

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 <input checked="" type="checkbox"/>		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. <input checked="" type="checkbox"/>	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 2016	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
						MO	DAY	YEAR	REP			
						11	8	2016	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		1	1	2016		3	7	2016				
A. Amount Brought Forward From Last Report						\$ 117,361.20						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 10,275.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 127,636.20						
D. Total Expenditures (From Schedule III)						\$ 2,511.77						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 125,124.43						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 1,800.00						
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>1/1/2016</u> To: <u>3/7/2016</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)	\$ 2,000.00
TOTAL for the Reporting Period (2)	\$ 2,250.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 4,000.00
All Other Contributions (Part D)	\$ 4,000.00
TOTAL for the Reporting Period (3)	\$ 8,000.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 10,275.00
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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>1/1/2016</u> To: <u>3/7/2016</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 CHAPTER 830 DRIVE			MO	DAY	YEAR	\$ 250.00
Mailing Address 12298 TOWNSEND ROAD			2	11	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19154				

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
FRIENDS OF FRANK FARRY	From: <u>1/1/2016</u> To: <u>3/7/2016</u>

				DATE			AMOUNT
Full Name of Contributor ALLEN MASON				MO	DAY	YEAR	\$ 200.00
Mailing Address 127 CHATHAM PLACE				2	26	2016	
City LANSDALE	State PA	Zip Code (Plus 4) 19446					
Full Name of Contributor THOMAS A. GOCKOWSKI				MO	DAY	YEAR	\$ 200.00
Mailing Address 244 HOLLY DRIVE				2	26	2016	
City CHALFONT	State PA	Zip Code (Plus 4) 18914					
Full Name of Contributor THOMAS A. WATKINS				MO	DAY	YEAR	\$ 200.00
Mailing Address 2512 PARK ROAD				2	26	2016	
City WARRINGTON	State PA	Zip Code (Plus 4) 18976					
Full Name of Contributor MATTHEW M. GARBER				MO	DAY	YEAR	\$ 200.00
Mailing Address 97 BYERS ROAD				2	26	2016	
City OTTSVILLE	State PA	Zip Code (Plus 4) 18942					
Full Name of Contributor KENNETH E. HEYDT				MO	DAY	YEAR	\$ 200.00
Mailing Address 27 TICE LANE				2	26	2016	
City PERKASIE	State PA	Zip Code (Plus 4) 18944					
Full Name of Contributor MARK W. EISOLD				MO	DAY	YEAR	\$ 250.00
Mailing Address 1610 MEETINGHOUSE ROAD				2	26	2016	
City WARMINSTER	State PA	Zip Code (Plus 4) 18974					

Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
DAVID R. JONES				2	26	2016	
Mailing Address 1456 FERRY ROAD BUILDING 500							
City DOYLESTOWN	State PA	Zip Code (Plus 4) 18901					

Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
JUDITH STERN GOLDSTEIN				2	26	2016	
Mailing Address 17 STERLING CREST COURT							
City DOYLESTOWN	State PA	Zip Code (Plus 4) 18901					

Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
JON S. TRESSLAR				2	26	2016	
Mailing Address 80A COUNTY LINE ROAD E.							
City EASTON	State PA	Zip Code (Plus 4) 18042					

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

PAGE TOTAL

\$ 2,000.00

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 FRIENDS OF FRANK FARRY	Reporting Period From: <u>1/1/2016</u> To: <u>3/7/2016</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
LAWPAC				1	12	2016	
Mailing Address800 NORTH THIRD STREET							
CityHARRISBURG	StatePA	Zip Code (Plus 4)17102					
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
IBC PAC				1	12	2016	
Mailing Address1901 MARKET STREET							
CityPHILADELPHIA	StatePA	Zip Code (Plus 4)19103					
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
AFSCME COUNCIL 13 POLITICAL & LEGISLATIVE				1	18	2016	
Mailing Address4031 EXECUTIVE PARK DRIVE							
CityHARRISBURG	StatePA	Zip Code (Plus 4)17111					
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
1776 P.A.C.				2	8	2016	
Mailing Address3031 A WALTON ROAD SUITE 201							
CityPLYMOUTH MEETING	StatePA	Zip Code (Plus 4)19462					
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
SPRINKLER FITTERS LOCAL UNION #692				2	17	2016	
Mailing Address14004 MCNULTY ROAD							
CityPHILADELPHIA	StatePA	Zip Code (Plus 4)19154					
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
COMMITTEE FOR A BETTER COMMONWEALTH				2	26	2016	
Mailing AddressPO BOX 5102							
CityNEW BRITAIN	StatePA	Zip Code (Plus 4)18901					

