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 :	i on 2015	50334			Repor Filed	-	CAND	IDATE		СОМІ	MITTEE	✓	LOBE	BYIST	
Name of Filing C	Committee, Candid	late or L	obbyist:		CIRESI	, JOE	FRIEND	OF							
Street Address:	120 CONNOR	DRIVE													
City:	LIMERICK						State:	PA			Zip Co	de: 19	468		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D PRIM		POST-	3. X		AMENDN REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 D ELEC	AY CTION	POST-	6.		TERMIN REPORT		Yes	No	\checkmark
report type)	ANNUAL REPORT	7.	Year 2017				NG METH				PAPER		\checkmark	DISKE	TTE
Name of Office S	L Sought by Candida	te:					DATE	OF ELE	СТІС	DN	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YI	EAR	38		DEN	1	46
							1	1	7	2017		(SEE INS	TRUCTIO	ONS FOR	CODES)
Summary of	Receipts and	мо	DAY	YEAR	2		мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		5 2	2	017	Ю		6	5	2017					
A. Amount Bro	ught Forward Fro	m Last R	eport		•	\$	5		1,2	238.31					
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	4	\$		8,9	917.48					
C. Total Funds Available (Sum Of Lines A and B) \$ 10,155.79															
D. Total Expenditures (From Schedule III) \$ 3,157.59															
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		4	5		6,9	98.20					
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)	4	\$		1,0	00.00					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)		4	\$			0.00					
				AFF	IDAV	IT SE	ECTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign	here. 1	If this i	s a Ca	ndidate	report,	candi	date sig	gn here.				
I swear (or affirm correct and comple) that this report, inc ete.	luding the	attached sc	hedules	s filed or	ı paper	or by elec	tronic m	edium	, are to	the best o	f my know	/ledge	and beli	ef , true
Sworn to and subs	cribed before me this day of	s	20						9	Signaturo	e of Perso	n Submitt	ing Rep	ort	
	Signatu	Ire				_					Prin	ted Name			
My Commission Ex	-										Ema	il			
	мо	D	AY	YR				Ar	ea Coo	le	Daytin	ne Telepho	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee, (Candio	date shal	l sign h	ere.						
I swear (or affirm) No 320) as amendo	that to the best of r ed.	ny knowle	edge and beli	ief this	politica	l com	nittee has	not viola	ted ar	ıy provis	ions of th	e act of Ju	ine 3,19	937 (P.L	. 1333,
Sworn to and subso	ribed before me this day of		20							s	ignature	of Candida	te		
						_					Printe	ed Name			
	Signature					_					Ema				
My Commission Exp	bires										Ema				
	мо	D	AY	YR		_		Area	Code		D	aytime Te	lephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** CIRESI, JOE FRIEND OF From: <u>5/2/2017</u> **To:** <u>6/5/2017</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 1,671.00 **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 250.00 **Contributions Received From Political Committees (Part A)** 1,985.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 2,235.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 3,411.15 1,600.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 5,011.15 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.33 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 8,917.48 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

\$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			
CIRESI, JOE FRIEND OF			From: <u>5/2/2017</u> To:				<u>6/5/2017</u>
				DATE			AMOUNT
Full Name of Contributing Com Friends of Karen Geld Sanchez			мо	DAY	YEAR		
Mailing Address 356 Eve	rgreen Road					\$	250.00
City Jenkintown	State PA	Zip Code (Plus 4) 19046	- 5	31	2017		
	•				1		PAGE TOTAL

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

\$

250.00

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 Candidat	e		Rep	orting Po	eriod					
CIRESI, JOE FRIEND OF			Fron	n:	<u>5/2/</u> 2	6/5/2017				
DATE							AMOUNT			
Full Name of Contributor Lawrence Cohen & Marla Hexter				мо	DAY	YEAR				
Mailing Address 27 Mine Hill Road							\$ 100.00			
City Schwenksville	State PA	Zip Code (Plus 4) 19473		5	31	2017				
Full Name of Contributor Anne Marie & Barry Brazunas		мо	DAY	YEAR						
Mailing Address 1343 Glenhardie Road				_			\$ 100.00			
City Wayne	State PA	Zip Code (Plus 4) 19087		5	31	2017				
Full Name of Contributor Leslie Brady				мо	DAY	YEAR				
Mailing Address 40 Longcross Road							\$ 100.00			
City Limerick	State PA	Zip Code (Plus 4) 19468		5	31	2017				
Full Name of Contributor Ned & Sharon Greth				мо	DAY	YEAR				
Mailing Address 1226 Snyder Road					31	2017	\$ 100.00			
City Perkiomenville	State PA	Zip Code (Plus 4) 18074		5						
Full Name of Contributor Stephen & Barbara Toroney				мо	DAY	YEAR				
Mailing Address 833 Logan Street							\$ 100.00			
City Pottstown	State PA	Zip Code (Plus 4) 19464		5	31	2017				

