Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification 20150206 Number :						port ed B		CAND	PIDATE COMM			4ITTEE	LOBBYIST				
Name of Filing C	Committee, Ca	andida	ate or L	obbyist:		MUI	LLEN	, PAU	L FRIE	IDS OF	•	•		-		<u>'</u>	
Street Address:	РО ВОХ	2171															
City:	ASTON								State:	PA			Zip Cod	le: 19	9014		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRIDAY PRIMARY	PRE	-	2.	30 DA PRIMA		POST-	3. X		AMENDM REPORT		Yes	No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND FRIDAY ELECTION	PRE	PRE- 5. 30 DAY ELECTION				POST-	POST- 6.			ATION ?	Yes	No	
report type)	ANNUAL REF	PORT	7.	Year 2016					NG METHOD PA				PAPER	PAPER DISKETT			TE
Name of Office S	Sought by Car	ndidat	e:	-					DATE	OF ELE	CTIC	N	District Number	Office Code	Part	y Code	County Code
	- ,			EMBLY					МО	DAY	YI	AR	161	STH	REP		23
REPRESENTATI	VE IN THE G	ENEK	AL ASS	EMBLY					1	1	8	2016		(SEE IN	STRUCTIO	NS FOR C	ODES)
Summary of		nd	МО	DAY	YEAR	l			МО	DAY	ΥI	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures	irom:			4 12	2	016	T	0		5	16	2016					
A. Amount Bro	ught Forward	d Fron	ı Last R	eport				\$			12,3	356.90					
B. Total Moneta	ary Contribut	tions A	And Rec	eipts (From	Sche	dule	e I)	\$				0.00					
C. Total Funds	Available (Su	um Of	Lines A	and B)				\$			12,3	356.90					
D. Total Expenditures (From Schedule III) \$ 12,356.90																	
E. Ending Cash	Balance (Sul	btract	Line D	From Line C)			\$				0.00					
F. Value Of In-	Kind Contribu	utions	Receiv	ed (From Sc	hedu	le II	I)	\$				0.00					
G. Unpaid Debt	s And Obliga	tions	(From S	chedule IV))			\$				0.00			'		
					AFF	ΊD	AVI	T SE	CTION								
PART I - If this is	s a Committe	e repo	ort, trea	surer sign h	ere. 1	[f th	nis is	a Can	didate	report,	candi	date sig	ın here.				
I swear (or affirm) correct and comple		rt, incl	uding the	attached sch	edules	file	ed on	paper o	or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge a	nd belie	f , true
Sworn to and subs	cribed before n day of	ne this		20							5	ignature	of Perso	n Submit	ting Repo	ort	
		ignatur	·a					- -					Prin	ted Name	e		
My Commission Ex		igilatui	•										Ema	il			
	мо		D	AY	YR			-		Ar	ea Coo	le	Daytim	e Telepi	none Nun	ıber	
Part II- If this is	a report of a	a cand	idate's	authorized (Comn	nitte	ee, C	andida	ate shal	l sign h	ere.						
I swear (or affirm) No 320) as amende		est of m	y knowle	edge and belie	f this	poli	itical	commi	ittee has	not viola	ited an	y provis	ions of th	e act of J	une 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before m	e this										s	ignature o	of Candid	ate		— I
	day of			_ 20				_					pir	d Ne			
	Cia	ature						-					Printe	d Name			
My Commission Exp	_	ature											Ema	il			
	M	10	D	AY	YR			-		Area	Code		Da	aytime T	elephone	Numbe	r

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
MULLEN, PAUL FRIENDS OF	From:	4/12/201	<u>б</u> То:	<u>5/16/2016</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)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
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			\$	0.00

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			Reporting Period					
		,	rom:		То	•		
		·		DATE			AMOUNT	
Full Name of Contributing Committee			МО	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)						

PAGE TOTAL
0.00

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

0.00

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 Filing Committe	ee or Candidate		Rep					
			Fro	m:		To) :	
		•			DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
								PAGE TOTAL

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.

lame of Filing Committee or Candidate		Reporting Period						
			From:			То:		
				DA	TE		,	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
nter Grand Total of Part C on Schedule I, Detailed Summary Page, Sec				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	ame of Filing Committee or Candidate		Reporting Period								
				Fron	n:			То:			
					D	ATE			А	MOUNT	
Full Name of Contributor					мо	DAY	YEA	R	\$		0.00
Mailing Address											
City	State	Zip	Code (Plus	4)							
Employer Name					Occupation						
Employer Mailing Address/Principal Plac	e of Business		City		•	State		Z	ip Cod	de (Plus 4	•)
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.					on 3.			\$	F	PAGE TOTA	AL 0.00
							L				

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	lame of Filing Committee or Candidate		Report	ing Peri	od			
			From:			To:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'	1					<u> </u>	
	- C		. .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	Section	4.			\$	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 Perio	d							
MULLEN, PAUL FRIENDS OF	From:	4/12/2016 To :	<u>5/16/2016</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS 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 Cand	nme of Filing Committee or Candidate		Reportin				
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						7 \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•		•	•	•		
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Det			led Sum	mary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate			Reporting Period						
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candida	te		Reporti	ng Period				
MULLEN, PAUL FRIENDS OF	MULLEN, PAUL FRIENDS OF			From <u>4/12/2016</u> To:				
				DATE			AMOUNT	
To Whom Paid ASTON TOWNSHIP REPUBLICAN EXE	CUTIVE FINANCE CO	ОММ	мо	DAY	YEAR			
Mailing Address PO BOX 2171			5	1	2016	\$	12,350.00	
City ASTON	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	19014-	CONTRI	BUTION				
To Whom Paid TD BANK			мо	DAY	YEAR			
Mailing Address PO BOX 5094			5	2	2016	\$	6.90	
City MT AURFI State Zip Code (Plus 4)				tion of Exp	enditure	•		

I - 7 III E KOKEE		,			
	NJ	08054-	BANK FEE		
	PAGE TOTAL				
Enter Grand Total of Expenditures o	n Page 1, Report C	over Page, Item D.		\$	12,356.90