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 2008	205			Rep File			CAND	ANDIDATE COMMITTEE V LOBBYIST							
Name of Filing C	Committee, Candid	ate or L	obbyist:		FRIE	END	S OF	FRANK I	ARRY		_					
Street Address:	PO BOX 231															
City:	LANGHORNE							State:	PA			Zip Cod	de: 19	9047		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2	2.	30 DA		POST-	3.		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDATELECTION	y pri	E- 5	5. X	30 DA		POST-	6.	TERMINATION Yes REPORT?			No	\	
report type)	ANNUAL REPORT	7.	Year 2015					NG METH CHECK C				PAPER		DISKETTE		
Name of Office S	- Sought by Candida	te:						DATE (OF ELE	CTI	ON	District Number	Office Code	Par	ty Code	County
								МО	DAY	Y	EAR	ituilibei	Touc			Couc
	11					L	3	2015		(SEE IN	STRUCTIO	ONS FOR C	ODES)			
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	Y	'EAR	FC	R OFFI	CE USE	ONLY	
Expenditures	rom:		9 15	2	015	T	0	10)	19	2015					
A. Amount Bro	ught Forward Fror	n Last R	eport				\$			93,	,303.68					
B. Total Monetary Contributions And Receipts (From Schedule I)						I)	\$			6,	559.30					
C. Total Funds Available (Sum Of Lines A and B)						\$			99,	,862.98						
D. Total Expenditures (From Schedule III)						\$			4,	221.82						
E. Ending Cash Balance (Subtract Line D From Line C)					\$			95,	641.16							
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)	\$			2,	400.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			1		
				AFF	IDA	١٧٧	T SE	CTION								
	s a Committee rep	-	_								_					
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached scl	hedule	s filed	d on	paper	or by elec	tronic n	nediur	n, are to t	the best o	f my kno	wledge	and belie	ef , true
Sworn to and subs	cribed before me this	i	20								Signature	of Perso	n Submit	ting Rep	ort	
	Signatu	**					- -					Prin	ted Name	e		
My Commission Ex	_	ie							-			Ema	il			
	мо	D	AY	YR					А	rea Co	de	Daytim	ie Telepl	none Nu	mber	
Part II- If this is	a report of a cand	didate's	authorized	Comn	nitte	e, C	andid	ate shal	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	comm	ittee has	not viol	ated a	ny provis	ions of th	e act of J	une 3,1	937 (P.L.	1333,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate		
	day of						-					Printe	ed Name			
	Signature						-									
My Commission Exp	ires											Ema	il			
	МО	D	AY	YR	R		•		Area	Code	1	D	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period							
FRIENDS OF FRANK FARRY	From:	9/15/201	<u>5</u> To:	10/19/2015					
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)			\$	850.00					
All Other Contributions (Part B)	\$	57.50							
TOTAL for the Reporting	\$	907.50							
3. Contributions Received Over \$250.00 (From Part C and Part D)									
Contributions Received From Political Committees (Part C)			\$	4,700.00					
All Other Contributions (Part D)			\$	300.00					
TOTAL for the Reporting	Period	(3)	\$	5,000.00					
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)									
TOTAL for the Reporting	Period	(4)	\$	651.80					
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			\$	6,559.30					

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 Candidat	Name of Filing Committee or Candidate			eporting Period				
FRIENDS OF FRANK FARRY			Fre	om:	9/15/20) <u>15</u> To:	:	10/19/2015
		•			DATE			AMOUNT
Full Name of Contributing Committee WINDSTREAM POLITICAL ACTION COM	MITTEE			МО	DAY	YEAR		
Mailing Address 4001 RODNEY PA	RHAM ROAD						\$	250.00
City LITTLE ROCK	State	Zip Code (Plus	4)	6	12	2015		
	AR	72212						
Full Name of Contributing Committee HUMANE PA		МО	DAY	YEAR				
Mailing Address PO BOX 352							\$	100.00
City RED LION	State	Zip Code (Plus	4)	6	12	2015		
	PA	17356						
Full Name of Contributing Committee PHYSICIAN ASSISTANTS PAC				МО	DAY	YEAR		
Mailing Address 200 NORTH THIR	D STREET SUITE 150	0					\$	250.00
City HARRISBURG	State	Zip Code (Plus	4)	7	1	2015		
	PA	17101						
Full Name of Contributing Committee ABBVIE POLITICAL ACTION COMMITTE	<u> </u>			мо	DAY	YEAR		
Mailing Address 1 N. WAUKEGAN ROAD DEPT. 0312, BLDG. AP6D-2							\$	250.00
City N CHICAGO	State	Zip Code (Plus	4)	7	8	2015		
N. CHICAGO	IL	60064						
							_	

