journe	. Juniina	5000.011				\$	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		
FRIENDS OF FARNESE	From:	6/9/2015 To:	9/14/2015
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T 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				
			From:			To:		
				DATE			AMOUNT	
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 S	chedule II, In-Kir	nd Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTAL	
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	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion			
Employer Mailing Address/Principal Place of Business		City	City State			Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period						
FRIENDS OF FARNESE				<u>6/9</u>	То:	9/14/2015				
				DATE	AMOUNT					
To Whom Paid SOCIETY HILL PRESERVATION F	мо	DAY	YEAR							
Mailing Address PO BOX 397	55		6	9	2015	\$	250.00			
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19106	Descrip DONAT	otion of Exp						
To Whom Paid STRATEGIC AFFAIRS CONSULTI	NG		МО	DAY	YEAR					
Mailing Address 1130 MARLB	OROUGH STREET		6	11	2015	\$	9,619.00			
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19125	1	otion of Exp						
To Whom Paid CHELTENHAM PRINTING COMPA	ANY		МО	DAY	YEAR					
Mailing Address 518 RYERS A	AVENUE		6	11	2015	\$	687.92			
City CHELTENHAM	State PA	Zip Code (Plus 4) 19012		Description of Expenditure EVENT INVITATIONS						
To Whom Paid WATER WORKS RESTAURANT &	amp; LOUNGE		МО	DAY	YEAR					
Mailing Address 640 WATERWORKS DRIVE				11	2015	\$	3,331.36			
City PHILADELPHIA State Zip Code (Plus 4)				tion of Exp	enditure	•				

Mailing Address 640 WATER	6	11	2015	\$ 3,331.36		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19130	1 -	otion of Exp		
To Whom Paid SD ASSOCIATES, P.C.			МО	DAY	YEAR	
Mailing Address 300 YORKTO	DWN PLAZA		6	11	2015	\$ 750.00
City ELKINS PARK	State PA	Zip Code (Plus 4) 19027	1 -	otion of Exp		

						PAG	E 1/				
To Whom Paid KENNEY FOR MAYOR	мо	DAY	YEAR								
Mailing Address P.O. BOX 60065	6	19	2015	\$	2,500.00						
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19102		otion of Exp IBUTION	penditure						
To Whom Paid SDCC			МО	DAY	YEAR						
Mailing Address P.O. BOX 59358			6	26	2015	\$	10,000.00				
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19102		otion of Exp IBUTION	penditure						
To Whom Paid CARDMEMBER SERVICE			МО	DAY	YEAR						
Mailing Address P.O. BOX 790408			6	26	2015	\$	14,070.57				
City ST. LOUIS	State MO	Zip Code (Plus 4) 63179	Description of Expenditure CREDIT CARD								
To Whom Paid THE WS GROUP			МО	DAY	YEAR						
Mailing Address P.O. BOX 391			6	26	2015	\$	4,512.50				
City HARRISBURG	State PA	Zip Code (Plus 4) 17108		otion of Exp							
To Whom Paid STRATEGIC AFFAIRS CONSULTING			МО	DAY	YEAR						
Mailing Address 1130 MARLBORO	UGH STREET		7	13	2015	\$	7,125.00				
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19125		otion of Exp							
To Whom Paid DEMOCRATIC COUNTY EXECUTIVE C	OMMITTEE		МО	DAY	YEAR						
Mailing Address 219 SPRING GARDEN STREET				13	2015	\$	100.00				
	State Zip Code (Plus 4)					Description of Expenditure EVENT TICKETS					

