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 | 95002 | 237 | | | | port ed B | | CAND | IDA | ΓE | | COMN | MITTEE | ✓ | LOB | BYIS | | |
|---|-----------------------|-------------|-----------------|----------------------|------------|---------|--------------|----------|--------------------|--------|--------|---------|-----------|------------------------|----------------|----------|---------|-----------|----------|
| Name of Filing C | committee | e, Candida | ite or Lo | obbyist: | | BAR | RRAF | STE | PHEN F | RIENI | DS (|)F | | | | | | | - |
| Street Address: | 12 BI | ERNARD S | ST | | | | | | | | | | | | | | | | |
| City: | ASTO | N | | | | | | | State: | PA | PA | | | Zip Cod | ie: 19 | 014-2 | 2330 | | |
| TYPE OF REPORT | 6TH TUES PRE-PRIM | | 1. | 2ND FRID PRIMARY | AY PRE | - | 2. X | 30 DA | | | | 3. | | AMENDMENT REPORT? | | Yes | | No | / |
| (place X to the right of | 6TH TUES PRE-ELEC | | 4. | 2ND FRID ELECTION | | E- | 5. | 30 DA | | POS | Τ- | 6. | | TERMINATION REPORT? | | Yes | | No | / |
| report type) | ANNUAL | REPORT | 7. | Year 200 | 0 | | | | NG METH CHECK (| | | | | PAPER | | \ | DIS | KETTE | |
| Name of Office S | ought by | Candidat | e: | | | - | | | DATE | OF E | LEC | TIO | N | District Number | Office Code | Pa | rty Co | le Cou | |
| REPRESENTATI | VE IN TH | E GENED | ۸۱ ۸ ς ς | EMRI V | | | | | МО | DA | Υ | YE | AR | | STH | RE | P | 23 | |
| NEI RESERVATI | VE IIV III | L GLIVER | AL A33 | LINDLI | | | | | 1 | 1 | | 7 | 2000 | | (SEE IN | STRUCT | ONS FO | R CODES | 5) |
| Summary of Expenditures | • | and | МО | DAY | YEAF | | _ | _ | МО | DA | | | AR | FO | R OFFI | CE USI | ONL | Y | |
| | | | | | 1 | 1 | | О | | 3 | 2 | | 2000 | | | | | | |
| A. Amount Bro | | | | • | | | | \$ | | | | | 529.72 | | | | | | |
| B. Total Moneta | | | | | m Scne | eauie | 1) | \$ | | | | | .50.00 | | | | | | |
| | | | | | | | | | 79.72 | | | | | | | | | | |
| D. Total Expenditures (From Schedule III) | | | | | | | \$ | | | | | 69.08 | | | | | | | |
| E. Ending Cash | | | | | | _ | _ | \$ | | | | 22,8 | 10.64 | | | | | | |
| F. Value Of In- | | | | | | ile II | () | \$ | | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Ob | ligations | (From S | Schedule 1 | (V) | | | \$ | | | | | 0.00 | | | | | | |
| | | | | | | | | | CTION | | | | | | | | | | |
| PART I - If this is I swear (or affirm) | | • | • | _ | | | | | | - | • | | | | f my kno | wledne | and h | aliaf tı | 1110 |
| correct and comple | | ерогс, піст | aumg me | attacheu s | ciledule | 3 1110 | u 011 | papei | or by elec | | c ille | uiuiii, | are to t | ine best o | i iliy kilo | wieuge | and b | ener , ci | ue |
| Sworn to and subs | cribed befo day of | ore me this | | 20 | | | | | | | | s | ignature | of Perso | n Submit | ting Re | port | | |
| | _ | Signatur | e | | | | | - - | | | | | | Prin | ted Name | • | | | |
| My Commission Ex | cpires | | | | | | | | | | | | | Ema | il | | | | _ |
| | • | мо | DA | AY | YR | | | | | | Area | a Cod | e | Daytim | e Teleph | one Nu | ımber | | |
| Part II- If this is | a report | of a cand | idate's | authorize | d Comr | nitte | e, C | andid | ate shal | l sigr | n he | re. | | | | | | | |
| I swear (or affirm) No 320) as amende | | e best of m | y knowle | edge and be | elief this | s polit | tical | comm | ittee has | not v | iolate | ed an | y provisi | ions of the | e act of J | une 3,1 | .937 (I | P.L. 133 | з, |
| Sworn to and subsc | | e me this | | | | | | | | _ | | | Si | ignature o | of Candid | ate | | | - $ $ |
| | day of | | | | | | | - | | _ | | | | Printe | d Name | | | | _ |
| | S | Signature | | | | | | - | | | | | | _ | | | | | |
| My Commission Exp | ires | | | | | | | | | | | | | Ema | il | | | | |
| | _ | МО | D | AY | YF | ì. | | • | | A | rea C | ode | | Da | aytime T | elepho | ne Nur | nber | _ |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting Period | | |
|--|------------------|-----|-----------|
| BARRAR STEPHEN FRIENDS OF | From: | То: | 3/20/2000 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | |
| TOTAL for the Reporting | Period (1) | \$ | 250.00 |
| 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) | | | |
| Contributions Received From Political Committees (Part A) | | \$ | 800.00 |
| All Other Contributions (Part B) | | \$ | 100.00 |
| TOTAL for the Reporting | Period (2) | \$ | 900.00 |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | |
| Contributions Received From Political Committees (Part C) | | \$ | 0.00 |
| All Other Contributions (Part D) | | \$ | 0.00 |
| TOTAL for the Reporting | Period (3) | \$ | 0.00 |
| 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 Pa | | \$ | 1,150.00 |