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

PAGE TOTAL 850.00

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

FRIENDS OF FRANK FARRY From:

<u>9/15/2015</u> **To:**

Reporting Period

DATE

Full Name of Contributor FRANK FARRY	МО	DAY	YEAR			
Mailing Address 203 NATIONAL AVENUE						\$ 57.50
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	9	8	2015	

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

PAGE TOTAL 57.50 \$

10/19/2015

AMOUNT

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	ame of Filing Committee or Candidate Repo			g Period				
FRIENDS OF FRANK FARRY			From:	9/1	<u>5/2015</u>	То:	10/19/2015	
				DA	TE		AMOUNT	
Full Name of Contributing Committee COMCAST CORPORATION & amp; NBCU	NIVERSAL PAC			МО	DAY	YEAR		
Mailing Address 1701 JFK BOULEVAR	D						\$ 1,000.00	
City PHILADELPHIA	State PA	Zip Code 19103	e (Plus 4)	7	8	2015		
Full Name of Contributing Committee UPAC				мо	DAY	YEAR		
Mailing Address P.O. BOX 458	State	Zin Code	e (Plus 4)	7	1	2015	\$ 1,000.00	
City CAMP HILL	PA	17001	- (. i.u.s - i.)					
Full Name of Contributing Committee HAPAC-STATE				мо	DAY	YEAR		
Mailing Address P.O. BOX 8600							\$ 300.00	
City HARRISBURG	State PA	Zip Code 171058	e (Plus 4) 600	7	8	2015		
Full Name of Contributing Committee PARD PHILPAC				МО	DAY	YEAR		
Mailing Address 7425 FRANKFORD A	VENUE 2ND FLOOR			_			\$ 300.00	
City PHILADELPHIA	State PA	Zip Code 19136	e (Plus 4)	7	8	2015		
Full Name of Contributing Committee HIGHMARK PAC				МО	DAY	YEAR		
Mailing Address 1800 CENTER STREE	т					26:-	\$ 300.00	
City CAMP HILL	State PA	Zip Code	e (Plus 4)	7	8	2015		

Full Name of Contributing Committee THE GLAXOSMITHKLINE PAC	HE GLAXOSMITHKLINE PAC				YEAR	
Mailing Address FIVE MOORE DRIVE						\$ 300.00
City RESEARCH TRIANGLE PARK	State NC	Zip Code (Plus 4) 27709	9	25	2015	
Full Name of Contributing Committee ENERGY TRANSFER PAC	МО	DAY	YEAR			
Mailing Address 400 WEST 15TH ST	REET SUITE 720					\$ 500.00
City AUSTIN	State TX	Zip Code (Plus 4) 78701	10	5	2015	
Full Name of Contributing Committee MID-ATLANTIC LABORERS' POLITICAL	Full Name of Contributing Committee MID-ATLANTIC LABORERS' POLITICAL LEAGUE			DAY	YEAR	
Mailing Address 12355 SUNRISE VALLEY DRIVE SUITE 550						\$ 1,000.00
City RESTON	State VA	Zip Code (Plus 4) 20191	10	9	2015	

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

PAGE TOTAL \$ 4,700.00

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			Rep	porting Period				
FRIENDS OF FRANK FARRY			Fror	m: 9/15/2015			To: 10/19/2015	
				D	ATE		AMOUNT	
Full Name of Contributor MALADY & DESCRIPTION OF THE PUBLIC AFFAIRS LLP				МО	DAY	YEAR		
Mailing Address 604 NORTH 3RD STREET						\$ 300.00		
City HARRISBURG	State	Zip Code (Plus 4)		7	27	2015		
	PA	17101						
Employer Name	•			Occupation				
Employer Mailing Address/Principal Plac Business	ce of	City			State		Zip Code (Plus 4)	
Enter Grand Total of Part C on Sche	edule I, Detailed S	Summary Page,	Section	on 3.		\$	PAGE TOTAL 3 00.00	
						L		

