

Commonwealth of Pennsylvania

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: 115 S. BRANDYWINE STREET											
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	TO	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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 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	

Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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 COMMITTA	From: <u>11/29/2016</u> To: <u>12/31/2016</u>

				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
MARY BETH GRAY					
Mailing Address 4602 BALTIMORE AVE				\$	250.00
City PHILADELPHIA State PA Zip Code (Plus 4) 191436604	12	8	2016		

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	Mailing Address	City	MO	DAY	YEAR	
FRIENDS OF MARY JO DALEY	1294 MONTGOMERY AVE	NARBERTH	12	6	2016	\$ 500.00
	State PA	Zip Code (Plus 4) 190721750				
HOUSE DEMOCRATIC CAMPAIGN COMMITTEE	205 STATE ST	HARRISBURG	12	6	2016	\$ 1,275.00
	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:

	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	Mailing Address	City	State	MO	DAY	YEAR	\$
STUDENT CANVASSERS	115 S BRANDYWINE ST	WEST CHESTER	PA	12	6	2016	210.00
Zip Code (Plus 4) 193822828							
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 FRIENDS OF CAROLYN COMITTA	Reporting Period 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 RECEIVED - 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: _____

			DATE	AMOUNT
Full Name of Contributor	MO	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 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: _____
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Mailing Address				\$	0.00
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	MO	DAY	YEAR		
CITIZENS BANK	11	29	2016	\$	10.00
Mailing Address 39 LEOPARD RD					
City PAOLI					
State PA					
Zip Code (Plus 4) 193011518					
Description of Expenditure FEE FOR ISSUING BANK CHECKS					
To Whom Paid	MO	DAY	YEAR		
DAVID E COX JR	11	29	2016	\$	200.00
Mailing Address PO BOX 711					
City WEST CHESTER					
State PA					
Zip Code (Plus 4) 193810711					
Description of Expenditure HAND DELIVER SUBPOENA TO HARRISBURG					
To Whom Paid	MO	DAY	YEAR		
SAMUEL C STRETTON	11	29	2016	\$	173.00
Mailing Address 301 S HIGH ST					
City WEST CHESTER					
State PA					
Zip Code (Plus 4) 193823336					
Description of Expenditure OUT OF POCKET LEGAL EXPENSES					
To Whom Paid	MO	DAY	YEAR		
JAMES SALVAS	12	1	2016	\$	1,005.87
Mailing Address 141 E MARSHALL ST					
City WEST CHESTER					
State PA					
Zip Code (Plus 4) 193802427					
Description of Expenditure FACEBOOK ADS					
To Whom Paid	MO	DAY	YEAR		
CITIZENS BANK	12	2	2016	\$	55.73
Mailing Address 39 LEOPARD RD					
City PAOLI					
State PA					
Zip Code (Plus 4) 193011518					
Description of Expenditure CHECK ORDER					
To Whom Paid	MO	DAY	YEAR		
DIRECT CONNECT	12	2	2016	\$	33.59
Mailing Address 3901 CENTERVIEW DR STE W					
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 201 W MARKET ST			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 300 W MARKET ST			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 501 E MINER ST			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 401 E GAY ST			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 2101 WEBSTER ST			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 115 S BRANDYWINE ST			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