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 Re | | | | porting F | Period | | | |
|---|--------------------|---------------------------------|-----|-----------|--------|------|----|-----------|
| BARRAR STEPHEN FRIENDS OF | | | Fre | om: | | То | : | 3/20/2000 |
| | | • | | | DATE | | | AMOUNT |
| Full Name of Contributing Committee POLITICAL INFORMATION COMMITTEE | OF CPAS | | | МО | DAY | YEAR | | |
| Mailing Address 100 PINE ST STE | 275 | | | | | | \$ | 100.00 |
| City HARRISBURG | State PA | Zip Code (Plus | 4) | 2 | 15 | 2000 | | |
| Full Name of Contributing Committee PA MEDICAL PAC | | | | МО | DAY | YEAR | | |
| Mailing Address P O BOX 8820 | | | | | | | \$ | 150.00 |
| City HARRISBURG | State PA | Zip Code (Plus 171058820 | 4) | 2 | 15 | 2000 | | |
| Full Name of Contributing Committee AFSCME AFL CIO COUNCIL 13 | | | | МО | DAY | YEAR | | |
| Mailing Address 4031 EXECUTIVE | PARK DRIVE | | | | | | \$ | 250.00 |
| City HARRISBURG | State PA | Zip Code (Plus | 4) | 2 | 15 | 2000 | | |
| Full Name of Contributing Committee PECO ENERGY CO PAC | | | | МО | DAY | YEAR | | |
| Mailing Address 2301 MARKET ST | S 15 1 | | | , | 1. | 2000 | \$ | 200.00 |
| City PHILA | State PA | Zip Code (Plus | 4) | 2 | 15 | 2000 | | |
| Full Name of Contributing Committee PENNSYLVANIA REALTORS PAC | | | | МО | DAY | YEAR | | |
| Mailing Address 4501 CHAMBERS | HILL RD | | | | | 2655 | \$ | 100.00 |
| City HARRISBURG | State PA | Zip Code (Plus | 4) | 2 | 15 | 2000 | | |