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.

prior	expenditures tr	iat were	return	eu to	the mer	•	
Name of Filing Committee or Candidate			Report	ing Perio	d		
FRIENDS OF FRANK FARRY			From:		9/15/201	<u>5</u> To:	10/19/2015
				D	ATE		AMOUNT
Full Name					DAY	YEAR	
CAPITAL ONE				МО	DAY	TEAK	
Mailing Address PO BOX 71083							\$ 46.80
City CHARLOTTE	State	Zip Code (Plus 4)	9	2	2015	
	NC	28277					
Receipt Description CREDIT ADJUS	T STMENT FOR FEES ANI	D INTEREST	CHARGE	D			l
Full Name NESHAMINY VALLEY MUSIC THEATRE				МО	DAY	YEAR	
Mailing Address PO BOX 131							\$ 45.00
City LANGHORNE	State	Zip Code (Plus 4)	9	14	2015	
DINGHORNE	PA	19047					
Receipt Description RETURNED CH	ECK #1604	1					
Full Name				МО	DAY	YEAR	
CONWELL-EGAN CATHOLIC				MO	DAI	ILAK	
Mailing Address 611 WISTAR ROAD							\$ 250.00
City FAIDLESS HILLS	State	Zip Code (Plus 4)	9	14	2015	
FAIRLESS HILLS	PA	19030	,				
Receipt Description RETURNED CH	 ECK #1614						
							1
Full Name MIDDLETOWN COMMUNITY FOUNDATION	ON			мо	DAY	YEAR	
Mailing Address PO BOX 1128							\$ 150.00
City LANGHORNE	State	Zip Code (Plus 4)	9	14	2015	
, <u>.</u>	PA	19047					
Receipt Description RETURNED CH	ECK #1615	1				ı	1

Full Name ARCHBISHOP WOOD	ARCHBISHOP WOOD				YEAR			
Mailing Address 655 YORK ROAD						\$ 100.00		
City WARMINSTER	State	Zip Code (Plus 4)	9	14	2015			
WIN INSTER	PA	18974						
Receipt Description RETURN	Receipt Description RETURNED CHECK #1616							
Full Name TRI-COUNTY BANK, INC.			мо	DAY	YEAR			

Full Name TRI-COUNTY BANK, INC.	МО	DAY	YEAR			
Mailing Address 403 ELMWOOD AVE						\$ 60.00
City FEASTERVILLE	State PA	Zip Code (Plus 4) 19047	9	14	2015	
Receipt Description RETURNED CH	ECK #1618					

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

PAGE TOTAL
\$ 651.80

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 FRANK FARRY	From:	<u>9/15/2015</u> To:	10/19/2015						
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)	\$	2,400.00						
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,		\$	2,400.00						

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	Name of Filing Committee or Candidate			g 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	Schedule II, In-Kir	nd Contributions Deta	iled Sum	ımary Pag	je,		PAGE TOTAL	
Section 2.						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Rep	ortin	ıg P	eriod		
FRIENDS OF FRANK FARRY					Fro	m:		9/15/201	<u>.5</u> To:	<u>10/19/2015</u>
								DATE		AMOUNT
Full Name of Contributor										
FOUR LANES END, LLC						МО		DAY	YEAR	
Mailing Address 106 MAPLE AVE										\$ 600.00
City LANGHORNE	State		Zip Code(P	Plus 4)			7	1	2015	
2 WONDALE	PA		19047							
Employer of Contributor N/A						Occu	ıpat	ion N	I/A	
Employer Mailing Address/Principal Plac Business	e of	City		State			Zip (Code(Plus	Descrip	otion of Contribution
business							.,		RENT	
		<u> </u>		<u> </u>						<u> </u>
Full Name of Contributor FOUR LANES END, LLC						мо		DAY	YEAR	
Mailing Address 106 MAPLE AVE										\$ 600.00
City LANGHORNE	State		Zip Code(P	Plus 4)			8	1	2015	
	PA		19047							
Employer of Contributor N/A						Occu	ıpat	ion N	I/A	
Employer Mailing Address/Principal Plac Business	e of	City		State			Zip (Code(Plus	Descrip	otion of Contribution
545/11055							,		RENT	
Full Name of Contributor										
FOUR LANES END, LLC						МО		DAY	YEAR	
Mailing Address 106 MAPLE AVE										\$ 600.00
City LANGHORNE	State		Zip Code(P	Plus 4)			9	1	2015	
	PA		19047							
Employer of Contributor N/A	ı					Occu	ıpat	i ion N	I/A	
Employer Mailing Address/Principal Plac Business	e of	City		State			Zip (Code(Plus	Descrip	otion of Contribution
							•		RENT	

