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 201	40087				port ed B		CAND	IDATE		COM	ITTEE	✓	LOBE	YIST	
Name of Filing C	Committee, Candi	date or L	obbyist:	•	FRIE	END	S OF .	JAMIE S	ANTON	Α			_			
Street Address:	323 WEST F	RONT ST	•													
City:	MEDIA							State:	PA			Zip Cod	le: 19	9063		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY F PRIMARY	PRE-	- [2	2. X	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- !	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	~
report type)	ANNUAL REPOR	7.	Year 2017					IG METH CHECK C				PAPER		\checkmark	DISKE	ГТЕ
Name of Office S	Sought by Candid	ate:	•					DATE (OF ELE	CTIC	DN	District Number	Office Code	Part	ty Code	County Code
								МО	DAY	Y	EAR		10000	REP	!	
								11	L	7	2017		(SEE IN	STRUCTIO	ONS FOR C	ODES)
Summary of Expenditures	Receipts and	МО	DAY YE	AR			_	МО	DAY	Υ	EAR	FO	R OFFI	CE USE	ONLY	
			3 28	20	017	Т	0		5	1	2017					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			18,	406.01					
B. Total Moneta	ary Contributions	And Rec	eipts (From So	che	dule	e I)	\$			•	700.00					
C. Total Funds	Available (Sum C	f Lines A	and B)				\$			19,	106.01					
D. Total Expend	ditures (From Scl	nedule II	I)				\$			(4,1	28.83)					
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)				\$			14,9	977.18					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	dul	e II	[)	\$				0.00					
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)				\$				0.00			•		
			А	FF	IDA	٩VI	T SE	CTION								
PART I - If this is	s a Committee re	ort, trea	surer sign her	e. 1	[f thi	is is	a Can	didate r	eport,	candi	date sig	jn here.				
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached sched	ules	filed	d on	paper (or by elec	tronic m	edium	, are to t	the best o	f my kno	wledge a	and belie	f , true
Sworn to and subs	cribed before me th	is	20								Signature	of Perso	n Submit	ting Rep	ort	
	Signat	ure	_				- -					Prin	ted Name	e		
My Commission Ex	-	uie										Ema	il			
	мо	D	AY	ΥR			_		Ar	ea Co	de	Daytim	e Telepi	none Nui	mber	
Part II- If this is	a report of a car	didate's	authorized Co	mm	itte	e, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of	my knowl	edge and belief	this	polit	tical	commi	ittee has	not viola	ted ar	ny provis	ions of the	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this	i									s	ignature o	of Candid	ate		
	day of						_					Drint-	d Name			
	Signature						-									
My Commission Exp	_											Ema	il			
	МО	D	AY	YR			•		Area	Code		Da	ytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
FRIENDS OF JAMIE SANTONA	From:	3/28/201	<u>7</u> To:	5/1/2017
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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)			\$	200.00
TOTAL for the Reporting	J Period	(2)	\$	200.00
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)			\$	500.00
TOTAL for the Reporting	J Period	(3)	\$	500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g 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			\$	700.00

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		Re	porting	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 Candidate

Reporting Period

DATE

FRIENDS OF JAMIE SANTONA

From:

<u>3/28/2017</u> **To:**

5/1/2017

AMOUNT

Full Name of Contributor CYNTHIA LEITZELL			мо	DAY	YEAR	
Mailing Address 1743 ASHBROOKE	AVE					\$ 200.00
City GARNET VALLEY	State PA	Zip Code (Plus 4) 19060	1	25	2017	

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

PAGE TOTAL \$ 200.00

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	date		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			Repo	orting Pe	riod			
FRIENDS OF JAMIE SANTONA			Fron	n:	<u>3/28/2</u>	<u>017</u> T o):	5/1/2017
				D/	ATE		АМО	UNT
Full Name of Contributor DAVID HACKETT				МО	DAY	YEAR		
Mailing 501 OAKCREST LANE							\$	500.00
City WALLINGFORD	State PA	Zip Code (Plus 19086	i 4)	1	25	2027		
Employer Name BUCHANAN INGERSA	LL & ROONEY			Occupat	ion A	ATTORN	EY	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code ((Plus 4)
TWO LIBERTY PLACE50 S 16TH STREET	-	PHILADE	LPHIA		PA		19102	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			PAG \$	500.00

