### **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

| Filer Identificati<br>Number :  | on 2006  | 8008      |                       |          | Repoi    |        | CAI     | COMMITTEE V LOBBYISI |          |             |           |                      |                |                      | 51151     |                |
|---|--|-----------|-----------------------|----------|----------|--------|---------|----------------------|----------|-------------|-----------|----------------------|----------------|----------------------|-----------|----------------|
| Name of Filing C  | ommittee, Candid                                     | late or L | obbyist:              | •        | FRIENI   | DS OF  | FARN    | ESE                  |          |             | •         |                      |                |                      |           |                |
| Street Address:   | C/O SD ASSO  | CIATES    | , P.C.,300            | YORKT    | TOWN     | PLAZA  |         |                      |          |             |           |                      |                |                      |           |                |
| City:   | ELKINS PARK  |           |                       |          |          |        | State   | e:                   | PA       |             |           | Zip Co               | de: 19         | 9027                 |           |                |
| TYPE OF<br>REPORT   | 6TH TUESDAY<br>PRE-PRIMARY                           | 1.        | 2ND FRIDA<br>PRIMARY  | Y PRE-   | - 2.     | 30 DA  |         | F                    | POST-    | 3. <b>X</b> |           | AMENDMENT<br>REPORT? |                | Yes                  | No        |                |
| (place X to<br>the right of   | 6TH TUESDAY<br>PRE-ELECTION                          | 4.        | 2ND FRIDA<br>ELECTION | Y PRE    | 5.       | 30 DA  |         | F                    | POST-    | 6.          |           | TERMINA<br>REPORT    |                | Yes                  | No        | <b>✓</b>       |
| report type)  | ANNUAL REPORT  | 7.        | <b>Year</b> 2016      |          |          |        | NG ME   |                      |          |             |           | PAPER                |                | $  \checkmark  $     | DISKE     | TTE            |
| Name of Office S  | ought by Candida                                     | ite:      |                       |          | -        |        | DAT     | ΕO                   | F ELE    | СТІС        | N         | District<br>Number   | Office<br>Code | Pai                  | ty Code   | County<br>Code |
| SENATOR IN TH   | HE GENERAL ASS                                       | EMRI Y    |                       |          |          |        | МО      |                      | DAY      | YI          | EAR       | 1                    | STS            | DEI                  | 1         | 51             |
| SENATOR IN TI   | IE GENERAL ASS                                       | LINDLI    |                       |          |          |        |         | 11                   |          | 8           | 2016      |                      | (SEE IN        | STRUCTI              | ONS FOR C | CODES)         |
| Summary of  |  | МО        | DAY                   | YEAR     |          |        | МО      |                      | DAY      | Y           | EAR       | FC                   | OR OFFI        | CE USE               | ONLY      |                |
| Expenditures  | <b>Expenditures from:</b> 4 12 2016 <b>TO</b> 5 16 2 |           |                       |          |          |        |         | 2016                 |          |             |           |                      |                |                      |           |                |
| A. Amount Brought Forward From Last Report \$                               |  |           |                       |          |          |        |         |                      |          | 96,         | 123.57    |                      |                |                      |           |                |
| B. Total Monetary Contributions And Receipts (From Schedule I) \$ 16,750.00 |  |           |                       |          |          |        |         |                      |          |             | 750.00    |                      |                |                      |           |                |
| C. Total Funds Available (Sum Of Lines A and B) \$ 112,8                    |  |           |                       |          |          |        |         |                      | 373.57   |             |           |                      |                |                      |           |                |
| D. Total Expenditures (From Schedule III) \$                                |  |           |                       |          |          |        |         |                      |          | 78,6        | 520.39    |                      |                |                      |           |                |
| E. Ending Cash  | Balance (Subtrac                                     | t Line D  | From Line             | C)       |          | \$     |         |                      |          | 34,2        | 253.18    |                      |                |                      |           |                |
| F. Value Of In-   | Kind Contribution                                    | s Receiv  | ed (From S            | chedul   | le II)   | \$     |         |                      |          |             | 0.00      |                      |                |                      |           |                |
| G. Unpaid Debt  | s And Obligations                                    | (From     | Schedule IV           | /)       |          | \$     |         |                      |          |             | 0.00      |                      |                | '                    |           |                |
|   |  |           |                       | AFF      | IDAV     | IT SE  | CTIC    | NC                   |          |             |           |                      |                |                      |           |                |
|   | a Committee rep                                      | -         | _                     |          |          |        |         |                      |          |             | _         |                      | of my kno      | wledge               | and belie | ef , true      |
| correct and comple  |  | _         |                       |          |          |        |         |                      |          |             |           |                      |                |                      |           |                |
| Sworn to and subs   | cribed before me thi<br>day of<br>— —————            | s<br>     | _ 20                  |          |          | _      |         |                      |          | S           | Signature | of Perso             | n Submit       | ting Re <sub>l</sub> | oort      |                |
|   | Signatu  | ıre       |                       |          |          | _      |         |                      |          |             |           | Prin                 | ted Name       | e                    |           |                |
| My Commission Ex  | pires  |           |                       |          |          | _      |         |                      |          |             |           | Ema                  | il             |                      |           |                |
|   | МО   | D         | AY                    | YR       |          |        |         |                      | Are      | ea Coo      | de        | Daytin               | ne Teleph      | none Nu              | mber      |                |
|   | a report of a can                                    |           |                       |          | •        |        |         |                      | _        |             |           |                      |                |                      |           |                |
| No 320) as amende   |  | •         | edge and beli         | ief this | politica | I comm | ittee h | as n                 | ot viola | ted ar      | ıy provis | ions of th           | e act of J     | une 3,1              | 937 (P.L. | . 1333,        |
| Sworn to and subsc  | ribed before me this<br>day of                       |           | 20                    |          |          |        |         |                      |          |             | s         | ignature             | of Candid      | ate                  |           |                |
|   |  |           |                       |          |          | _      |         |                      |          |             |           | Printe               | ed Name        |                      |           |                |
| My Commission Exp   | Signature<br>ires                                    |           |                       |          |          |        |         |                      |          |             |           | Ema                  | iil            |                      |           | <del></del>    |
|   | МО   | D         | AY                    | YR       |          | _      |         |                      | Area     | Code        |           | D                    | aytime T       | elephor              | ne Numbe  | <br>er         |