								.,.62 15	
Full Name of Contributor FOUR LANES END, LLC					мо	DAY	YEAR		
Mailing Address 106 MAPLE A	VE							\$ 600.00	
City LANGHORNE	State		Zip Code(I	Plus 4)	10	1	2015	2015	
	PA		19047						
Employer of Contributor N/A			•		Occupat	tion			
Employer Mailing Address/Princi Business	pal Place of	City		State	Zip 4)	Zip Code(Plus		Description of Contribution	
							RENT		
Enter Grand Total of Part G	on Schedule II.	in-Kind	Contributi	ons Detaile	ed			PAGE TOTAL	
Summary Page, Section 3.	,							2,400.00	
							l		

SCHEDULE III STATEMENT OF EXPENDITURES

		т					
Name of Filing Committee or (Candidate		Reportii	ng Period			
FRIENDS OF FRANK FARRY			From	9/1	<u>5/2015</u>	То:	10/19/2015
				DATE			AMOUNT
To Whom Paid MCGRATHS PUB			мо	DAY	YEAR		
Mailing Address 202 LOCUS	ST STREET		6	9	2015	\$	46.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>	
	PA	17101	DINING				
To Whom Paid MCGRATHS PUB			МО	DAY	YEAR		
Mailing Address 202 LOCUS	ST STREET		6	12	2015	\$	700.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17101	CATER				
To Whom Paid FEDERAL EXPRESS			МО	DAY	YEAR		
Mailing Address RITTENHO	USE CIRCLE		6	12	2015	\$ \$	26.69
City BRISTOL	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
-1	PA	19007	MAILIN				
To Whom Paid FEDERAL EXPRESS	·	·	МО	DAY	YEAR		
Mailing Address RITTENHO	USE CIRCLE		6	23	2015	\$	5.32
City BRISTOL	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
-1	PA	19007	MAILIN				
To Whom Paid MIDDLETOWN TOWNSHIP			МО	DAY	YEAR		
Mailing Address 3 MUNICIF	PAL WAY		6	29	2015	\$	100.00
City LANGHORNE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		

19047

ΑD

PΑ

To Whom Paid NHS INSTRUMENTAL MUSIC BO	DOSTERS, INC.		мо	DAY	YEAR	
Mailing Address 2001 OLD L	INCOLN HIGHWAY		6	29	2015	\$ 60.00
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Descrip AD	tion of Exp	enditure	
To Whom Paid FEASTERVILLE BUSINESS ASSO	OCIATION		МО	DAY	YEAR	
Mailing Address 67 BUCK RC	DAD		6	29	2015	\$ 100.00
City SOUTHAMPTON	State PA	Zip Code (Plus 4) 18966	Descrip AD	tion of Exp	enditure	
To Whom Paid BCCC FOUNDATION			МО	DAY	YEAR	
Mailing Address 275 SWAMP	ROAD		6	29	2015	\$ 325.00
City NEWTOWN	State PA	Zip Code (Plus 4) 18940	Descrip SPONS	otion of Exp	enditure	
To Whom Paid FLEGC			МО	DAY	YEAR	
Mailing Address PO BOX 434	1		6	29	2015	\$ 50.00
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Descrip SPONS	otion of Exp	enditure	
To Whom Paid WILLIAM TENNENT FOOTBALL	BOOSTERS		МО	DAY	YEAR	
			6	29	2015	\$ 200.00
Mailing Address PO BOX 192	<u>?</u>					
Mailing Address PO BOX 192 City WARMINSTER	State PA	Zip Code (Plus 4) 18974		tion of Exp	enditure	
TO BOX 192	State		Descrip		enditure YEAR	
City WARMINSTER To Whom Paid WILDCATS CHEERLEADING	State		Descrip AD	tion of Exp		75.00

