#### **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 :	<b>on</b> 201	.60116			Rep File	port ed B		CANDI	DATE		СОМ	<b>ITTEE</b>	<b>✓</b>	LOBI	BYIST	
Name of Filing C	Committee, Cand	idate or L	obbyist:		FRIE	END	S FOR	R BEHREI	NS							
Street Address:	573 ORCHA	RD ST														
City:	HANOVER T	WP						State:	PA			Zip Cod	le: 18	3706		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2	2.	30 DA PRIMA		POST-	3. <b>X</b>		AMENDM REPORT?		Yes	No	<b>~</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRI	E- !	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	<b>\</b>
report type)	ANNUAL REPOR	<b>T</b> 7.	<b>Year</b> 2016					NG METHO	and the second s					DISKE	TTE	
Name of Office S	- Sought by Candid	ate:						DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
								МО	DAY	YE	AR		10000			
								11		8	2016		(SEE IN	STRUCTI	ONS FOR (	CODES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR		_	_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
			4 12	2	016	T	0	5		16	2016					
A. Amount Bro	ught Forward Fr	om Last R	leport				\$			1	185.00					
B. Total Moneta	ary Contributions	s And Rec	eipts (Fron	n Sche	dule	· I)	\$			3	325.00					
C. Total Funds	Available (Sum (	Of Lines A	and B)				\$			5	510.00					
D. Total Expend	ditures (From Sc	hedule II	I)				\$				0.00					
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$			5	10.00					
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	chedu	le II	<b>:</b> )	\$			1,1	83.67					
G. Unpaid Debt	s And Obligation	s (From	Schedule I\	/)			\$			5	08.80			1		
				AFF	IDA	١٧٢	T SE	CTION								
PART I - If this is	s a Committee re	port, trea	surer sign	here.	If thi	is is	a Can	ndidate re	eport, o	candi	date sig	n here.				
I swear (or affirm) correct and comple	) that this report, ir ete.	cluding th	e attached so	hedule	s filed	d on	paper (	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , true
Sworn to and subs	cribed before me tl day of	nis	20							S	ignature	of Perso	n Submit	ting Rep	ort	
	Signa	huro					- -					Prin	ted Name	e		
My Commission Ex	-	uie										Emai	il			
	мо	D	AY	YR			-		Are	ea Cod	le	Daytim	e Telepi	none Nu	mber	
Part II- If this is	a report of a ca	ndidate's	authorized	Comr	nitte	e, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende		my knowl	edge and bel	ief this	s polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me thi	s									s	ignature o	of Candid	ate		
	day of		_ 20				-					Drinto	d Name			
	Signature	•					-					Filite	a Haine			
My Commission Exp	_	_							_		_	Ema	il	_		
	МО	D	AY	YR	2		•		Area	Code		Da	aytime T	elephor	e Numb	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	Period		
FRIENDS FOR BEHRENS	From:	4/12/20	<u>16</u> To:	<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)			\$	325.00
TOTAL for the Reporting	) Period	(2)	\$	325.00
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	d enter am ge, Item B.	ount )	\$	325.00

#### **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		Reporting Period					
			Fre	om:		То	:	
		<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 Candidat	Name of Filing Committee or Candidate							
FRIENDS FOR BEHRENS			Fro	m:	4/12/2	2016 <b>T</b> o	):	<u>5/16/2016</u>
					DATE			AMOUNT
Full Name of Contributor BARRY BOONE				МО	DAY	YEAR		
Mailing Address 310 S. MAIN RD				_			\$	100.00
City MOUNTAIN TOP	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18707		4	20	2016		
Full Name of Contributor NILESH BAXI				МО	DAY	YEAR		
Mailing Address 519 MORNING GLO				4	20	2016	\$	100.00
City MOUNTAIN TOP	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18707		7	20	2010		
Full Name of Contributor JAN OLENGINSKI				МО	DAY	YEAR		
Mailing Address 129 TIMBERWOOD	DR			,		2016	\$	25.00
City MOUNTAIN TOP	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18707		4	30	2016		
Full Name of Contributor RAKESH SHORMA				МО	DAY	YEAR		
Mailing Address 50 WESTMINSTER I	OR.					26:1	\$	100.00
City DALLAS	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18612		4	30	2016		
	ı	1						DAGE TOTAL

