#### **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	20120	0098				ported B		CAND	IDA	ATE		COMN	ITTEE	<b>✓</b>	LOB	BYIS	•	
Name of Filing C	ommittee	, Candida	ite or Lo	obbyist:		FLYI	NN,	MART	Y FRIE	NDS	S OF								
Street Address:	1633	REAR DO	OROTHY	′ ST															
City:	SCRA	NTON							State:	Р	PΑ			Zip Cod	<b>ie:</b> 18	3504-1	1107		
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	AY PRE	- 2	2. <b>X</b>	30 DA		PO	ST-	3.		AMENDM REPORT	Yes	] [	No	<b>/</b>	
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRIDA	AY PRI	E- !	5.	30 DA		PO	ST-	6.		TERMINA REPORT		Yes	] [	No	<b>\</b>
report type)	ANNUAL	REPORT	7.	<b>Year</b> 2016	5				NG METH CHECK (					PAPER		<b>\</b>	DIS	KETTE	
Name of Office S	ought by	Candidat	e:						DATE	0F	ELEC	CTIO	N	District Number	Office Code	Pa	rty Co	de Cou Cod	
									МО	D	PΑΥ	YE	AR	113	STH	DE	М	35	
REPRESENTATI	VE IN TH	E GENER	AL ASS	EMBLY					1	1		8	2016		(SEE IN	STRUCT	ONS F	OR CODES	5)
Summary of	•	and	МО	DAY	YEAR	2			МО	D	PAY	YE	EAR	FO	R OFFI	CE USI	ONL	Υ.	
Expenditures	from:			1	1 2	016	Т	0		4	1	.1	2016						
A. Amount Bro	ught Forw	ard From	Last R	eport				\$	_			80,5	545.64						
B. Total Moneta	ary Contri	butions A	and Rec	eipts (Fro	n Sche	dule	: I)	\$				15,2	250.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$				95,7	795.64						
D. Total Expend	ditures (F	rom Sche	dule II	I)				\$				2,9	89.12						
E. Ending Cash	Balance (	Subtract	Line D	From Line	C)			\$				92,8	06.52						
F. Value Of In-	Kind Cont	ributions	Receive	ed (From S	Schedu	le II	:)	\$					0.00						
G. Unpaid Debt	s And Ob	igations	(From S	Schedule I	V)			\$				10,0	00.00			·			
					AFF	IDA	\VI	ΓSE	CTION										
PART I - If this is		-	•	_						-	•								
I swear (or affirm) correct and comple		eport, inclu	uding the	attached s	chedule	s filed	d on	paper	or by elec	tro	nic me	dium	, are to t	he best o	f my kno	wledge	and b	elief , t	rue
Sworn to and subs	cribed befo day of	re me this		20						_		s	ignature	of Perso	n Submit	ting Re	port		
		Signatur						-		_				Prin	ted Name	•			_
My Commission Ex	pires	Signatui	•							_				Ema	il				_
	Ī	мо	D/	AY	YR			_			Are	a Cod	le	Daytim	e Teleph	ione Ni	ımber		
Part II- If this is	a report	of a cand	idate's	authorize	Comr	nitte	e, C	andid	ate shal	l si	gn he	re.							
I swear (or affirm) No 320) as amende		best of m	y knowle	edge and be	lief this	polit	tical	comm	ittee has	not	violat	ed an	y provisi	ions of th	e act of J	une 3,1	937 (	P.L. 133	3,
Sworn to and subsc		e me this								-			Si	ignature o	of Candid	ate			-
	day of —							_		_				Drinta	d Name				_
	S	ignature						-		_				Finite	- Haine				_
My Commission Exp														Ema	il				
		мо	D	AY	YR	ł		•		_	Area (	Code		Da	aytime T	elepho	ne Nu	mber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	J Period		
FLYNN, MARTY FRIENDS OF	From:	1/1/201	<u>6</u> To:	<u>4/11/2016</u>
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)			\$	2,750.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	2,750.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	3,500.00
All Other Contributions (Part D)			\$	9,000.00
TOTAL for the Reporting	Period	(3)	\$	12,500.00
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			\$	15,250.00