PAGE TOTAL

800.00

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

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 | | |
|---------------------------------------|------------------|-----|-----------|
| BARRAR STEPHEN FRIENDS OF | From: | То: | 3/20/2000 |
| | DATE | | AMOUNT |

| Full Name of Contributor ANTHONY SCORSONE | | МО | DAY | YEAR | | |
|---|-------|-------------------|-----|------|------|-----------|
| Mailing Address 121 MORGAN RD | | | | | | \$ 100.00 |
| City ASTON | State | Zip Code (Plus 4) | 2 | 15 | 2000 | |
| | PA | 19014 | | | | |

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

PAGE TOTAL \$ 100.00

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 | | | | | |
|---------------------------------------|----------------------|----------|-------------|------|-----|------|----|------------|
| | | | From: | | | То: | | |
| | | | | DA | TE | | Α | MOUNT |
| Full Name of Contributing Committee | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Cod | e (Plus 4) | | | | | |
| | | | | | | | | PAGE TOTAL |
| Enter Grand Total of Part C on Sche | dule I, Detailed Sum | nmary Pa | age, Sectio | n 3. | | | \$ | 0.00 |

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 | | | | Reporting Period | | | | | | |
|---|----------------|-----------|--------------|------------------|--------|-------|------|---------------|-------------|------|
| | | | | Fror | n: | | To | То: | | |
| | | | | | D | ATE | | | AMOUNT | |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | | | \$ | | 0.00 |
| City | State | Zi | p Code (Plus | 5 4) | | | | | | |
| Employer Name | | · | | | Occupa | tion | | • | | |
| Employer Mailing Address/Principal Plac Business | ce of | | City | | • | State | | Zip Co | ode (Plus 4 |) |
| Enter Grand Total of Part C on Sche | edule I, Detai | iled Sumr | nary Page, | Section | on 3. | | | | PAGE TOTA | |
| | | | | | | | | \$ | (| 0.00 |

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 | | Repor | ting Perio | od | | | |
|-------------------------------|-------------------------|-------------------|---------|------------|-----|------|----|----------|
| | | | From: | | | To: | | |
| | | | • | D | ATE | | AI | MOUNT |
| Full Name | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (| Plus 4) | | | | | |
| Receipt Description | • | • | | • | | • | • | |
| Enter Grand Total of Part E o | on Schedule I. Detailed | d Summary Page | Section | 4 | | | PA | GE TOTAL |
| - Inc. Statia Total of Full E | Jonedane 1, Betanet | . Jammar y r uge, | 500.011 | | | | \$ | 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 | | |
|--|------------------|-----|------------------|
| BARRAR STEPHEN FRIENDS OF | From: | To: | <u>3/20/2000</u> |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | PER 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 Re | | | | Reporting Period | | | | | |
|--|---------------------|-----------------------|----------|------------------|------|-----------|------------|--|--|
| | From: | | | | | | | | |
| | | | | 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 | ле Г | | PAGE TOTAL | | |
| Section 2. | incudic 11, 111 Kii | ia contributions beta | nea Sam | illial y I as | , | | PAGE TOTAL | | |
| | | | | | | \$ | 0.00 | | |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | | | | Re | porting P | Period | | | |
|--|----------------|--------|------------------|--------|-----------|-----------|--------|---------|--------------------|
| | | | | Fro | om: | | То: | | |
| | | | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 0.00 |
| City | State | | Zip Code(Plus 4) | | | | | | |
| Employer of Contributor | | | | | Occupa | tion | | | |
| Employer Mailing Address/Principal Plac Business | ce of Cit | ity | State | | Zip 4) | Code(Plus | Descri | ption o | f Contribution |
| Enter Grand Total of Part G on Sch Summary Page, Section 3. | edule II, In-K | Kind (| Contributions De | etaile | ed | | | | PAGE TOTAL 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting Period | | |
|---------------------------------------|------------------|-----|-----------|
| BARRAR STEPHEN FRIENDS OF | From | То: | 3/20/2000 |
| | DATE | | AMOUNT |