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Full Name of Contributor Kenneth Heydt & Cynthia Bil	ous		мо	DAY	YEAR	
Mailing Address 27 Tice L	ane					\$ 100.00
City Perkasie	State PA	Zip Code (Plus 4) 18944	- 5	31	2017	
Full Name of Contributor Faith & Bradley Kirsch			мо	DAY	YEAR	
Mailing Address 441 Sade	dlery Drive					\$ 150.00
City Perkasie	State PA	- 5	31	2017		
Full Name of Contributor Richard & Cathie Briscoe		мо	DAY	YEAR		
Mailing Address 1024 Bro					\$ 250.00	
City Royersford	State PA	Zip Code (Plus 4) 19468	- 5	31	2017	
Full Name of Contributor Daylin Leach			мо	DAY	YEAR	
Mailing Address PO Box 6	50178					\$ 250.00
City King of Prussia	State PA	Zip Code (Plus 4) 19406	- 5	31	2017	
Full Name of Contributor Katie McIlay	·	·	мо	DAY	YEAR	
Mailing Address 85 Hann	ah Court					\$ 100.00
City Royersford	State PA	Zip Code (Plus 4) 19468	- 5	25	2017	
Full Name of Contributor Michael Lavanga			мо	DAY	YEAR	
Michael Lavanga	Street Apt 408		мо	DAY	YEAR	\$ 100.00
Michael Lavanga	Street Apt 408 State PA	Zip Code (Plus 4) 19106	мо	DAY 31	YEAR 2017	\$ 100.00

Full Name of Contributor Linda Courtemanche			мо	DAY	YEAR	
Mailing Address 407 N. 5	th Avenue					\$ 85.00
City Royersford	State PA	Zip Code (Plus 4) 19468	- 5	31	2017	
Full Name of Contributor Karen Sanchez			мо	DAY	YEAR	
Mailing Address 356 Ever	- 5	31	2017	\$ 250.00		
Full Name of Contributor Thomas Lepera			мо	DAY	YEAR	
Mailing Address 1716 Ker	ndrick Lane					\$ 100.00
City Norristown	State PA	Zip Code (Plus 4) 19401	- 5	31	2017	
Full Name of Contributor Catya Harrold			мо	DAY	YEAR	
Mailing Address 32 Walnut Street						\$ 100.00
City Pottstown	State PA	Zip Code (Plus 4) 19464	- 5	31	2017	
	I	I				

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

PAGE TOTAL

1,985.00

\$

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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 Ca	ndidate		Reporting Period						
CIRESI, JOE FRIEND OF			From:	<u>5/</u>	<u>2/2017</u>	То:	<u>!</u>	6/5/2017	
					DATE AMOUN				
Full Name of Contributing Committee Friends of Linda Weaver					DAY	YEAR			
Mailing Address 806 Lizzie L	ane						\$	3,411.15	
City Royersford State Zip Code (P PA 19468				5	31	2017			
						ſ		PAGE TOTAL	
Enter Grand Total of Part C o	on Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	3,411.15	

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 Co	ame of Filing Committee or Candidate				Rep	orting Pe	riod			
CIRESI, JOE FRI	END OF				From	n:	<u>5/2/2</u>	<u>017</u> To	6/5/2	<u>017</u>
						DA	ATE		AMOUNT	
Full Name of Con Valerie A. Arkoos						мо	DAY	YEAR		
Mailing Address	530 Spring Lane									500.00
City Glenside		State PA		p Code (Plus 0038	: 4)	5	31	2017		
Employer Name Montgomery County					Occupat	c ion C	County C	Commissioner		
Employer Mailing Business	Address/Principal Place	e of		City			State		Zip Code (Plus 4))
PO Box 311 Norristown			/n		PA		19404			
Full Name of Contributor Beverly Hahn					мо	DAY	YEAR			
Mailing Address	1621 Winchester Driv	e							\$ 1	100.00
City Blue Bell		State PA		p Code (Plus 9422	: 4)	5	8	2017		
Employer Name	Retired					Occupation Retired				
Employer Mailing Business	Address/Principal Plac	e of		City			State		Zip Code (Plus 4)	
Full Name of Con Beverly Hahn	tributor					мо	DAY	YEAR		
Mailing Address	1621 Winchester Driv	е								500.00
City Blue Bell		State PA	-	p Code (Plus 9422	: 4)	5	31	2017		
Employer Name Retired				Occupat	i on R	letired				
Employer Mailing Business	Address/Principal Plac	e of		City		1	State		Zip Code (Plus 4)	I