#### 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 Ca	andidate		Reporting	Period		
FLYNN, MARTY FRIENDS OF			From:	1/1/20	) <u>16</u> To	: <u>4/11/2016</u>
				DATE		AMOUNT
Full Name of Contributing Commit	ttee		МО	DAY	YEAR	
Mailing Address 1650 MARK	KET ST.					\$ 250.00
City PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus</b> 4 191030000	1	13	2016	
Full Name of Contributing Commit PENN NAT INS/INSERVCO INS S			МО	DAY	YEAR	
Mailing Address TWO NORT	H SECOND ST					<b>\$</b> 250.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4</b> 171010000	1	13	2016	
Full Name of Contributing Commit VERIZON GOOD GOVT CLUB OF			МО	DAY	YEAR	
Mailing Address 417 WALNU	JT STREET, 1ST FLOO	)R				<b>\$</b> 250.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus</b> 4 17101-1824	4	8	2016	
Full Name of Contributing Commit		•	МО	DAY	YEAR	
Mailing Address P.O. BOX 5			4	8	2016	\$ 250.00
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4</b> 171080000	1)	0	2010	
Full Name of Contributing Commit			МО	DAY	YEAR	
Mailing Address 2 N 9TH ST	FREET					<b>\$</b> 250.00
City ALLENTOWN	<b>State</b> PA	<b>Zip Code (Plus</b> 4	4)	8	2016	

Full Name of Contribution The Pennsylvania Insur				мо	DAY		YEAR	
Mailing Address 1	600 Market St							\$ 250.00
<b>City</b> Philadelphia		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19103	4		8	2016	
Full Name of Contributin	ng Committee			МО	DAY		YEAR	
Mailing Address 1	017 MUMMA RD	STE 103						\$ 250.00
City WORMLEYSBUR	.G	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170430000	4		8	2016	
Full Name of Contribution	ng Committee			МО	DAY		YEAR	
Mailing Address 2	00 CIVIC CENTE	R DR						\$ 250.00
City COLUMBUS		<b>State</b> OH	<b>Zip Code (Plus 4)</b> 432150000	4		8	2016	
Full Name of Contribution COHEN AND GRIGSBY				мо	DAY		YEAR	
COHEN AND GRIGSBY				МО	DAY		YEAR	\$ 250.00
COHEN AND GRIGSBY	PAC	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 152223152	<b>MO</b>	DAY	8	<b>YEAR</b> 2016	\$ 250.00
COHEN AND GRIGSBY Mailing Address	PAC 25 LIBERTY AVE	State			DAY	8		\$ 250.00
COHEN AND GRIGSBY  Mailing Address 6.  City PITTSBURGH  Full Name of Contribution Chamber PAC	PAC 25 LIBERTY AVE	State		4		8	2016	\$ 250.00 250.00
COHEN AND GRIGSBY  Mailing Address 6.  City PITTSBURGH  Full Name of Contribution Chamber PAC	PAC 25 LIBERTY AVE	State		4		8	2016	
COHEN AND GRIGSBY  Mailing Address 6.  City PITTSBURGH  Full Name of Contribution Chamber PAC  Mailing Address 4	PAC  25 LIBERTY AVE  ng Committee  17 Walnut St	State PA  State	152223152	мо			2016 YEAR	
City PITTSBURGH  Full Name of Contribution Chamber PAC  Mailing Address 4  City HARRISBURG  Full Name of Contribution Chamber PAC	PAC  25 LIBERTY AVE  ng Committee  17 Walnut St	State PA  State	152223152	MO 4	DAY	8	2016  YEAR  2016	
City PITTSBURGH  Full Name of Contribution Chamber PAC  Mailing Address 4  City HARRISBURG  Full Name of Contribution Chamber PAC	PAC  25 LIBERTY AVE  17 Committee  17 Walnut St  18 Committee  18 ELECTIONS	State PA  State	152223152	MO 4	DAY		2016 YEAR 2016	\$ 250.00

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

**PAGE TOTAL** 2,750.00

### 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 Fining Committee of Candidate			Reporting Period From: To:					
			l		DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