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

PAGE TOTAL

\$ 4,000.00

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 FRIENDS OF FRANK FARRY	Reporting Period From: <u>1/1/2016</u> To: <u>3/7/2016</u>
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				DATE	AMOUNT		
Full Name of Contributor JOHN L. SILVI				MO	DAY	YEAR	\$ 500.00
Mailing Address 504 WHEATFIELD LANE				1	15	2016	
City NEWTOWN	State PA	Zip Code (Plus 4) 18940					
Employer Name SILVI CONCRETE				Occupation OWNER			
Employer Mailing Address/Principal Place of Business 355 NEWBOLD ROAD			City FAIRLESS HILLS		State PA	Zip Code (Plus 4) 19030	
Full Name of Contributor STEVEN HANN				MO	DAY	YEAR	\$ 500.00
Mailing Address 1542 BLUEBERRY COURT				2	26	2016	
City JAMISON	State PA	Zip Code (Plus 4) 18929					
Employer Name HAMBURG, RUBIN, MULLIN, MAXWELL & LUPIN, PC				Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 375 MORRIS ROADPO BOX 1479			City LANSDALE		State PA	Zip Code (Plus 4) 19446	
Full Name of Contributor JOSEPH W. PIZZO				MO	DAY	YEAR	\$ 500.00
Mailing Address 1007 TIMBER LANE				2	26	2016	
City BENSALEM	State PA	Zip Code (Plus 4) 19020					
Employer Name SELF-EMPLOYED				Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 1007 TIMBER LANE			City BENSALEM		State PA	Zip Code (Plus 4) 19020	
Full Name of Contributor CHARLES ADAM THOMAS				MO	DAY	YEAR	\$ 500.00
Mailing Address 142 SANDY RIDGE MOUNT AIRY ROAD				2	26	2016	
City STOCKTON	State NJ	Zip Code (Plus 4) 08559					
Employer Name GMG INSURANCE AGENCY				Occupation PRINCIPAL			
Employer Mailing Address/Principal Place of Business 60 BLACKSMITH ROAD			City NEWTOWN		State PA	Zip Code (Plus 4) 18940	

Full Name of Contributor PAULA M. KOVACS			MO	DAY	YEAR	\$ 500.00
Mailing Address 52 HILLCREST DRIVE			2	26	2016	
City DOYLESTOWN	State PA	Zip Code (Plus 4) 18901				
Employer Name HOMEMAKER			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		
680 MIDDLETOWN BOULEVARD		LANGHORNE	PA	19047		

Full Name of Contributor JEFFREY P. GARTON			MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 308			2	26	2016	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047				
Employer Name BEGLEY, CARLIN & MANDIO, LLP			Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		
680 MIDDLETOWN BOULEVARD		LANGHORNE	PA	19047		

Full Name of Contributor BRUCE E. COHEN			MO	DAY	YEAR	\$ 500.00
Mailing Address 440 SOUTH BROAD STREET UNIT 1902			2	26	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19146				
Employer Name CSL SERVICES			Occupation OWNER			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		
7905 BROWNING ROADSUITE 316		PENNSAUKEN	NJ	08109		

Full Name of Contributor CODY L. SPADACCINO			MO	DAY	YEAR	\$ 500.00
Mailing Address 171 STONEYFORD ROAD			2	26	2016	
City HOLLAND	State PA	Zip Code (Plus 4) 18966				
Employer Name TRI-STATE ENGINEERING			Occupation OWNER			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		
801 WEST STREET ROAD		FEASTERVILLE-TREVOSE	PA	19053		

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

PAGE TOTAL**\$** 4,000.00

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>1/1/2016</u> To: <u>3/7/2016</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)	\$ 1,800.00
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.)			\$ 1,800.00

