# **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 2006	5131			Repor Filed I		C	ANDI	DATE	СОМ	MITTEE	✓	LOB	BYIS	r		
	committee, Candid	late or Lo	obbyist:	I	FRIEND	-	F DUA	NE M	IILNE								
Street Address:	43 STONEHE	NGE LAN	IE														
City:	MALVERN						State: PA				Zip Co	<b>Zip Code:</b> 19355					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2. <b>X</b>	30 D PRIN	DAY MARY	P	POST- 3	•	AMENDMENT REPORT?		Yes		No	]	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					0 DAY POST- 6. LECTION				TERMIN REPORT	Yes		No	$\checkmark$		
report type)	ANNUAL REPORT	7.	<b>Year</b> 2016	Year 2016 FILING METHOD () CHECK ONE							PAPER		$\checkmark$	DIS	KETTE		
Name of Office S	L Sought by Candida	te:					DA	TE O	F ELEC	TION	District Number	Office Code	Pa	ty Co	le Cou Cod		
							мо		DAY	YEAR	167	STH	RE	þ	15		
REPRESENTATIVE IN THE GENERAL ASSEMBLY								11	8	2016	]	(SEE INS	TRUCTI	ONS FC	R CODE	S)	
	Receipts and	мо	DAY	YEAR	1		мо		DAY	YEAR	FC	OR OFFIC	E USE	ONL	Y		
Expenditures	from:		3 8	20	016 <b>T</b>	0		4	11	. 2016	1						
A. Amount Bro	ught Forward Fro	m Last R	eport			:	\$		-	15,914.20							
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)		\$			500.00							
C. Total Funds Available (Sum Of Lines A and B) \$ 16,414.20																	
D. Total Expen	ditures (From Sch	edule II	1)				\$			1,717.90							
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$		1	4,696.30	-						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)		\$			0.00	-						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	')			\$			0.00							
				AFF	IDAVI	ΤS	ECTI	ON									
	s a Committee rep	-	-								-	6 I.m.a					
correct and comple	) that this report, inc ete.	iuding the	e attached sc	neuules	s mea on	раре	rorby	electi	ronic med	ium, are to	the best o	т ту кном	neage		ener, t	rue	
Sworn to and subs	cribed before me thi day of	S	20							Signatur	e of Perso	n Submitt	ing Re	port			
	Signatu	ıre				_					Prin	ted Name				_	
My Commission Ex	2					_					Ema	il					
	МО	D	AY	YR					Area	Code	Daytin	ne Telepho	one Nu	mber			
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee, C	Candi	date s	shall	sign her	e.							
I swear (or affirm) No 320) as amende	that to the best of ı ed.	ny knowle	edge and beli	ef this	political	com	mittee	has n	ot violate	d any provis	ions of th	e act of Ju	ine 3,1	937 (I	P.L. 13	33,	
Sworn to and subso	ribed before me this day of		20							S	Gignature	of Candida	te			_	
						-					Printe	ed Name				-	
My Commission Exp	Signature					_					Ema	il				-	
	мо	<b>P</b>	A.V.	VP		_			Area Co	ode	~	aytime Te	lenho	ne Nur	nber	-	
	но	0/	AY	YR							U	ayane re		ie nur	CI		

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** FRIENDS OF DUANE MILNE From: <u>3/8/2016</u> **To:** 4/11/2016 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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)** 500.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 500.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 500.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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			Re	porting I	Period			
			Fre	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

\$

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 Candidat	e		Rep	orting P	eriod			
From: To:								
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 0.00								

### PAGE 5

# 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				Period				
FRIENDS OF DUANE MILNE	From:	om: <u>3/8/2016</u> To: <u>4/11/2016</u>						
				DA	TE		АМС	DUNT
Full Name of Contributing Comm APSCU CAP PA	ittee			мо	DAY	YEAR		
Mailing Address 319 N. FRON	T ST.						\$	500.00
City HARRISBURG	<b>State</b> PA	<b>Zip Cod</b> 17107	e (Plus 4)	2	19	2016		
Enter Grand Total of Part C or	n Schedule T. Detail	ed Summary P	age Sectio	n 3		ſ	I	PAGE TOTAL
	· Seneaule 1, Detail		age, seeno				\$	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	Reporting Period	
	From:	То:

