

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 :		2008205		Report Filed By :		CANDIDATE		COMMITTEE		✓		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF FRANK FARRY													
Street Address: PO BOX 231													
City: LANGHORNE						State: PA				Zip Code: 19047			
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	✓			
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	No	✓			
	ANNUAL REPORT	7.	Year 2015	FILING METHOD () CHECK ONE			PAPER	✓	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
						MO	DAY	YEAR					
						11	3	2015					
Summary of Receipts and Expenditures from:						MO	DAY	YEAR	FOR OFFICE USE ONLY				
						10	20	2015					
						11	23	2015					
A. Amount Brought Forward From Last Report						\$ 95,641.16							
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 575.00							
C. Total Funds Available (Sum Of Lines A and B)						\$ 96,216.16							
D. Total Expenditures (From Schedule III)						\$ 2,472.07							
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 93,744.09							
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 600.00							
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

Signature

Printed Name

My Commission Expires

Email

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 FRANK FARRY	From: <u>10/20/2015</u> To: <u>11/23/2015</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 25.00

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)	\$ 0.00
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)	\$ 300.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 300.00

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.)	\$ 575.00
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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 FRIENDS OF FRANK FARRY	Reporting Period From: <u>10/20/2015</u> To: <u>11/23/2015</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 MERCK EMPLOYEES PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 601 PENNSYLVANIA AVENUE NW SUITE 1200			10	20	2015	
City WASHINGTON	State DC	Zip Code (Plus 4) 20004				

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 FRANK FARRY	From: <u>10/20/2015</u> To: <u>11/23/2015</u>

DATE				AMOUNT
Full Name of Contributing Committee				
STEAMFITTERS LOCAL UNION 449				
Mailing Address				
1517 WOODRUFF STREET				
City	State	Zip Code (Plus 4)		
PITTSBURGH	PA	15220		
		11	2	2015
				\$ 300.00

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

PAGE TOTAL
\$ 300.00

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	Reporting Period
	From: To:

			DATE	AMOUNT		
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

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 From: To:
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			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	
FRIENDS OF FRANK FARRY		From: <u>10/20/2015</u> To: <u>11/23/2015</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 RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 600.00
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.)			\$ 600.00

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 FRANK FARRY				Reporting Period From: <u>10/20/2015</u> To: <u>11/23/2015</u>			
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				DATE	AMOUNT		
Full Name of Contributor FOUR LANES END, LLC				MO	DAY	YEAR	\$ 600.00
Mailing Address 106 MAPLE AVENUE				11	1	2015	
City LANGHORNE	State PA	Zip Code(Plus 4) 19047					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business	City	State	Zip Code(Plus 4)	Description of Contribution			
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.							PAGE TOTAL 600.00

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF FRANK FARRY	From <u>10/20/2015</u> To: <u>11/23/2015</u>

				DATE	AMOUNT		
To Whom Paid COVEY FOR JUSTICE				MO	DAY	YEAR	\$ 250.00
Mailing Address 115 N. BROAD STREET				10	27	2015	
City DOYLESTOWN	State PA	Zip Code (Plus 4) 18901	Description of Expenditure CONTRIBUTION				
To Whom Paid MARTIN/LOUGHERY 2015				MO	DAY	YEAR	\$ 250.00
Mailing Address PO BOX 639				10	27	2015	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure CONTRIBUTION				
To Whom Paid FRIENDS OF DON PETRILLE				MO	DAY	YEAR	\$ 100.00
Mailing Address PO BOX 612				10	27	2015	
City FEASTERVILLE	State PA	Zip Code (Plus 4) 19053	Description of Expenditure CONTRIBUTION				
To Whom Paid COMMITTEE TO ELECT MARY K. SMITHSON				MO	DAY	YEAR	\$ 100.00
Mailing Address 6 CAVALLO WAY				10	27	2015	
City DOYLESTOWN	State PA	Zip Code (Plus 4) 18901	Description of Expenditure CONTRIBUTION				
To Whom Paid COMMITTEE TO ELECT CAMPBELL				MO	DAY	YEAR	\$ 100.00
Mailing Address PO BOX 873				10	27	2015	
City QUAKERTOWN	State PA	Zip Code (Plus 4) 18951	Description of Expenditure CONTRIBUTION				

To Whom Paid FRIENDS OF TOM PANZER			MO	DAY	YEAR	\$ 100.00
Mailing Address PO BOX 123			10	27	2015	
City DOYLESTOWN	State PA	Zip Code (Plus 4) 18901	Description of Expenditure CONTRIBUTION			
To Whom Paid OVERTIME SPORTS BAR			MO	DAY	YEAR	\$ 86.97
Mailing Address 1558 E. MAPLE AVENUE			11	2	2015	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure DINING			
To Whom Paid PUBLISHING CONCEPTS			MO	DAY	YEAR	\$ 109.90
Mailing Address 4835 LYDON B. JOHNSON HIGHWAY			11	2	2015	
City DALLAS	State TX	Zip Code (Plus 4) 75244	Description of Expenditure ALUMNI DIRECTORY			
To Whom Paid B2BA, INC.			MO	DAY	YEAR	\$ 100.00
Mailing Address PO BOX 1594			11	12	2015	
City LEVITTOWN	State PA	Zip Code (Plus 4) 19058	Description of Expenditure MEMBERSHIP			
To Whom Paid LOWER SOUTHAMPTON TOWNSHIP			MO	DAY	YEAR	\$ 50.00
Mailing Address 1500 DESIRE AVENUE			11	12	2015	
City FEASTERVILLE	State PA	Zip Code (Plus 4) 19053	Description of Expenditure CONTRIBUTION			
To Whom Paid ARCHBISHOP WOOD GIRLS BASKETBALL			MO	DAY	YEAR	\$ 100.00
Mailing Address 655 YORK ROAD			11	12	2015	
City WARMINSTER	State PA	Zip Code (Plus 4) 18974	Description of Expenditure SPONSOR			

To Whom Paid UPPER SOUTHAMPTON REPUBLICAN CLUB			MO	DAY	YEAR	
Mailing Address 800 WILLOPENN DRIVE			11	12	2015	
City SOUTHAMPTON	State PA	Zip Code (Plus 4) 18966	Description of Expenditure CONTRIBUTION			

To Whom Paid ABINGTON-LEVITTOWN CHAPTER			MO	DAY	YEAR	
Mailing Address 301 E. MAPLE AVE			11	12	2015	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure AD			

To Whom Paid FEDERAL EXPRESS			MO	DAY	YEAR	
Mailing Address RITTENHOUSE CIRCLE			11	13	2015	
City BRISTOL	State PA	Zip Code (Plus 4) 19007	Description of Expenditure MAILING			

To Whom Paid PETRI FOR CONGRESS			MO	DAY	YEAR	
Mailing Address PO BOX 544			11	17	2015	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure CONTRIBUTION			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 2,472.07

