

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 :		9800010		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS FOR DARYL METCALFE												
Street Address: P.O. BOX 1536												
City: CRANBERRY TWP						State: PA			Zip Code: 16066			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	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			
		4	12	2016		5	16	2016				
A. Amount Brought Forward From Last Report						\$ 93,796.36						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 4,350.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 98,146.36						
D. Total Expenditures (From Schedule III)						\$ 46,803.94						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 51,342.42						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 1,709.73						
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
FRIENDS FOR DARYL METCALFE	From: <u>4/12/2016</u> To: <u>5/16/2016</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 125.00

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)	\$ 425.00
TOTAL for the Reporting Period (2)	\$ 425.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 2,500.00
All Other Contributions (Part D)	\$ 1,300.00
TOTAL for the Reporting Period (3)	\$ 3,800.00

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.)	\$ 4,350.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	0.00

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 FOR DARYL METCALFE	From: <u>4/12/2016</u> To: <u>5/16/2016</u>

DATE	AMOUNT
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Full Name of Contributor	MO	DAY	YEAR	\$ 250.00
WILLIAM JONES				
Mailing Address 256 KEASEY RD.				
City CABOT	State	Zip Code (Plus 4)		
	PA	16023		
	4	20	2016	

Full Name of Contributor	MO	DAY	YEAR	\$ 100.00
SCOTT HAY				
Mailing Address 194 ALDERSON RD.				
City SAXONBURG	State	Zip Code (Plus 4)		
	PA	16056		
	4	19	2016	

Full Name of Contributor	MO	DAY	YEAR	\$ 75.00
RALPH A. WINNER				
Mailing Address 103 RAMBLEWOOD LN.				
City MARS	State	Zip Code (Plus 4)		
	PA	16046		
	4	18	2016	

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

PAGE TOTAL
\$ 425.00

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
FRIENDS FOR DARYL METCALFE	From: <u>4/12/2016</u> To: <u>5/16/2016</u>

				DATE			AMOUNT		
Full Name of Contributing Committee					MO	DAY	YEAR	\$	2,500.00
MIKE TURZAI LEADERSHIP FUND									
Mailing Address									
P.O. BOX 721					4	13	2016		
City	WEXFORD		State	PA					

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

PAGE TOTAL
\$ 2,500.00

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 FOR DARYL METCALFE	Reporting Period From: <u>4/12/2016</u> To: <u>5/16/2016</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
MARK FLEMING CHIROPRACTOR							
Mailing Address 438 SOUTH MAIN ST. 				4	19	2016	\$ 300.00
City ZELIENOPLE	State PA	Zip Code (Plus 4) 16063					
Employer Name SELF				Occupation CHIROPRACTOR			
Employer Mailing Address/Principal Place of Business SAME AS ABOVE			City		State	Zip Code (Plus 4)	

Full Name of Contributor				MO	DAY	YEAR	
JASON BOYD							
Mailing Address 4801 MIDDLE ROAD 				4	26	2016	\$ 1,000.00
City ALLISON PARK	State PA	Zip Code (Plus 4) 15101					
Employer Name SELF/HAMPTON MECHANICAL				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business 4720 HIGH POINT DR.			City GIBSONIA		State	Zip Code (Plus 4) 15044	

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

PAGE TOTAL
\$ 1,300.00

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 FOR DARYL METCALFE		From: <u>4/12/2016</u> To: <u>5/16/2016</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)		\$	1,709.73
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.)		\$	1,709.73

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 FOR DARYL METCALFE	Reporting Period From: <u>4/12/2016</u> To: <u>5/16/2016</u>
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					DATE		AMOUNT	
Full Name of Contributor DON RODGERS					MO	DAY	YEAR	\$ 519.57
Mailing Address 215 EXECUTIVE DRIVE								
City CRANBERRY TWP		State PA	Zip Code(Plus 4) 16066		5	16	2016	
Employer of Contributor SELF-EMPLOYED								
Employer Mailing Address/Principal Place of Business SAME AS ABOVE			City	State	Zip Code(Plus 4)		Description of Contribution OFFICE SPACE	

Full Name of Contributor H.R.C.C.				MO	DAY	YEAR	\$ 407.69
Mailing Address P.O. BOX 11787				4	15	2016	
City HARRISBURG	State PA	Zip Code(Plus 4) 17108					
Employer of Contributor N/A				Occupation N/A			
Employer Mailing Address/Principal Place of Business N/A		City	State	Zip Code(Plus 4)		Description of Contribution POSTCARDS & DATA	