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

**\$** 325.00

#### **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 Candi	me of Filing Committee or Candidate		Reporting	Reporting Period					
			From:			То:			
				DA	TE		Α	MOUNT	
Full Name of Contributing Commit	tee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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	lame of Filing Committee or Candidate			Reporting Period						
			From:				То:			
				D	ATE		АМО	DUNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address							\$	0.00		
City State Zip Code (Plus 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 Su	ummary Page,	Section	on 3.			PAG	<b>GE TOTAL</b> 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 Ca	ndidate		Repor	ting Perio	od			
			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 Detailed	l Summary Page	Section	4			ı	PAGE TOTAL
zinci. Grana rotal or rait z on	ocilculate 1, Detailet	. Janimary rage,	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 Perio	d	
FRIENDS FOR BEHRENS	From:	4/12/2016 <b>To</b> :	<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)	\$	1,183.67
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,		\$	1,183.67

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candid	ate		Reporting	g Period				
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>\$</b>	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 Sum	mary Pag	ле Г		PAGE TOTAL	
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL	
						\$	0.00	

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

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

						DATE			AMOUNT
Full Name of Contributor HRCC					мо	DAY	YEAR		
Mailing Address PO BOX 11787  City HARRICHURG State Zip Code(Plus 4							\$	1,183.67	
City HARRISBURG	State		Zip Code(I	Plus 4)	4	20	2016		
	PA		11787						
Employer of Contributor	•				Occupa	tion	•	•	
Employer Mailing Address/Princi Business	pal Place of	City		State	Zip 4)	Code(Plus	Descri	ption of	Contribution
							DATA 8	& F	POSTCARDS
Enter Grand Total of Part G	on Schedule II.	In-Kind	Contributi	ons Deta	iled				PAGE TOTAL
Summary Page, Section 3.									1,183.67

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or	Name of Filing Committee or Candidate					Reporting Period					
							То:				
				DATE			AMOUNT				
To Whom Paid	МО	DAY	YEAR								
Mailing Address						\$	0.00				
City	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure						
							PAGE TOTAL				
Enter Grand Total of Expe	naitures on Page 1, Re	port Cover Page, Item L	).			<b>\$</b>	0.00				

### STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period						
FRIENDS FOR BEHRENS		From:	<u>4/12/2016</u> <b>To:</b>				<u>5/16/2016</u>		
			DATE				Outstanding Balance of Debt		
			мо	DAY	YEAR				
						\$		508.80	
State PA	Zip Code (Plu 18707	us 4)	Description of Debt YARD SIGNS, BANNER, STICKERS						
Debts on Page :	1, Report Cover Pa	ge, Item	G.			\$	PAGE	<b>TOTAL</b> 508.80	
	<b>State</b> PA	State Zip Code (Plu	From:  State Zip Code (Plus 4) PA 18707	From: 4  MO  State Zip Code (Plus 4) Descrip	From: 4/12/2016   DATE   MO   DAY	From: 4/12/2016 To:     DATE	From: 4/12/2016 To:  DATE  MO DAY YEAR  \$ State   Zip Code (Plus 4)   Description of Debt   PA 18707 YARD SIGNS, BANNER, STICK  Debts on Page 1, Report Cover Page, Item G.	From: 4/12/2016 To: 5/16/20  Outstand Balance  MO DAY YEAR  State Zip Code (Plus 4) Description of Debt YARD SIGNS, BANNER, STICKERS  PAGE Debts on Page 1, Report Cover Page, Item G.	