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 200	01257			Re _l File	ported B		CAN	DIE	DATE		COMN	1ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Cand	idate or L	obbyist:		Day	PAC								·				
Street Address:	PO Box 601	78																
City:	King of Prus	ssia						State:		PA			Zip Cod	le: 19	406			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	- :	2.	30 DA		P	OST-	3. X		AMENDM REPORT?		Yes	N	0	√
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	AY PRE	E	5.	30 DA		P	OST-	6.		TERMINA REPORT?		Yes	N	0	\
report type)	ANNUAL REPOR	7.	Year 2016	5				NG MET		_			PAPER		\checkmark	DISK	ETTE	
Name of Office S	ought by Candid	late:	-					DATE	OI	F ELEC	CTIC	ON	District Number	Office Code	Par	ty Cod	Code	
SENATOR IN TH	HE GENERAL AS	SEMBLY						МО		DAY	YI	EAR	17	STS	DEN	1	46	
									11		8	2016		(SEE INS	TRUCTI	ONS FOR	CODES	5)
Summary of Expenditures		МО	DAY	YEAR		_	0	МО		DAY		EAR	FO	R OFFIC	E USE	ONLY	•	
-			4 12	2 2	016	•			5		17	2016						
	ught Forward Fr			n Scho	dule	. T\	\$					066.03 105.00						
C. Total Funds Available (Sum Of Lines A and B) D. Total Expenditures (From Schedule III)											171.03 126.53							
-	Balance (Subtra			C)			\$ \$					044.50						
	Kind Contributio				le II	:)	\$				10/0	0.00						
G. Unpaid Debt	s And Obligation	ns (From :	Schedule I	V)			\$					0.00						
				AFF	ID/	١٧٧	T SE	CTIO	N									
PART I - If this is	a Committee re	eport, trea	surer sign	here.	If th	is is	a Car	ndidate	re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple		ncluding th	e attached s	chedule	s file	d on	paper	or by ele	ectr	onic me	edium	, are to t	he best o	f my knov	/ledge	and be	lief , tr	ue
Sworn to and subs	cribed before me t day of	his	20						-		5	Signature	of Perso	n Submitt	ing Rep	ort		_
	Signa	ture					- -		-				Prin	ted Name				_
My Commission Ex	cpires						_		-				Emai	il				
	МО	D	AY	YR						Are	a Cod	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	authorized	Comn	nitte	e, C	andid	ate sha	all s	ign he	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge and be	lief this	polit	tical	comm	ittee ha	s no	t violat	ed ar	ny provisi	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subsc		is	20									Si	ignature o	of Candida	te			-
	day of —— ————		_ 20				-						Printe	d Name				-
Mar Community is T	Signatur	e					-		-				Ema	il				_
My Commission Exp							_						Lilla					_
	МО	D	AY	YR	<u> </u>					Area	Code		Da	ytime Te	lephor	e Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
DayPAC	From:	4/12/201	<u>6</u> То:	<u>5/16/2016</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	5.00
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)	\$	100.00		
TOTAL for the Reporting) Period	(2)	\$	100.00
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	y Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g 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			\$	105.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			From: To:				:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

PAGE TOTAL \$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 Committee or Candidate	Report	ting Period		
DayPAC	From:	4/12/	<u>2016</u> To	<u>5/16/2016</u>
		DATE		AMOUNT
Full Name of Contributor		MO DAY	YEAR	

Full Name of Contributor Penny Botel			МО	DAY	YEAR	
Mailing Address 3454 W Penn St						\$ 100.00
City Phila	State PA	Zip Code (Plus 4) 191291439	5	2	2016	

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	Period				
			From:			То:		
				DA	TE		А	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 Scho	edule I, Detailed Sun	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			Rep	orting Pe	riod			
			Froi	m:		To):	
				D	ATE		АМ	OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	5 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	Summary Page,	Section	on 3.			PA:	GE TOTAL 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		Report	ting Perio	bd			
			From:			To:		
				D	ATE		AMOUNT	
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. Detailer	d Summary Page	Section	4			PAGE TOTAL	
Enter Grana Total of Fait E	on senedare 1, Betanet	a Summary rage,	Section				\$ 0.0	0

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	
DayPAC	From:	4/12/2016 To:	<u>5/16/2016</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	ate		Reportin	g Period			
			From:			То:	
				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 Sun	ımary Pa	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					Re	porting l	Period			
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Car	ndidate		Reporti	ng Period					
DayPAC			From	<u>4/1</u> 2	2/2016	То:	5/16/2016		
				DATE			AMOUNT		
To Whom Paid Upper Merion Democratic Comm	iittee		МО	DAY	YEAR				
Mailing Address PO Box 6044	3		5	10	2016	\$	250.00		
City King Of Prussia State Zip Code (Plus 4) PA 194060443				Description of Expenditure Contribution					
To Whom Paid Extra Space Storage				DAY	YEAR				
Mailing Address 282 S Gulph	Rd		4	12	2016	\$	207.16		
City King Of Prussia	State PA	Zip Code (Plus 4) 194063106	Descrip Storage	otion of Exp	penditure				
To Whom Paid Liberty City Democratic Club			МО	DAY	YEAR				
Mailing Address P.O. Box 583	385		4	19	2016	\$	100.00		
City Philadelphia	State PA	Zip Code (Plus 4) 19102	Descrip Contrib	otion of Exp oution	penditure				
Fo Whom Paid AT&T Wireless			МО	DAY	YEAR				
ailing Address PO Box 537104			4	27	2016	\$	97.21		
City Atlanta State Zip Code (Plus 4)				Description of Expenditure					

City Atlanta	State GA	Zip Code (Plus 4) 303537104	Description of Expenditure Phone bill						
To Whom Paid Friends of Jimmy Fagan			мо	DAY	YEAR				
Mailing Address 115 Wentworth Dr		5	14	2016	\$	250.00			
City Lansdale	State PA	Zip Code (Plus 4) 194461672	Description of Expenditure Contribution						

To Whom Paid Google.com			МО	DAY	YEAR			
Mailing Address 1600 Amphitheatre Pkwy			5	9	2016	\$	15.00	
City Mountain View	State CA	Zip Code (Plus 4) 940431351	Description of Expenditure Web services					
To Whom Paid Extra Space Storage			мо	DAY	YEAR			
Mailing Address 282 S Gulph Rd			5	10	2016	\$	207.16	
City King Of Prussia	State PA	Zip Code (Plus 4) 194063106	Description of Expenditure Storage					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL	
Zinci Grana i Star Si Experiate a Si i age 1, report cover i age, Item 2.							1,126.53	