						PAGE	: 16
To Whom Paid AOH DIVISION 5			МО	DAY	YEAR		
Mailing Address 18 SPINYTHORN DI	RIVE		6	29	2015	\$	100.00
City LEVITTOWN	State PA	Zip Code (Plus 4) 19056	Descrip SPONS	otion of Exp	penditure		
To Whom Paid MIDDLETOWN GRANGE #684			МО	DAY	YEAR		
Mailing Address 19 RAINLILY ROAD			6	29	2015	\$	38.00
City LEVITTOWN	State PA	Zip Code (Plus 4) 19056	Descrip AD	otion of Exp	penditure		
To Whom Paid NESHAMINY CHEERLEADERS			МО	DAY	YEAR		
Mailing Address 2001 OLD LINCOLN	I HIGHWAY		6	29	2015	\$	100.00
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Descrip T-SHIR	otion of Exp	penditure		
To Whom Paid NESHAMINY CHEERLEADERS			МО	DAY	YEAR		
Mailing Address 2001 OLD LINCOLN	I HIGHWAY		6	29	2015	\$	150.00
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Descrip FOOTB	otion of Exp	penditure		
To Whom Paid KRISTEN BENHAYON			МО	DAY	YEAR		
Mailing Address 6 FIREBUSH ROAD			6	29	2015	\$	19.99
City LEVITTOWN	State PA	Zip Code (Plus 4) 19056	1	otion of Exp			
To Whom Paid BUCKS COUNTY TEENAGE REPUBLICA	NS		мо	DAY	YEAR		
Mailing Address 115 N. BROAD STR	EET		7	8	2015	\$	200.00
				1			

