

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 :		20160170		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF CAROLYN COMITTA												
Street Address:												
City: WEST CHESTER						State: PA			Zip Code: 19382			
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.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	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				
						11	8	2016				
									(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		11	29	2016		12	31	2016				
A. Amount Brought Forward From Last Report						\$ 30,479.44						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 2,285.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 32,764.44						
D. Total Expenditures (From Schedule III)						\$ 3,228.33						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 29,536.11						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
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

Signature

Printed Name

My Commission Expires

Email

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 OF CAROLYN COMITTA	From: <u>11/29/2016</u> To: <u>12/31/2016</u>

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

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)	\$ 250.00
TOTAL for the Reporting Period (2)	\$ 250.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 1,775.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 1,775.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 210.00

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.)	\$ 2,285.00
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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	Reporting Period
	From: To:

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

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

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 OF CAROLYN COMITTA	From: <u>11/29/2016</u> To: <u>12/31/2016</u>

DATE				AMOUNT
Full Name of Contributor				
MARY BETH GRAY				
Mailing Address				
City PHILADELPHIA	State	Zip Code (Plus 4)	MO	DAY
	PA	191436604	12	8
				2016
				\$ 250.00

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

PAGE TOTAL
\$ 250.00

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 OF CAROLYN COMITTA	Reporting Period From: <u>11/29/2016</u> To: <u>12/31/2016</u>
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				DATE			AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$	500.00
FRIENDS OF MARY JO DALEY								
Mailing Address								
City		NARBERTH	State	PA	Zip Code (Plus 4)		190721750	
Full Name of Contributing Committee				MO	DAY	YEAR	\$	1,275.00
HOUSE DEMOCRATIC CAMPAIGN COMMITTEE								
Mailing Address								
City		HARRISBURG	State	PA	Zip Code (Plus 4)		171011130	

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

PAGE TOTAL
\$ 1,775.00

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: To:
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			DATE			AMOUNT	
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name			Occupation				
Employer Mailing Address/Principal Place of Business		City		State		Zip Code (Plus 4)	

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

PAGE TOTAL	
\$	0.00

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 FRIENDS OF CAROLYN COMITTA	Reporting Period From: <u>11/29/2016</u> To: <u>12/31/2016</u>
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				DATE		AMOUNT	
Full Name				MO	DAY	YEAR	\$ 210.00
STUDENT CANVASSERS							
Mailing Address							
City	WEST CHESTER	State	Zip Code (Plus 4)				
		PA	193822828	12	6	2016	
Receipt Description							
DEPOSIT UNUSED FUNDS FOR STUDENT CAN							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 210.00

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 CAROLYN COMITTA		From: <u>11/29/2016</u> To: <u>12/31/2016</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)	\$ 0.00
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.)			\$ 0.00

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	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF CAROLYN COMITTA	From <u>11/29/2016</u> To: <u>12/31/2016</u>

				DATE	AMOUNT		
To Whom Paid CITIZENS BANK				MO	DAY	YEAR	\$ 10.00
Mailing Address				11	29	2016	
City	PAOLI	State	PA	Zip Code (Plus 4)	193011518	Description of Expenditure FEE FOR ISSUING BANK CHECKS	
To Whom Paid DAVID E COX JR				MO	DAY	YEAR	\$ 200.00
Mailing Address				11	29	2016	
City	WEST CHESTER	State	PA	Zip Code (Plus 4)	193810711	Description of Expenditure HAND DELIVER SUBPOENA TO HARRISBURG	
To Whom Paid SAMUEL C STRETTON				MO	DAY	YEAR	\$ 173.00
Mailing Address				11	29	2016	
City	WEST CHESTER	State	PA	Zip Code (Plus 4)	193823336	Description of Expenditure OUT OF POCKET LEGAL EXPENSES	
To Whom Paid JAMES SALVAS				MO	DAY	YEAR	\$ 1,005.87
Mailing Address				12	1	2016	
City	WEST CHESTER	State	PA	Zip Code (Plus 4)	193802427	Description of Expenditure FACEBOOK ADS	
To Whom Paid CITIZENS BANK				MO	DAY	YEAR	\$ 55.73
Mailing Address				12	2	2016	
City	PAOLI	State	PA	Zip Code (Plus 4)	193011518	Description of Expenditure CHECK ORDER	
To Whom Paid DIRECT CONNECT				MO	DAY	YEAR	\$ 33.59
Mailing Address				12	2	2016	
City	CHANTILLY	State	VA	Zip Code (Plus 4)	201513229	Description of Expenditure MERCHANT CARD FEES FOR NOV 2016	

To Whom Paid MARK HAGERTY			MO	DAY	YEAR	\$ 900.00
Mailing Address			12	2	2016	
City WEST CHESTER	State PA	Zip Code (Plus 4) 193822947	Description of Expenditure COPY OF HEARING TRANSCRIPT			

To Whom Paid NUDY'S CAFE			MO	DAY	YEAR	\$ 66.00
Mailing Address			12	2	2016	
City WEST CHESTER	State PA	Zip Code (Plus 4) 193822805	Description of Expenditure LUNCH MEETING			

To Whom Paid CHARLES A MELTON ART AND ED CENTER			MO	DAY	YEAR	\$ 360.00
Mailing Address			12	5	2016	
City WEST CHESTER	State PA	Zip Code (Plus 4) 193823431	Description of Expenditure POLITICAL RALLY GYM RENTAL 11/6/16			

To Whom Paid STACI KING			MO	DAY	YEAR	\$ 5.00
Mailing Address			12	14	2016	
City WEST CHESTER	State PA	Zip Code (Plus 4) 193802729	Description of Expenditure NOTARY FEE			

To Whom Paid SIERRA CLUB			MO	DAY	YEAR	\$ 30.40
Mailing Address			12	14	2016	
City OAKLAND	State CA	Zip Code (Plus 4) 946123011	Description of Expenditure LISTS AND LABELS			

To Whom Paid CAROLYN COMITTA			MO	DAY	YEAR	\$ 388.74
Mailing Address			12	30	2016	
City WEST CHESTER	State PA	Zip Code (Plus 4) 193822828	Description of Expenditure REIMBURSE CAMPAIGN EXPENSES			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 3,228.33