| | | | | DATE | | | AMOUNT |
|--|--------------------|-----------------------------------|---|-----------------------|-----------|----|----------|
| To Whom Paid AMERICAN LEGION POST 926 OF ASTON | | | мо | DAY | YEAR | | |
| Mailing Address | | | 2 | 16 | 2000 | \$ | 170.00 |
| City ASTON | State PA | Zip Code (Plus 4) 19014 | Description of Expenditure HALL RENTAL OF BENEFIT | | | | |
| To Whom Paid U S POST MASTER | | | МО | DAY | YEAR | | |
| Mailing Address 1401 HUDDELL AVE | | | 2 | 16 | 2000 | \$ | 315.00 |
| City MARCUS HOOK | State PA | Zip Code (Plus 4) 19061 | Description of Expenditure POST CARD MAILERS | | | | |
| To Whom Paid STEPHEN BARRAR | | | МО | DAY | YEAR | | |
| Mailing Address 495 BETHEL AVE | | | 2 | 16 | 2000 | \$ | 238.11 |
| City ASTON | State PA | Zip Code (Plus 4) 19061 | Description of Expenditure RE IMB MISC EXPENSES | | | | |
| To Whom Paid HILLTOP PUB | | | МО | DAY | YEAR | | |
| Mailing Address | | | 2 | 16 | 2000 | \$ | 2,000.00 |
| City | State PA | Zip Code (Plus 4) | Descrip FUND F | tion of Exp RAISER | penditure | | |
| To Whom Paid DUNKIN EDUCATIONAL SERVICES | | | МО | DAY | YEAR | | |
| Mailing Address 1560 CAROLINE DRIVE | | | 2 | 16 | 2000 | \$ | 70.00 |
| City ASTON | State PA | Zip Code (Plus 4) 19014 | Description of Expenditure AD BOOK PLAY | | | | |

| To Whom Paid ASTON SPORTS HALL OF FAME | | | МО | DAY | YEAR | | | |
|---|-----------------------|-----------------------------------|--|---|--|----|--|--------|
| Mailing Address P O BOX 2164 | | | 2 | 16 | 2000 | \$ | | 50.00 |
| City ASTON | State | Zip Code (Plus 4) | Descrip | tion of Exr | enditure | | | |
| - 451010 | PA | 19014 | Description of Expenditure AD BOOK | | | | | |
| To Whom Paid HRCC 2000 | | | мо | DAY | YEAR | | | |
| Mailing Address P O BOX 11787 | | | 2 | 16 | 2000 | \$ | | 500.00 |
| City HARRISBURG State Zip Code (Plus 4) | | | Descrip | tion of Ext | enditure | | | |
| .w.ii.ii.debene | PA | 17108 | Description of Expenditure DONATION | | | | | |
| To Whom Paid CHICHESTER ICE HOCKEY | | | МО | DAY | YEAR | | | |
| Mailing Address 495 CHERRY TREE RD | | | 2 | 16 | 2000 | \$ | | 50.00 |
| City ASTON | State | Zip Code (Plus 4) | Description of Expenditure | | | | | |
| | PA | 19014 | DONATION | | | | | |
| | | | | | | | | |
| To Whom Paid R E A C H | | | МО | DAY | YEAR | | | |
| | OGE RD | | MO 2 | DAY 16 | YEAR 2000 | \$ | | 150.00 |
| R E A C H Mailing Address 522 SMITH BRID | OGE RD | Zip Code (Plus 4) | 2 | 16 | 2000 | | | 150.00 |
| R E A C H Mailing Address 522 SMITH BRID | | Zip Code (Plus 4) 19342 | 2 | 16 | 2000 | | | 150.00 |
| R E A C H Mailing Address 522 SMITH BRID | State | | 2 Descrip | 16 | 2000 | | | 150.00 |
| R E A C H Mailing Address 522 SMITH BRID City GLEN MILLS To Whom Paid | State PA | | 2 Descrip | 16 Ition of Exp | 2000 penditure | | | 150.00 |
| Mailing Address 522 SMITH BRID City GLEN MILLS To Whom Paid C B A CHI NIGHT Mailing Address 624 BALTIMORE | State PA | | Description DONAT | 16 tion of Exp ION DAY | 2000 penditure YEAR 2000 | \$ | | |
| Mailing Address 522 SMITH BRID City GLEN MILLS To Whom Paid C B A CHI NIGHT Mailing Address 624 BALTIMORE | State PA PIKE | 19342 | Description DONAT | 16 Ition of Exp ION DAY 16 | 2000 penditure YEAR 2000 | \$ | | |
| Mailing Address 522 SMITH BRID City GLEN MILLS To Whom Paid C B A CHI NIGHT Mailing Address 624 BALTIMORE | State PA PIKE State | 19342 Zip Code (Plus 4) | Description DONAT MO 2 Description Desc | 16 Ition of Exp ION DAY 16 | 2000 penditure YEAR 2000 | \$ | | |
| Mailing Address 522 SMITH BRID City GLEN MILLS To Whom Paid C B A CHI NIGHT Mailing Address 624 BALTIMORE City SPRINGFIELD To Whom Paid | State PA PIKE State | 19342 Zip Code (Plus 4) | Descrip DONAT MO 2 Descrip AD BOO | 16 Ition of Exp ION DAY 16 Ition of Exp OK | 2000 Penditure YEAR 2000 Penditure | \$ | | |
| Mailing Address 522 SMITH BRID City GLEN MILLS To Whom Paid C B A CHI NIGHT Mailing Address 624 BALTIMORE City SPRINGFIELD To Whom Paid H S S J F SPORTS ASSOCIATION | State PA PIKE State | 19342 Zip Code (Plus 4) | Descrip DONAT MO 2 Descrip AD BOO MO | 16 Ition of Exp ION DAY 16 Ition of Exp OK DAY | 2000 Penditure YEAR 2000 Penditure YEAR 2000 | \$ | | 50.00 |