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	Candidate		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	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	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Full E	Jonedane 1, Betanet	. Jammar y r uge,	500.011				\$	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	od	
FRIENDS OF JAMIE SANTONA	From:	3/28/2017 To:	5/1/2017
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)	\$	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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		Reportin	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	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 Sun	nmary Pag	je,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	e				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Γ		Т					
Name of Filing Committee or Co	andidate		Reportii	ng Period			
FRIENDS OF JAMIE SANTONA			From	<u>3/28</u>	8/2017	То:	5/1/2017
				DATE			AMOUNT
To Whom Paid ALLEN & GOEL			мо	DAY	YEAR		
Mailing Address 677 WEST I	DEKALB PIKE		1	29	2017	\$	1,985.00
City KING OF PRUSSIA	State	Zip Code (Plus 4)	Descrip	otion of Exp	enditure		
	PA	19406		TISING AN			
To Whom Paid VERIZON			МО	DAY	YEAR		
Mailing Address PO BOX 255	505		1	29	2017	\$	109.61
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 18002		Description of Expenditure TELEPHONE			
To Whom Paid UPPER DARBY ARTS AND EDUC	CATION FOUNDATION		мо	DAY	YEAR		
Mailing Address 601 N LANS	SDOWNE AVE		2	14	2017	\$	250.00
City DREXEL HILL	State PA	Zip Code (Plus 4) 19026	Descrip DONAT	otion of Exp	penditure		
To Whom Paid HOUSE REPUBLICAN CAMPAIG	N COMMITTEE		мо	DAY	YEAR		
Mailing Address PO 11787			2	15	2017	\$	650.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Descrip DONAT	otion of Exp	penditure		
To Whom Paid VERIZON			МО	DAY	YEAR		
Mailing Address PO BOX 255	505		3	4	2017	\$	124.61

Zip Code (Plus 4)

18002

Description of Expenditure

TELEPHONE

State

PΑ

LEHIGH VALLEY

						PAGE	
To Whom Paid SACRED HEART SAMROCK SHUFFLE			МО	DAY	YEAR		
Mailing Address 109 N MANOA ROAL)		3	4	2017	\$	150.00
City HAVERTOWN	State PA	Zip Code (Plus 4) 19083	Descrip DONAT	tion of Exp	enditure		
To Whom Paid DREXEL HILL MIDDLE SCHOOL			МО	DAY	YEAR		
Mailing Address 3001 STATE ROAD			3	4	2017	\$	325.00
City DREXEL HILL	State PA	Zip Code (Plus 4) 19026	Descrip DONAT	tion of Exp	enditure		
To Whom Paid UPPER DARBY POLICE RELIEF ASSOCIA	ATION		МО	DAY	YEAR		
Mailing Address PO 2078			3	4	2017	\$	100.00
City UPPER DARBY	State PA	Zip Code (Plus 4) 19082		tion of Exp ION AND A			
To Whom Paid VERIZON		<u>I</u>	МО	DAY	YEAR		
			MO 7	DAY 9	YEAR 2017	\$	109.61
VERIZON	State PA	Zip Code (Plus 4) 18002	7	9 ition of Exp	2017		109.61
Mailing Address PO BOX 25505	PA		7 Descrip	9 ition of Exp	2017		109.61
VERIZON Mailing Address PO BOX 25505 City LEHIGH VALLEY To Whom Paid	PA B		7 Descrip TELEPH	9 Ition of Exp	2017 penditure		109.61 75.00
Mailing Address PO BOX 25505 City LEHIGH VALLEY To Whom Paid BONNER AND PRENDLE FATHER'S CLUI	PA B		7 Descrip TELEPH MO	9 ONE DAY 9	2017 penditure YEAR 2017	\$	
Wailing Address PO BOX 25505 City LEHIGH VALLEY To Whom Paid BONNER AND PRENDLE FATHER'S CLUI Mailing Address 2836 WESTERHAM	PA B ROAD State PA	18002 Zip Code (Plus 4)	7 Descrip TELEPH MO 4 Descrip	9 ONE DAY 9	2017 penditure YEAR 2017	\$	
Mailing Address PO BOX 25505 City LEHIGH VALLEY To Whom Paid BONNER AND PRENDLE FATHER'S CLUB Mailing Address 2836 WESTERHAM I City DOWNINGTOWN	PA B ROAD State PA ICAN COMMITTEE	18002 Zip Code (Plus 4)	7 Descrip TELEPH MO 4 Descrip DONAT	9 ONE DAY 9 Stion of Exp	2017 Penditure YEAR 2017 Penditure	\$	

To Whom Paid DELAWARE COUNTY YOUNG REPUBLICANS			мо	DAY	YEAR	
Mailing Address 323 WEST FRONT STREET			4	18	2017	\$ 150.00
City MEDIA	State PA	Zip Code (Plus 4) 19063	Description of Expenditure DONATION			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$ PAGE TOTAL 4,128.83