

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 POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	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			
		10	25	2016		11	28	2016				
A. Amount Brought Forward From Last Report						\$ 76,432.62						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 11,882.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 88,314.62						
D. Total Expenditures (From Schedule III)						\$ 12,078.24						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 76,236.38						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 619.34						
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>10/25/2016</u> To: <u>11/28/2016</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 1,432.00

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)	\$ 2,350.00
TOTAL for the Reporting Period (2)	\$ 2,350.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 600.00
All Other Contributions (Part D)	\$ 7,500.00
TOTAL for the Reporting Period (3)	\$ 8,100.00

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.)	\$ 11,882.00
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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 FRIENDS FOR DARYL METCALFE	Reporting Period From: <u>10/25/2016</u> To: <u>11/28/2016</u>
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DATE	AMOUNT
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Full Name of Contributor WILLIAM E. ADAMS				MO	DAY	YEAR	\$ 250.00
Mailing Address P.O. BOX 1				10	20	2016	
City PORTERSVILLE	State PA	Zip Code (Plus 4) 16051					

Full Name of Contributor SIMON CAMPBELL			MO	DAY	YEAR	\$ 200.00
Mailing Address 1571 BROOKFIELD RD.			10	22	2016	
City NEWTOWN	State PA	Zip Code (Plus 4) 18940				

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
ROBERT J. STANIONIS						
Mailing Address 538 CHAPARRAL DR.			10	22	2016	
City CRANBERRY TWP	State PA	Zip Code (Plus 4) 16066				

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
VICKY L. GASS						
Mailing Address 280 ANDERSON RD.			10	23	2016	
City BUTLER	State PA	Zip Code (Plus 4) 16002				

Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
CATHY M. MYERS						
Mailing Address 161 AUTUMN HILL DR.			10	30	2016	
City CRANBERRY TWP	State PA	Zip Code (Plus 4) 16066				

Full Name of Contributor DANIEL M. ZUGELL			MO	DAY	YEAR	\$ 100.00
Mailing Address 713 SIR BARTON CT.			10	21	2016	
City CRANBERRY TWP	State PA	Zip Code (Plus 4) 16066				

Full Name of Contributor JAMES D. AUSTIN			MO	DAY	YEAR	\$ 100.00
Mailing Address P.O. BOX 827			10	28	2016	
City MARS	State PA	Zip Code (Plus 4) 16046				

Full Name of Contributor ROY C. KURTZROCK			MO	DAY	YEAR	\$ 250.00
Mailing Address 244 STATE RD.			10	30	2016	
City VALENCIA	State PA	Zip Code (Plus 4) 16059				

Full Name of Contributor WILLIAM C. SKUBA			MO	DAY	YEAR	\$ 200.00
Mailing Address 66 ALLEN LN.			10	25	2016	
City DRUMS	State PA	Zip Code (Plus 4) 18222				

Full Name of Contributor LARRY GORSKI			MO	DAY	YEAR	\$ 250.00
Mailing Address 190 MEADOWSWEET DR.			10	28	2016	
City STATE COLLEGE	State PA	Zip Code (Plus 4) 16801				

Full Name of Contributor RICHARD J. PASQUINELLI			MO	DAY	YEAR	\$ 100.00
Mailing Address 138 OAKVIEW DR.			11	3	2016	
City CRANBERRY TWP	State PA	Zip Code (Plus 4) 16066				

Full Name of Contributor KATHLEEN FRESHWATER			MO	DAY	YEAR	\$ 100.00
Mailing Address 119 SCOTTDALE DRIVE			11	2	2016	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15205				

Full Name of Contributor JO ANN MICK			MO	DAY	YEAR	\$ 100.00
Mailing Address 605 MARKET STREET			11	4	2016	
City ZELIENOPLE	State PA	Zip Code (Plus 4) 16063				

Full Name of Contributor RON NOLFI			MO	DAY	YEAR	\$ 250.00
Mailing Address 332 WHITETAIL PL.			11	4	2016	
City MARS	State PA	Zip Code (Plus 4) 16046				

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

PAGE TOTAL

\$ 2,350.00

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 FRIENDS FOR DARYL METCALFE	Reporting Period From: <u>10/25/2016</u> To: <u>11/28/2016</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee PA EMERGENCY PHYSICIANS PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 200 N. THIRD STREET SUITE 1500				10	31	2016	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee PA BAR PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 100 SOUTH STREET				11	9	2016	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108					

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

PAGE TOTAL
\$ 600.00

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>10/25/2016</u> To: <u>11/28/2016</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
DILLON MCCANDLESS, KING COULTER & GRAHAM LLP							
Mailing Address 128 W. CUNNINGHAM ST.				10	27	2016	\$ 1,000.00
City BUTLER	State PA	Zip Code (Plus 4) 16001					
Employer Name SAME AS ABOVE				Occupation LAW FIRM			
Employer Mailing Address/Principal Place of Business SAME AS ABOVE			City	State	Zip Code (Plus 4)		

Full Name of Contributor				MO	DAY	YEAR	
PAUL SWEENEY							
Mailing Address 9013 MARSHALL RD.				11	3	2016	\$ 500.00
City CRANBERRY TWP	State PA	Zip Code (Plus 4) 16066					
Employer Name SELF-EMPLOYED				Occupation BUSINESS-OWNER			
Employer Mailing Address/Principal Place of Business SAME AS ABOVE			City	State	Zip Code (Plus 4)		