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

**PAGE TOTAL \$**0.00

#### **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	y Period				
FLYNN, MARTY FRIENDS OF			From:	1/	<u>/1/2016</u>	То:	<u>4</u>	4/11/201 <u>6</u>
				DA	TE		A	AMOUNT
Full Name of Contributing Committee united association local 524				мо	DAY	YEAR		
Mailing Address 711 Corey St							\$	500.00
City Scranton	State PA	<b>Zip Code</b> 18505	e (Plus 4)	1	13	2016		
Full Name of Contributing Committee SCRANTON FEDERATION OF TEACHER	RS COPE FUND			МО	DAY	YEAR		
Mailing Address 431 WYOMING AVE	:			2	24	2016	\$	500.00
<b>City</b> SCRANTON	<b>State</b> PA	<b>Zip Code</b> 18503	e (Plus 4)	2	24	2010		
Full Name of Contributing Committee Local Union #98 IBEW				МО	DAY	YEAR		
Mailing Address 1719 Spring Garder	n St						\$	2,000.00
<b>City</b> Philadelphia	State PA	<b>Zip Code</b> 19130	e (Plus 4)	4	8	2016		
Full Name of Contributing Committee TEL PAC (PA TELEPHONE ASSN)				МО	DAY	YEAR		
Mailing Address 30 N. 3RD ST							\$	500.00
City HARRISBURG	State PA	<b>Zip Code</b> 171081	<b>(Plus 4)</b> 169	4	8	2016		
								PAGE TOTAL
Enter Grand Total of Part C on Sche	edule I, Detailed Sur	nmary Pa	age, Sectio	n 3.			\$	3.500.00

### 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	3			Rep	orting Period					
FLYNN, MARTY FRIENDS OF				Fror	n:	<u>1/1/2</u>	<u>:016</u> <b>T</b> o	o:	<u>4/</u>	11/2016
					DA	ATE			AMOUI	NT
Full Name of Contributor Louis Denaples, Sr					МО	DAY	YEAR			
Mailing 400 Mill St							\$		5,000.00	
City Dunmore	State	Zi	p Code (Plus	<b>34)</b>	3	2	2016	5		
	PA	18	3512							
Employer Name D & L Realty	•				Occupat	tion	Real Est	ate D	evelopn	nent
Employer Mailing Address/Principal Pla Business	ace of		City			State		Zip	Code (Pl	us 4)
400 Mill St			Dunmore	!		PA		18	512	
Full Name of Contributor Ann M Straneva					МО	DAY	YEAR			
Mailing Address 1606 Summit Pointe	2							\$		1,500.00
City Scranton	State	Zi	p Code (Plus	i 4)	4	8	2016	5		
	PA	18	3508							
Employer Name Retired	•				Occupat	tion	Retired			
Employer Mailing Address/Principal Pla Business	ace of		City			State		Zip	Code (Pl	us 4)
1606 Summit Pointe			Scranton			PA		18	508	
Full Name of Contributor Re, Joseph Sica					МО	DAY	YEAR			
Mailing Diocese of Scranton								\$		2,000.00
City Scranton	State	Zi	p Code (Plus	i 4)	4	8	2016	5		
	PA	18	3510							
Employer Name Diocese of Scranton			Occupation Roman Catholic P			lic Pries	t			
Employer Mailing Address/Principal Pla Business	ace of		City		•	State		Zip	Code (Pl	us 4)
Diocese of Scranton			Scranton			PA		18	510	

Full Name of Contributor Michael Cummings	Michael Cummings					
Mailing 1219 Clay Ave						\$ 500.00
City Dunmore	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18510	1	13	2016	
Employer Name Retired			Occupat	c <b>ion</b>	etired	
Employer Mailing Address/Principal Place Business	e of	City		State		Zip Code (Plus 4)
1219 Clay Ave		Dunmore		PA		18510