Full Name of Contributor Jean & Kevin Dandois	ean & Kevin Dandois							
Mailing 585 Michelle Lane						\$ 500.00		
City Colllegeville	State PA	Zip Code (Plus 4) 19426	5	5 31 20				
Employer Name Merck & Co				Occupation Buisness systems director				
Employer Mailing Address/Principal Plac Business	e of	City	State			Zip Code (Plus 4)		
770 Sumneytown Pk		West Point	PA			19486		
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page, Sectio	on 3.			PAGE TOTAL		

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 Ca	ndidate		Report	ting Perio	d					
CIRESI, JOE FRIEND OF			From:		<u>5/2/201</u>	<u>7</u> To:	e: <u>6/5/2017</u>			
			1	DATE				AMOUNT		
Full Name Phoenixville Federal Bank & Trust					DAY	YEAR				
Mailing Address 70 N. Lewis Road							\$	0.33		
City Royersford	State PA	Zip Code (19468	Plus 4)	5	25	2017	7			
Receipt Description Interes	Receipt Description Interest earned									
Enter Grand Total of Part E on	ter Grand Total of Part E on Schedule I, Detailed Summary Page, Secti							PAGE TOTAL		
	Senedule 1, Detuned	. Summary ruge,	Section				\$	0.33		

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		
CIRESI, JOE FRIEND OF	From:	<u>5/2/2017</u> To:	<u>6/5/2017</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	ſF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	1,000.00
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, 1		\$	1,000.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	g Period			
			From:			То:	
				DATE		ΑΜΟ	JNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address	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 Detail Section 2.				mary Pag	je,	PAGE	TOTAL
					4	5	0.00

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SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting P	eriod		
CIRESI, JOE FRIEND OF					Fro	From: <u>5/2/201</u>		<u>17</u> To:	<u>6/5/2017</u>
							DATE		AMOUNT
Full Name of Contributor Nate Riedy						мо	DAY	YEAR	
Mailing Address 316 Patrick Way							F	2017	\$ 1,000.00
City Royersford	State PA	Zip Code(Plus 4) 19468			6	5	2017		
Employer of Contributor Lancaster E	Bible College	2				Occupation Fundraiser			
Employer Mailing Address/Principal Plac Business	e of	City		State		Zip 4)	Code(Plus	Descri	ption of Contribution
901 Eden Road Lancaster				PA		176	01	Consul	ting services
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 1,000.00			

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
CIRESI, JOE FRIEND OF			From	<u>5/</u>	<u>2/2017</u>	То:	<u>6/5/2017</u>
				DATE		AMOUNT	
To Whom Paid Nate Riedy			мо	DAY	YEAR		
Mailing Address 316 Patrick Way			6	5	2017	\$	2,000.00
City Royersford	State PA	Zip Code (Plus 4) 19468	Description of Expenditure Consulting services				
To Whom Paid Christina Breslin-Frankel			мо	DAY	YEAR		
Mailing Address 4011 Ashbrook Dr			6	5	2017	\$	13.24
City Royersford	State PA	Zip Code (Plus 4) 19468	Description of Expenditure reimburse for expenses pd personally				
To Whom Paid PayPal			мо	DAY	YEAR		
Mailing Address 2221 First Street			6	5	2017	\$	43.77
City San Jose	State CA	Zip Code (Plus 4) 95131	Description of Expenditure fees				
To Whom Paid Wendy G. Rothstein for Judge			мо	DAY	YEAR		
Mailing Address 332 Cambridge Roa	d		5	4	2017	\$	100.00
City Plymouth Meeting	State PA	Zip Code (Plus 4) 19462	Description of Expenditure Donation				
To Whom Paid Friends of Peter Addalli			мо	DAY	YEAR		
Mailing Address 311 Laurel Drive			5	4	2017	\$	100.00
City Trappe	State PA	Zip Code (Plus 4) 19426	Description of Expenditure Donation				

To Whom Paid Joe Ciresi			мо	DAY	YEAR			
Mailing Address 120 Connor Drive			6	5	2017	\$	857.22	
City Royersford	d	State	Zip Code (Plus 4)	Description of Expenditure reimburse for fundraising event food & bev expenses pd personally				
		PA	19468					
To Whom Paid Frank Burstein				мо	DAY	YEAR		
Mailing Address 160 Pebble Beach Drive			6	5	2017	\$	43.36	
City Linfield		State PA	Zip Code (Plus 4) 19468	Description of Expenditure reimburse for expenses pd personally				
								PAGE TOTAL
Enter Grand Tot	al of Expenditures	on Page 1, Re	eport Cover Page, Item D	•			\$	3,157.59

5/19/2024 8:14:39 PM