				D	ATE		АМС	DUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principa Business	al Place of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on	Schedule I, Detai	iled Sumr	narv Page, Secti	on 3.		Γ	PAG	GE TOTAL
	<b>,</b>		,	-			\$	0.00

I

# 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	Name of Filing Committee or Candidate			ing Perio	d				
From:			From:	om: To:					
				D	ATE			AMOUNT	1
Full Name				мо	DAY	YEAR			
Mailing Address							\$	5	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description						•	•		
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	TAL
		illi y i uge,	Section				\$		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 OF DUANE MILNE	From:	<u>3/8/2016</u> то:	<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	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	「 F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, I		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

# VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate R			g Period			
	From: To:						
				DATE		АМО	UNT
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 Schedule II, In-Kind Contributions Detail Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

### SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting P	eriod			
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	ion			
Employer Mailing Address/Principal Place of Business City State			State		Zip 4)	Code(Plus	Descri	ption of	f Contribution	

	1
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate			ng Period				
FRIENDS OF DUANE MILNE			From	<u>3/8</u>	<u>8/2016</u>	То:	<u>4/11/2016</u>	
				DATE			AMOUNT	
<b>To Whom Paid</b> ANDREA KEENAN			мо	DAY	YEAR			
Mailing Address 748 CHESSIE CT.			1	27	2016	\$	122.75	
CityWEST CHESTERStateZip Code (Plus 4)PA19380				Description of Expenditure FOOD FOR COUNTY REPUBLICAN CONVENTIO				
To Whom Paid KATE MURPHY			мо	DAY	YEAR			
Mailing Address 1132 S. LEOPARD R	OAD		1	24	2016	\$	15.15	
CityBERWYNStateZip Code (Plus 4)PA19312				<b>ition of Exp</b> REIMBUR		1		
To Whom Paid GREAT VALLEY LACROSSE BOOSTERS			мо	DAY	YEAR			
Mailing Address 25 CHETWYND ROA	D		3	7	2016	\$	300.00	
City PAOLI	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19301		<b>ition of Exp</b> ION TO G.			DOSE BOOSTERS	
<b>To Whom Paid</b> MS. MARIA FULLER			мо	DAY	YEAR			
Mailing Address 1100 WEST CHESTE	R PIKE		3	17	2016	\$	200.00	
City WEST CHESTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19382	-	ntion of Exp IZATION S				
To Whom Paid MONTY MILNE			мо	DAY	YEAR			
Mailing Address 946 PORT PROVIDENCE ROAD			3	17	2016	\$	75.00	
City PHOENIXVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19460		<b>ition of Exp</b> N RENEWA		1		

							AGL IZ
To Whom Paid ELIZABETH CIUNCI FOUNDATION			мо	DAY	YEAR		
Mailing Address P.O. BOX 175			3	26	2016	\$	30.00
City MALVERN	State PA	<b>Zip Code (Plus 4)</b> 19355	Description of Expenditure DONATION TO GREAT VALLEY BUTTERFLY RUN				
To Whom Paid AREA 9 REPUBLICAN COMMITTEE			мо	DAY	YEAR		
Mailing Address 142 JAFFREY ROAD			3	8	2016	\$	500.00
City MALVERN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19355	Description of Expenditure DONATION				
To Whom Paid GREAT VALLEY HIGH SCHOOL PROM			мо	DAY	YEAR		
Mailing Address 225 PHOENIXVILLE PIKE			3	24	2016	\$	150.00
City MALVERN	State PA	<b>Zip Code (Plus 4)</b> 19355	Description of Expenditure DONATION TO PROM PARTY				
To Whom Paid HOME TOWN PRESS			мо	DAY	YEAR		
Mailing Address 601 WEST MARKET ST			3	24	2016	\$	325.00
City PERKASIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18944	Description of Expenditure EAST WHITELAND ADV.				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	<b>PAGE TOTAL</b> 1,717.90