| | | | | | | | PAGE 14 |
|--|----------------------|-----------------------------------|---|-----|------|----|------------|
| To Whom Paid CHICHESTER AFTER PROM PARTY | | | | DAY | YEAR | | |
| Mailing Address 121 BELMONT DR | | | 2 | 16 | 2000 | \$ | 100.00 |
| City BOOTHWYN | State PA | Zip Code (Plus 4) 19061 | Description of Expenditure DONATION | | | | |
| To Whom Paid ASTON 3RD WARD REPUBLICAN PARTY | | | мо | DAY | YEAR | | |
| Mailing Address 3149 PENNELL RD | | | 2 | 16 | 2000 | \$ | 50.00 |
| City MEDIA | State PA | Zip Code (Plus 4) 19063 | Description of Expenditure DONATION | | | | |
| To Whom Paid BUDGET PRINTING CENTER | | | МО | DAY | YEAR | | |
| Mailing Address 624 BALTIMORE PIKE | | | 2 | 16 | 2000 | \$ | 600.00 |
| City SPRINGFIELD | State PA | Zip Code (Plus 4) 19064 | Description of Expenditure PRINTING | | | | |
| To Whom Paid U S POSTMASTER | · | · | мо | DAY | YEAR | | |
| Mailing Address 1401 HUDDELL AVE | | | 2 | 29 | 2000 | \$ | 480.00 |
| City MARCUS HOOK | State PA | Zip Code (Plus 4) 19061 | Description of Expenditure POSTAGE | | | | |
| To Whom Paid BETH H ZENUK | | | МО | DAY | YEAR | | |
| Mailing Address 12 BERNARD ST | | | 2 | 29 | 2000 | \$ | 95.97 |
| City ASTON | State PA | Zip Code (Plus 4) 19014 | Description of Expenditure RE IMB OFFICE SUPPLIES | | | | |
| Enter Grand Total of Expend | itures on Page 1 Pe | nort Cover Page Item D | | | | | PAGE TOTAL |
| Litter Grand Total of Expend | itules on raye 1, Re | port cover rage, Itelli D | • | | | \$ | 4,969.08 |