Full Name of Contributor H.R.C.C.				MO	DAY	YEAR	\$ 782.47
Mailing Address P.O. BOX 11787				4	28	2016	
City HARRISBURG	State PA	Zip Code(Plus 4) 17108					
Employer of Contributor N/A				Occupation N/A			
Employer Mailing Address/Principal Place of Business N/A		City	State	Zip Code(Plus 4)		Description of Contribution POSTCARDS & DATA	

**Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed
Summary Page, Section 3.**

PAGE TOTAL

1,709.73

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS FOR DARYL METCALFE	From <u>4/12/2016</u> To: <u>5/16/2016</u>

				DATE		AMOUNT	
To Whom Paid DAVID MILLNER GROUP, LLC				MO	DAY	YEAR	\$ 14,730.00
Mailing Address 2055 NW DIAMOND CREEK WAY				4	19	2016	
City JENSEN BEACH	State FL	Zip Code (Plus 4) 34957	Description of Expenditure DESIGN, PRINTING & MAILING SERVICES				
To Whom Paid DAVID MILLNER GROUP, LLC				MO	DAY	YEAR	\$ 9,215.00
Mailing Address 2055 NW DIAMOND CREEK WAY				4	19	2016	
City JENSEN BEACH	State FL	Zip Code (Plus 4) 34957	Description of Expenditure DESIGN, PRINTING & MAILING SERVICES				
To Whom Paid VERIZON WIRELESS				MO	DAY	YEAR	\$ 62.36
Mailing Address P.O. BOX 4002				4	19	2016	
City ACWORTH	State GA	Zip Code (Plus 4) 30101	Description of Expenditure SMART PHONE SERVICE				
To Whom Paid DAVID MILLNER GROUP, LLC				MO	DAY	YEAR	\$ 14,878.00
Mailing Address 2055 NW DIAMOND CREEK WAY				4	23	2016	
City JENSEN BEACH	State FL	Zip Code (Plus 4) 34957	Description of Expenditure T.V. SPOT PRODUCTION & CABLE BUY				
To Whom Paid COMMUNICATIONS CONCEPTS				MO	DAY	YEAR	\$ 1,032.00
Mailing Address 2906 WILLIAM PENN HWY SUITE 401				4	23	2016	
City EASTON	State PA	Zip Code (Plus 4) 18045	Description of Expenditure AUTOMATED CALLS - VOTER CONTACT				

To Whom Paid THE PRINTING POST			MO	DAY	YEAR	\$ 1,000.45
Mailing Address 3458 BABCOCK BOULEVARD			4	23	2016	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15237	Description of Expenditure PRINTING SERVICES			

To Whom Paid ARMSTRONG			MO	DAY	YEAR	\$ 71.32
Mailing Address 437 NORTH MAIN STREET			4	25	2016	
City BUTLER	State PA	Zip Code (Plus 4) 16001	Description of Expenditure INTERNET & PHONE SERVICE			

To Whom Paid COSTCO			MO	DAY	YEAR	\$ 55.00
Mailing Address 1050 CRANBERRY SQUARE DRIVE			5	4	2016	
City CRANBERRY TWP	State PA	Zip Code (Plus 4) 16066	Description of Expenditure MEMBERSHIP FEE			

To Whom Paid BANK OF AMERICA			MO	DAY	YEAR	\$ 5,155.47
Mailing Address P.O. BOX 15019			5	4	2016	
City WILMINGTON	State DE	Zip Code (Plus 4) 19886	Description of Expenditure CREDIT CARD PAYMENT FOR CAMPAIGN EXPENSES TO INCLUDE POSTAGE, NOTARY FEES, COPIES, FUEL & VOLUNTEER MEALS			

To Whom Paid PIRYX, INC.			MO	DAY	YEAR	\$ 14.38
Mailing Address 144 2ND STREET 1ST FLOOR			4	20	2016	
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 94105	Description of Expenditure FEE			

To Whom Paid BANK OF AMERICA			MO	DAY	YEAR	\$ 589.96
Mailing Address P.O. BOX 15019			5	15	2016	
City WILMINGTON	State DE	Zip Code (Plus 4) 19886	Description of Expenditure CREDIT CARD PAYMENT FOR CAMPAIGN EXPENSES TO INCLUDE FEDEX, COPIES, PIZZA & MEALS FOR VOLUNTEERS, FUEL & COFFEE			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 46,803.94

