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 2015	0347			Report Filed		CA	NDI	DATE		COM	AITTEE	Y	LUB	51131	
Name of Filing C	ommittee, Candid	ate or L	obbyist:	•	FRIENI	DS OF	ERIC	ROI	E CAMI	PAIGI	V FINA	NCE CO	MMITTE	E		
Street Address: P.O. BOX 3283																
City:	WEST CHESTE	R					State	e:	PA			Zip Co	de: 19	9381-3	283	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 DA		F	POST-	3.		AMENDI REPORT		Yes	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 DA		F	POST-	6. X		TERMINA REPORT		Yes	No	✓
report type)	ANNUAL REPORT	7.	Year 2016				ILING METHOD) CHECK ONE					PAPER		M	DISKE	TTE
Name of Office Sought by Candidate:						-	DAT	ΈO	F ELE	СТІО	N	District Number	Office Code	Pai	ty Code	County Code
							МО		DAY	YE	AR			REF	•	
								11		8	2016		(SEE IN	STRUCTI	ONS FOR C	ODES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR			МО		DAY		AR	FC	OR OFFI	CE USE	ONLY	
			10 25	20	016	то		11	7	28	2016					
	ught Forward Fron					\$					163.97					
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$				30,3	390.00					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$				35,8	353.97					
D. Total Expend	ditures (From Sch	edule II	1)			\$				30,0	34.46					
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$				5,8	19.51					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)	\$				40,7	44.12					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)		\$				4,6	45.12					
				AFF	IDAV	IT SE	CTI	NC								
I swear (or affirm)	that this report, incl		_								_		of my kno	wledge	and belie	ef , true
correct and comple	ete. cribed before me this	i									·:	of Davas	- Cub-si	tina Da		
	day of					_					ngnature	e or Perso	n Submit	ting Ke	oort	
	Signatu	re				_						Prin	ited Name	e		
My Commission Ex	·					_						Ema				
	МО		AY	YR	•					ea Cod	le	Daytin	ne Teleph	none Nu	mber	
	a report of a cand that to the best of n				•				_		v provis	ions of th	e act of 1	una 3 1	937 (D I	1333
No 320) as amende	ed.	iy kilowi	suge and ben	ici tilis	pontica	ii coiiiii	incree i	143 11		icu an	y provis	10113 01 111	e act of 3	une 3,1	337 (F.E.	
Sworn to and subsc	ribed before me this day of		20								s	ignature (of Candid	ate		
												Printe	ed Name			
My Commission Exp	Signature ires					_						Ema	nil			—
	мо	D	AY	YR		_			Area	Code		D	aytime T	elephor	ne Numbe	 er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF ERIC ROE CAMPAIGN FINANCE COMMITTEE	From:	<u>10/25/20</u>	<u>16</u> To:	11/28/2016
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)			\$	0.00
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)			\$	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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			•			
Name of Filing Committee or Candidate				porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			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.

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 Candidate			Rep	oorting P				
			Fro	m:		To):	
					DATE		АМ	OUNT
Full Name of Contributor				МО	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 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			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				Reporting Period						
	F					To	То:			
				D	ATE		А	MOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plu	s 4)							
Employer Name		•		Occupa	tion		•			
Employer Mailing Address/Principal Plac Business	e of	City		•	State		Zip Cod	de (Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	, Secti	on 3.			P \$	PAGE TOTAL 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	Name of Filing Committee or Candidate				od			
			From:			To:		
			•	D	ATE		А	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•		•	•	
Enter Grand Total of Part E o	on Schedule I. Detailed	l Summary Page	Section	4			P/	AGE TOTAL
- Country of Furt 2	Juliana 1/ Butanet	. January rage,		••			\$	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 Per	riod	
FRIENDS OF ERIC ROE CAMPAIGN FINANCE COMMITTEE	From:	<u>10/25/2016</u> To:	<u>11/28/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	PR	
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)	\$	200.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (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,		\$	200.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Cand	lidate		Reporting	Period				
FRIENDS OF ERIC ROE CAMPAIGN FINANCE COMMITTEE				<u>10/</u>	<u>/25/2016</u>	<u>16</u> To: <u>11/28/201</u>		
		DATE		AMOUNT				
Full Name of Contributor ERIC ROE			мо	DAY	YEAR			
Mailing Address 890 S. MATL	ACK STREET APT. 24	9	10	25	2016	\$	100.00	
City WEST CHESTER	State PA	Zip Code (Plus 4) 19382	1					
				l		<u> </u>		
Description of Contribution: W	EB ADVERTISEMENTS	ON FACEBOOK.COM						
Full Name of Contributor	EB ADVERTISEMENTS	ON FACEBOOK.COM	МО	DAY	YEAR	Γ		
Full Name of Contributor ERIC ROE	EB ADVERTISEMENTS		MO 11	DAY 5	YEAR 2016	\$	100.00	
Full Name of Contributor ERIC ROE			11			\$	100.00	
Full Name of Contributor ERIC ROE Mailing Address 890 S. MATL City WEST CHESTER	ACK STREET APT. 24	9 Zip Code (Plus 4) 19382	11			\$	100.00	
Full Name of Contributor ERIC ROE Mailing Address 890 S. MATL City WEST CHESTER	ACK STREET APT. 24 State PA EB ADVERTISEMENTS	2ip Code (Plus 4) 19382 ON FACEBOOK.COM	11	5	2016	\$	100.00 PAGE TOTAL	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Reporting	Period				
					From:			То:		
						DAT	E			AMOUNT
Full Name of Contributor					мо	DAY	,	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus	4)						
Employer of Contributor					Оссир	ation				
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zi 4)	p Code(Pl)	us	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed					PAGE TOTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or (Reporting Period						
	From			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 Expen	laitures on Page 1, Re	port Cover Page, Item D).			\$	0.00