To Whom Paid FRANCIS A. WALTER, III										
			AR .	YEAI	DAY	мо				
Mailing Address 866 FIR AVENUE 7 9 2015 \$	25.00	\$)15	20	9	7			g Address 866 FIR AVEN	Mailin
City LANGHORNE State Zip Code (Plus 4) Description of Expenditure PA 19047 CONTRIBUTION TOWARDS EAGLE S	COUT PROJECT								LANGHORNE	City
To Whom Paid CEC FOOTBALL MO DAY YEAR			AR .	YEAI	DAY	МО				
Mailing Address 611 WISTAR ROAD 7 16 2015 \$	75.00	\$)15	20	16	7		D	g Address 611 WISTAR I	Mailin
City FAIRLESS HILLS State Zip Code (Plus 4) PA 19030 Description of Expenditure AD			ture	pendit	tion of Exp				FAIRLESS HILLS	City
To Whom Paid KRISTEN BENHAYON MO DAY YEAR			ıR	YEAI	DAY	МО				
Mailing Address 6 FIREBUSH ROAD 7 16 2015 \$	299.40	\$)15	20	16	7			g Address 6 FIREBUSH F	Mailin
				1						
City LEVITTOWN State PA 19056 Plus 4) Description of Expenditure REIMBURSEMENT FOR EXPENSES									LEVITTOWN	City
Description of Expenditure			EXPEN	FOR	JRSEMENT	REIMBU			om Paid	To Wh
To Whom Paid PA 19056 REIMBURSEMENT FOR EXPENSES MO DAY YEAR	104.11	PENSES	R EXPEN	YEAL	DAY	REIMBU MO		PA	om Paid TIME SPORTS BAR	To Wh
To Whom Paid OVERTIME SPORTS BAR PA 19056 REIMBURSEMENT FOR EXPENSES MO DAY YEAR	104.11	\$	R EXPEN	YEAI 20	DAY 2	MO 9 Descrip	19056 Zip Code (Plus 4)	PA /ENUE State	oom Paid TIME SPORTS BAR g Address 1558 E. MAPL	To Wh OVER
TO Whom Paid OVERTIME SPORTS BAR Mo DAY YEAR Mailing Address 1558 E. MAPLE AVENUE State Zip Code (Plus 4) Description of Expenditure Description of Expenditure REIMBURSEMENT FOR EXPENSES MO DAY YEAR 2 2015 \$	104.11	\$	R EXPEN	YEAI 20	DAY 2 stion of Exp	MO 9 Descrip	19056 Zip Code (Plus 4)	PA /ENUE State	oom Paid TIME SPORTS BAR g Address 1558 E. MAPL LANGHORNE	To Wh
TO Whom Paid OVERTIME SPORTS BAR Mo DAY YEAR Mailing Address 1558 E. MAPLE AVENUE City LANGHORNE State PA 19047 To Whom Paid MO DAY YEAR PA 2015 \$ Mo DAY YEAR MO DAY YEAR MO DAY YEAR	104.11 33.94	\$	R EXPENDED	YEAI 20 YEAI	DAY 2 Stion of Exp	MO 9 Descrip DINING	19056 Zip Code (Plus 4)	/ENUE State PA	oom Paid TIME SPORTS BAR g Address 1558 E. MAPL LANGHORNE com Paid EVILLE INN	To Wh OVER Mailin City
To Whom Paid OVERTIME SPORTS BAR MO DAY YEAR Mo DAY		\$ \$	R EXPENDED	YEAI 20 YEAI 20 20	DAY 2 S DAY 2 Lition of Exp 2	MO 9 Descrip DINING MO 9 Descrip	Zip Code (Plus 4) 19047 Zip Code (Plus 4)	/ENUE State PA State	oom Paid TIME SPORTS BAR g Address 1558 E. MAPL LANGHORNE com Paid EVILLE INN g Address 4 TRENTON R	To Wh OVER Mailin City To Wh HULM
To Whom Paid OVERTIME SPORTS BAR Mo DAY YEAR Mo DAY YEAR Mailing Address 1558 E. MAPLE AVENUE State PA 19047 To Whom Paid HULMEVILLE INN Mo DAY YEAR State PA 19047 To Whom Paid HULMEVILLE INN Mo DAY YEAR State PA 19047 State PA 19047 To Whom Paid HULMEVILLE INN Mo DAY YEAR State PA 19047 State PA 19047 Mo DAY YEAR State PA 2015 \$ City LANGHORNE State PA 2015 State PA 2015		\$ \$	R EXPEN	YEAI 20 Pendit	DAY 2 Stion of Exp Continuous of Exp	MO 9 Descrip DINING MO 9 Descrip DINING	Zip Code (Plus 4) 19047 Zip Code (Plus 4)	PA /ENUE State PA State PA	oom Paid TIME SPORTS BAR g Address 1558 E. MAPL LANGHORNE oom Paid EVILLE INN g Address 4 TRENTON R LANGHORNE	To Wh OVER Mailin City To Wh HULM Mailin City
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To Whom Paid NESHAMINY HIGH SCHOOL			мо	DAY	YEAR		
Mailing Address 2001 OLD LIN	ICOLN HIGHWAY		9	18	2015	\$	75.00
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Descrip T-SHIR	tion of Exp	penditure		
To Whom Paid MIDDLETOWN ATHLETIC ASSN			МО	DAY	YEAR		
Mailing Address 78 HIGHLAND	PARK DR		9	18	2015	\$	275.00
City LEVITTOWN	State PA	Zip Code (Plus 4) 19056	Descrip SPONS	otion of Exp	penditure		
To Whom Paid LOWER SOUTHAMPTON ATHLETIC	C ASSOCIATION		МО	DAY	YEAR		
Mailing Address 36 JAY STREE	Т		9	18	2015	\$	150.00
City FEASTERVILLE	State PA	Zip Code (Plus 4) 19053		otion of Exp	penditure		
To Whom Paid FRANK FARRY			МО	DAY	YEAR		
Mailing Address 203 NATIONA	L AVENUE		10	2	2015	\$	455.61
City LANGHORNE	State PA	Zip Code (Plus 4) 19047		otion of Exp			
To Whom Paid OVERTIME SPORTS BAR			МО	DAY	YEAR		
Mailing Address 1558 E. MAPL	E AVENUE		10	5	2015	\$	59.13
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Descrip	otion of Exp	penditure		
To Whom Paid IRISH ROVER STATION HOUSE			мо	DAY	YEAR		
Mailing Address 1033 S BELLE	VUE AVENUE		10	5	2015	\$	41.75

To Whom Paid EIG HOSTING	мо	DAY	YEAR				
Mailing Address 70 BLANCH	IARD ROAD 3RD FLOOR		10	13	2015	\$ \$	131.88
City BURLINGTON	State MA	Zip Code (Plus 4) 01803	Ī -	otion of Exp	enditure		
Enter Grand Total of Expend	ditures on Page 1, Re	port Cover Page, Item D				\$	PAGE TOTAL 4,221.82
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