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>1/1/2016</u> To: <u>3/7/2016</u>
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				DATE	AMOUNT
Full Name of Contributor FOUR LANES END, LLC				MO	\$ 600.00
Mailing Address 106 MAPLE AVE				1	
City LANGHORNE	State PA	Zip Code(Plus 4) 19047			
Employer of Contributor N/A				Occupation	
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution
Full Name of Contributor FOUR LANES END, LLC				MO	\$ 600.00
Mailing Address 106 MAPLE AVE				2	
City LANGHORNE	State PA	Zip Code(Plus 4) 19047			
Employer of Contributor N/A				Occupation	
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution
Full Name of Contributor FOUR LANES END, LLC				MO	\$ 600.00
Mailing Address 106 MAPLE AVE				3	
City LANGHORNE	State PA	Zip Code(Plus 4) 19047			
Employer of Contributor N/A				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 1,800.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF FRANK FARRY	From <u>1/1/2016</u> To: <u>3/7/2016</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
FEDERAL EXPRESS				
Mailing Address RITTENHOUSE CIRCLE	1	2	2016	\$ 4.26
City BRISTOL	State PA	Zip Code (Plus 4) 19007	Description of Expenditure MAILING	
To Whom Paid	MO	DAY	YEAR	
FIRESIDE INN				
Mailing Address 237 ELMWOOD AVE	1	2	2016	\$ 177.50
City FEASTERVILLE	State PA	Zip Code (Plus 4) 19053	Description of Expenditure DINING	
To Whom Paid	MO	DAY	YEAR	
SUNOCO				
Mailing Address 620 BRISTOL & BROWNSVILLE ROAD	1	2	2016	\$ 36.57
City TREVOSE	State PA	Zip Code (Plus 4) 19053	Description of Expenditure FUEL	
To Whom Paid	MO	DAY	YEAR	
THE OVERTIME SPORTS BAR				
Mailing Address 1558 MAPLE AVE	1	2	2016	\$ 45.00
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure DINING	
To Whom Paid	MO	DAY	YEAR	
MCGRATHS PUB				
Mailing Address 202 LOCUST STREET	1	2	2016	\$ 168.86
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure DINING	
To Whom Paid	MO	DAY	YEAR	
BCRC				
Mailing Address 115 NORTH BROAD STREET	1	18	2016	\$ 500.00
City DOYLESTOWN	State PA	Zip Code (Plus 4) 18901	Description of Expenditure CONTRIBUTION	

To Whom Paid			MO	DAY	YEAR	\$ 100.00
BUCKS COUNTY SPORTS HALL OF FAME						
Mailing Address PO BOX 741			1	28	2016	
City NEWTOWN	State PA	Zip Code (Plus 4) 18940	Description of Expenditure AD			

To Whom Paid			MO	DAY	YEAR	\$ 100.00
ASSUMPTION BVM PARISH						
Mailing Address 1900 MEADOWBROOK ROAD			1	28	2016	
City FEASTERVILLE	State PA	Zip Code (Plus 4) 19053	Description of Expenditure CONTRIBUTION			

To Whom Paid			MO	DAY	YEAR	\$ 200.00
NESHAMINY HIGH SCHOOL						
Mailing Address 2001 OLD LINCOLN HIGHWAY			1	28	2016	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure AD			

To Whom Paid			MO	DAY	YEAR	\$ 86.00
USPS						
Mailing Address 980 WHEELER WAY			2	2	2016	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure PO BOX RENEWAL			

To Whom Paid			MO	DAY	YEAR	\$ 100.00
BCSPDPC INC.						
Mailing Address 82 PENN LANE			2	10	2016	
City FALLSINGTON	State PA	Zip Code (Plus 4) 19054	Description of Expenditure AD			

To Whom Paid			MO	DAY	YEAR	\$ 4.41
FEDERAL EXPRESS						
Mailing Address PO BOX 371461			2	10	2016	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15250	Description of Expenditure MAILING			

To Whom Paid			MO	DAY	YEAR	\$ 780.28
BELLA TORI						
Mailing Address 321 S. BELLEVUE AVE			2	16	2016	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure CATERING			

To Whom Paid			MO	DAY	YEAR	\$ 93.00
OVERTIME SPORTS BAR						
Mailing Address 1558 E MAPLE AVE			3	2	2016	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure DINING			

To Whom Paid LANGHORNE HOTEL			MO	DAY	YEAR	\$ 63.50
Mailing Address 100 W. MAPLE AVE			3	2	2016	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure DINING			

To Whom Paid IRISH ROVER STATIONHOUSE			MO	DAY	YEAR	\$ 52.39
Mailing Address 1033 S. BELLEVUE AVE			3	2	2016	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure DINING			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 2,511.77