Full Name of Contributor				MO	DAY	YEAR	
DAVID MILLNER							
Mailing Address 726 HIBISCUS LANE				11	3	2016	\$ 500.00
City VERO BEACH	State FL	Zip Code (Plus 4) 32963					
Employer Name DAVID MILLNER GROUP LLC				Occupation BUSINESS-OWNER			
Employer Mailing Address/Principal Place of Business 2055 NW DIAMOND CREEK WAY			City JENSON BEACH	State FL	Zip Code (Plus 4) 34957		

Full Name of Contributor ROBERT A. FERREE TRUST			MO	DAY	YEAR	\$ 3,000.00
Mailing Address 4848 ROUTE 8 UNIT 2			11	7	2016	
City ALLISON PARK	State PA	Zip Code (Plus 4) 15101				
Employer Name LANDMARK PROPERTIES			Occupation BUSINESS-OWNER			
Employer Mailing Address/Principal Place of Business SAME AS ABOVE		City	State	Zip Code (Plus 4)		

Full Name of Contributor JOHN M. STILLEY			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 131 BLACKTHORN DR.			11	9	2016	
City BUTLER	State PA	Zip Code (Plus 4) 16002				
Employer Name SELF-EMPLOYED			Occupation BUSINESS-OWNER			
Employer Mailing Address/Principal Place of Business SAME AS ABOVE		City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 7,500.00

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:

DATE				AMOUNT
Full Name				
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>10/25/2016</u> To: <u>11/28/2016</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 RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	619.34
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.)		\$	619.34

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>10/25/2016</u> To: <u>11/28/2016</u>
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					DATE		AMOUNT	
Full Name of Contributor DON RODGERS					MO	DAY	YEAR	\$ 180.64
Mailing Address 215 EXECUTIVE DRIVE								
City CRANBERRY TWP		State PA	Zip Code(Plus 4) 16066		10	31	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 DON RODGERS				MO 11	DAY 17	YEAR 2016	\$ 438.70
Mailing Address 215 EXECUTIVE DRIVE							
City CRANBERRY TWP	State PA	Zip Code(Plus 4) 16066					
Employer of Contributor SELF-EMPLOYED				Occupation BUSINESS OWNER			
Employer Mailing Address/Principal Place of Business SAME AS ABOVE		City	State	Zip Code(Plus 4)		Description of Contribution OFFICE SPACE	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.							PAGE TOTAL 619.34
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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS FOR DARYL METCALFE	From <u>10/25/2016</u> To: <u>11/28/2016</u>

				DATE		AMOUNT	
To Whom Paid VERIZON WIRELESS				MO	DAY	YEAR	\$ 107.15
Mailing Address P.O. BOX 25505				10	31	2016	
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 18002	Description of Expenditure SMART PHONE SERVICE				
To Whom Paid PIRYX INC.				MO	DAY	YEAR	\$ 28.75
Mailing Address 995 MARKET ST. 2ND FLOOR				11	3	2016	
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 94103	Description of Expenditure FEE				
To Whom Paid PIRYX INC.				MO	DAY	YEAR	\$ 14.38
Mailing Address 995 MARKET ST. 2ND FLOOR				11	3	2016	
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 94103	Description of Expenditure FEE				
To Whom Paid DAVID MILLNER GROUP, LLC				MO	DAY	YEAR	\$ 10,500.00
Mailing Address 2055 NW DIAMOND CREEK WAY				11	3	2016	
City JENSEN BEACH	State FL	Zip Code (Plus 4) 34957	Description of Expenditure DESIGN PRINTING MAIL SERVICES				
To Whom Paid ARMSTRONG				MO	DAY	YEAR	\$ 73.65
Mailing Address 437 NORTH MAIN STREET				11	4	2016	
City BUTLER	State PA	Zip Code (Plus 4) 16001	Description of Expenditure INTERNET & PHONE SERVICE				

To Whom Paid COMMUNICATIONS CONCEPTS			MO	DAY	YEAR	\$ 565.85
Mailing Address 2906 WILLIAM PENN HWY SUITE 401			11	4	2016	
City EASTON	State PA	Zip Code (Plus 4) 18045	Description of Expenditure AUTOMATED CALLS			

To Whom Paid CITIZENS BANK CARD SERVICES			MO	DAY	YEAR	\$ 59.67
Mailing Address P.O. BOX 42010			11	27	2016	
City PROVIDENCE	State RI	Zip Code (Plus 4) 02940	Description of Expenditure CREDIT CARD PAYMENT FOR CAMPAIGN EXPENSES TO INCLUDE FOOD AND BEVERAGES FOR VOLUNTEERS			

To Whom Paid ARMSTRONG			MO	DAY	YEAR	\$ 73.65
Mailing Address 437 NORTH MAIN STREET			11	27	2016	
City BUTLER	State PA	Zip Code (Plus 4) 16001	Description of Expenditure INTERNET & PHONE SERVICE			

To Whom Paid BANK OF AMERICA			MO	DAY	YEAR	\$ 591.77
Mailing Address P.O. BOX 15019			11	27	2016	
City WILMINGTON	State DE	Zip Code (Plus 4) 19886	Description of Expenditure CREDIT CARD PAYMENT FOR CAMPAIGN EXPENSES TO INCLUDE CAMPAIGN VAN INSURANCE, FUEL, POSTAGE, NOTARY FRESH VOLUNTEER MEALS			

To Whom Paid VERIZON WIRELESS			MO	DAY	YEAR	\$ 63.37
Mailing Address P.O. BOX 25505			11	28	2016	
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 18002	Description of Expenditure SMART PHONE SERVICE			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 12,078.24