To Whom Paid STRATEGIC AFFAIRS CONSULTING	мо	DAY	YEAR				
Mailing Address 1130 MARLBOROUGH STREET	7	23	2015	\$		2,500.00	
City PHILADELPHIA PA 2ip Code (Plane) PA 19125	Descri	ption of Exp					
To Whom Paid CARDMEMBER SERVICE	мо	DAY	YEAR				
Mailing Address P.O. BOX 790408	7	28	2015	\$		703.43	
City ST. LOUIS State MO 63179	Descri	ption of Exp	enditure				
To Whom Paid 3RD POLICE DISTRICT ADVISORY COUNCIL	МО	DAY	YEAR				
Mailing Address 1300 S. 11TH STREET	7	31	2015	\$		100.00	
City PHILADELPHIA State PA 19147	Descii	Description of Expenditure DONATION					
To Whom Paid KENNEY FOR MAYOR	МО	DAY	YEAR				
	MO 7	DAY 31	YEAR 2015	\$		3,000.00	
KENNEY FOR MAYOR	7 us 4) Descri		2015	\$		3,000.00	
KENNEY FOR MAYOR Mailing Address P.O. BOX 60065 City PHILADELPHIA State Zip Code (Ple	7 us 4) Descri	31	2015	\$		3,000.00	
Mailing Address P.O. BOX 60065 City PHILADELPHIA State PA 19102 To Whom Paid	7 us 4) Descri	31 ption of Exp RIBUTION	2015 penditure	\$		3,000.00 5,650.00	
Mailing Address P.O. BOX 60065 City PHILADELPHIA State PA 19102 To Whom Paid STRATEGIC AFFAIRS CONSULTING	7 us 4) Descri CONTI MO 8 us 4) Descri	31 ption of Exp RIBUTION DAY	2015 Denditure YEAR 2015 Denditure				
Mailing Address P.O. BOX 60065 City PHILADELPHIA State PA 19102 To Whom Paid STRATEGIC AFFAIRS CONSULTING Mailing Address 1130 MARLBOROUGH STREET City PHILADELPHIA State Zip Code (Plane)	7 us 4) Descri CONTI MO 8 us 4) Descri	31 ption of Exp RIBUTION DAY 13	2015 Denditure YEAR 2015 Denditure				
Mailing Address P.O. BOX 60065 City PHILADELPHIA State PA 19102 To Whom Paid STRATEGIC AFFAIRS CONSULTING Mailing Address 1130 MARLBOROUGH STREET City PHILADELPHIA State PA 19125 To Whom Paid	7 us 4) Descri CONTI MO 8 us 4) Descri CONS	DAY 13 ption of Exp LTING FEE	2015 Penditure YEAR 2015 Penditure				

							PAGE 19	
To Whom Paid COOPER'S FERRY PARTNERSHIP	МО	DAY	YEAR					
Mailing Address C/O SCUNGI	8	26	2015	\$	850.00			
City CAMDEN	State NJ	Zip Code (Plus 4) 08103	Descrip DONAT	otion of Exp	penditure			
To Whom Paid ANNUNCIATION BVM CHURCH			МО	DAY	YEAR			
Mailing Address 1511 SOUTH	10TH STREET		9	4	2015	\$	250.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19147	Descrip DONAT	otion of Exp	penditure			
To Whom Paid MAIN STREET CHECKS			мо	DAY	YEAR			
Mailing Address 920 19TH ST	REET N		6	15	2015	\$	131.90	
City BIRMINGHAM	State AL	Zip Code (Plus 4) 35203	Descrip CHECK	otion of Exp	enditure			
To Whom Paid HYPERION BANK		·	мо	DAY	YEAR			
Mailing Address 199 WEST G	IRARD AVENUE		6	30	2015	\$	15.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19123	1	otion of Exp SERVICE C				
To Whom Paid CLEARMARK SEARCH AND ABST	RACT, LLC		мо	DAY	YEAR			
Mailing Address 1528 WALNUT STREET SUITE 600				15	2015	\$	500.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19102		otion of Exp				
Enter Grand Total of Expendi	tures on Page 1 De	nort Cover Page Item D					PAGE TOTAL	
Enter Grand Total of Experior	itules on Paye 1, Re	poit cover rage, Itelli D	•			\$	67,475.88	