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

PAGE TOTAL
\$ 9,000.00

## 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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		A	MOUNT
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. Detailed	d Summary Page	Section	4			P	AGE TOTAL
	2, <b>200</b> 0000		22300				\$	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		
FLYNN, MARTY FRIENDS OF	From:	<u>1/1/2016</u> <b>To:</b>	<u>4/11/2016</u>
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 Candid	Name of Filing Committee or Candidate Re			g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	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	mary Pag	ae. F		PAGE TOTAL
Section 2.				,;	,-,	\$	
1						Ψ	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Reporting Period						
				Fro	From:			То:		
					•		DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(I	Plus 4)						
Employer of Contributor					Occupation					
Employer Mailing Address/Principal Place of Business				State Zip C 4)		Code(Plus	Code(Plus Descriptio		of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00				

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period					
FLYNN, MARTY FRIENDS OF	From	1/1/2016	То:	4/11/2016		

				DATE			AMOUNT	
<b>To Whom Paid</b> Buona Pizza			МО	DAY	YEAR			
Mailing Address 504 Lackawani	na Ave		1	5	2016	\$	20.00	
<b>City</b> Scranton	<b>State</b> PA	Description of Expenditure  Donation						
To Whom Paid Union News			МО	DAY	YEAR			
Mailing Address 1258 Oneill Hw	/у		1	5	2016	\$	150.00	
City Dunmore	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18512	<b>Descrip</b> Ad	tion of Exp				
To Whom Paid Nelms for the Northeast				DAY	YEAR			
Mailing Address Unknown			1	12	2016	\$	250.00	
<b>City</b> Philadelphia	Philadelphia  State  PA  Zip Code (Plus 4)  19115			Description of Expenditure Donation				
<b>To Whom Paid</b> Joyce's Bar	·		МО	DAY	YEAR			
Mailing Address 2734 Birney Av	/e		1	20	2016	\$	161.50	
<b>City</b> Scranton	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18505	Description of Expenditure  Campaign Meeting					
To Whom Paid LCFDW			МО	DAY	YEAR			
Mailing Address PO Box 1282			2	4	2016	\$	100.00	
ty scranton State Zip Code (Plus 4) PA 18501			Description of Expenditure  Donation					

							PAGE 14			
<b>To Whom Paid</b> Coaches vs Cancer	мо	DAY	YEAR							
Mailing Address 712 S Keyser Ave				12	2016	\$	100.00			
City Scranton	State Zip Code (Plus 4) PA 18508				Description of Expenditure  Donation					
To Whom Paid Paul Mcnally				DAY	YEAR					
Mailing Address Saint Ann	St		2	16	2016	\$	150.00			
City Scranton State Zip Code (Plus 4) PA 18404				Description of Expenditure  Donation						
To Whom Paid Marley's Mission				DAY	YEAR					
Mailing Address Shaffer Rd				17	2016	\$	250.00			
City Lake Ariel	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18436	Description of Expenditure  Donation							
To Whom Paid Friends of Frank Farina				DAY	YEAR					
Mailing Address 29 Depot St			3	10	2016	\$	1,000.00			
<b>City</b> Peckville	ty Peckville State Zip Code (Plus 4) PA 18452				Description of Expenditure  Donation					
To Whom Paid McGrath's Pub				DAY	YEAR					
Mailing Address 202 Locust St			4	7	2016	\$	807.62			
<b>City</b> HArrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	<b>Descrip</b> Fundra	otion of Exp	penditure					
Enter Grand Total of Expe	nditures on Page 1 Pe	nort Cover Page Item D	•				PAGE TOTAL			
Enter Grand Total of Exper	nanures on raye 1, Re	port cover Page, Item D	•			\$	2,989.12			

## STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporti	Reporting Period					
FLYNN, MARTY FRIENDS OF			From:	<u>1/1/2016</u> <b>To</b> :				4/11/2016	
					DATE			Outstanding Balance of Debt	
Name of Creditor Marty B Flynn				мо	DAY	YEAR			
Mailing Address 1633 R. Dorothy St				4	11	2016	\$	10,000.00	
City Scranton	State PA	<b>Zip Code (Pl</b> 18504	us 4)	4) Description of Debt Loan from Candidate					
								PAGE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						\$	10,000.00		