

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 : 2006014		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: COX, JIM FRIENDS OF								
Street Address: P O BOX 2550								
City: WEST LAWN				State: PA		Zip Code: 19609-0000		
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes <input type="checkbox"/> 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
REPRESENTATIVE IN THE GENERAL ASSEMBLY				MO	DAY	YEAR	129	STH
				11	8	2016		REP
							06	
							(SEE INSTRUCTIONS FOR CODES)	
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		FOR OFFICE USE ONLY	
		1	1	2016	4		11 2016	
A. Amount Brought Forward From Last Report				\$		8,819.54		
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		1,050.00		
C. Total Funds Available (Sum Of Lines A and B)				\$		9,869.54		
D. Total Expenditures (From Schedule III)				\$		325.97		
E. Ending Cash Balance (Subtract Line D From Line C)				\$		9,543.57		
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00		
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

Printed Name

Signature

Email

My Commission Expires

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
COX, JIM FRIENDS OF	From: <u>1/1/2016</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)	\$ 150.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 150.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 900.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 900.00

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.)	\$ 1,050.00
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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 COX, JIM FRIENDS OF	Reporting Period From: <u>1/1/2016</u> To: <u>4/11/2016</u>
DATE	
AMOUNT	

Full Name of Contributing Committee PAMIC PAC			MO	DAY	YEAR	\$ 150.00
Mailing Address 1017 MUMMA RD STE 103			3	30	2016	
City WORMLEYSBURG	State PA	Zip Code (Plus 4) 17043				

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

PAGE TOTAL
\$ 150.00

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)					

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 COX, JIM FRIENDS OF	Reporting Period From: <u>1/1/2016</u> To: <u>4/11/2016</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee HIGHMARK PAC OF HIGHMARK INC				MO	DAY	YEAR	\$ 300.00
Mailing Address 1800 CENTER ST				4	6	2016	
City CAMP HILL	State PA	Zip Code (Plus 4) 17089					
Full Name of Contributing Committee BRAVO PAC (SG PAC)				MO	DAY	YEAR	\$ 300.00
Mailing Address 20 N MARKET SQ STE 800				4	8	2016	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee IFAPAC - PA				MO	DAY	YEAR	\$ 300.00
Mailing Address 4811 JONESTOWN RD STE 233				4	8	2016	
City HARRISBURG	State PA	Zip Code (Plus 4) 17109					

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

PAGE TOTAL
\$ 900.00

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	
COX, JIM FRIENDS OF		From: <u>1/1/2016</u> To: <u>4/11/2016</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)		\$	0.00
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.)		\$	0.00

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:

			DATE		AMOUNT
Full Name of Contributor			MO	DAY	YEAR
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 III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
COX, JIM FRIENDS OF	From <u>1/1/2016</u> To: <u>4/11/2016</u>

DATE				AMOUNT		
To Whom Paid Berks County Republican Party			MO	DAY	YEAR	\$ 25.00
Mailing Address 435 Washington St			1	26	2016	
City Reading	State PA	Zip Code (Plus 4) 19601	Description of Expenditure Petition Night Contribution			
To Whom Paid Jim Cox			MO	DAY	YEAR	\$ 100.00
Mailing Address 2504 John Henry Drive			2	24	2016	
City Sinking Spring	State PA	Zip Code (Plus 4) 19608	Description of Expenditure Filing Fee			
To Whom Paid Giant			MO	DAY	YEAR	\$ 19.60
Mailing Address 2641 Shillington Rd			3	18	2016	
City Sinking Spring	State PA	Zip Code (Plus 4) 19608	Description of Expenditure Postage Stamps			
To Whom Paid Bradford Exchange Checks			MO	DAY	YEAR	\$ 12.89
Mailing Address 9305 N. Milwaukee Ave			2	24	2016	
City Niles	State IL	Zip Code (Plus 4) 60714	Description of Expenditure Checks			
To Whom Paid Staples			MO	DAY	YEAR	\$ 30.74
Mailing Address 1167 Berkshire Blvd			2	12	2016	
City Wyomissing	State PA	Zip Code (Plus 4) 19610	Description of Expenditure Paper			

To Whom Paid Party City			MO	DAY	YEAR	
Mailing Address 2785 Papermill Rd			4	8	2016	
City Wyomissing	State PA	Zip Code (Plus 4) 19610	Description of Expenditure Event supplies			

To Whom Paid Michaels			MO	DAY	YEAR	
Mailing Address 2763 Papermill Rd			4	8	2016	
City Wyomissing	State PA	Zip Code (Plus 4) 19610	Description of Expenditure Event supplies			

To Whom Paid Michaels			MO	DAY	YEAR	
Mailing Address 2763 Papermill Rd			4	8	2016	
City Wyomissing	State PA	Zip Code (Plus 4) 19610	Description of Expenditure Event supplies			

To Whom Paid Target			MO	DAY	YEAR	
Mailing Address 2769 Papermill Rd			4	8	2016	
City Wyomissing	State PA	Zip Code (Plus 4) 19610	Description of Expenditure Event supplies			

To Whom Paid Reading China & Glass			MO	DAY	YEAR	
Mailing Address 739 Reading Ave			4	11	2016	
City Reading	State PA	Zip Code (Plus 4) 19611	Description of Expenditure Event supplies			

To Whom Paid Weaver Markets			MO	DAY	YEAR	
Mailing Address 2610 North Reading Rd			4	11	2016	
City Denver	State PA	Zip Code (Plus 4) 17517	Description of Expenditure Event supplies			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 325.97