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

| Name of Filing Committee or Candidate  | Reporting | g Period |              |                  |
|--|-----------|----------|--------------|------------------|
| FRIENDS OF FARNESE   | From:     | 4/12/201 | <u>6</u> To: | <u>5/16/2016</u> |
| 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)  |           |          | \$           | 250.00           |
| All Other Contributions (Part B)   | \$        | 4,150.00 |              |                  |
| TOTAL for the Reporting  | Period    | (2)      | \$           | 4,400.00         |
| 3. Contributions Received Over \$250.00 (From Part C and Part D)   |           |          |              |                  |
| Contributions Received From Political Committees (Part C)  |           |          | \$           | 4,500.00         |
| All Other Contributions (Part D)   |           |          | \$           | 7,850.00         |
| TOTAL for the Reporting  | Period    | (3)      | \$           | 12,350.00        |
| 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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page |           |          | \$           | 16,750.00        |

#### **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    |     |                  |
|---------------------------------------|-----------|-----------|-----|------------------|
| FRIENDS OF FARNESE                    | From:     | 4/12/2016 | То: | <u>5/16/2016</u> |
|                                       |           | DATE      |     | AMOUNT           |

| Full Na                                     | Full Name of Contributing Committee |  |                   |     |    | DAY  | YEAR |              |
|---|-------------------------------------|--|-------------------|-----|----|------|------|--------------|
| ECKERT SEAMENS PA-PAC                       |                                     |  |                   |     | МО | DAY  | YEAK |              |
| Mailing Address 50 S 16TH STREET 22ND FLOOR |                                     |  |                   |     | 4  | 18   | 2016 | \$<br>250.00 |
| City PHILADELPHIA State Zip Code (Plus 4)   |                                     |  | Zip Code (Plus 4) | ] . |    | 2010 |      |              |
| PA 19102                                    |                                     |  |                   |     |    |      |      |              |

**PAGE TOTAL** 250.00

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

### 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 Candida    | te          |                  | Rep  | orting Pe | eriod  |                 |            |                  |
|--|-------------|------------------|------|-----------|--------|-----------------|------------|------------------|
| FRIENDS OF FARNESE                     |             |                  | Fron | n:        | 4/12/2 | 2016 <b>T</b> o | <b>)</b> : | <u>5/16/2016</u> |
|  |             |                  |      |           | DATE   |                 |            | AMOUNT           |
| Full Name of Contributor               |             |                  |      | мо        | DAY    | YEAR            |            |                  |
| ELIJAH DORNSTREICH                     |             |                  |      |           | 27     |                 |            |                  |
| Mailing Address 8313 TULPEHOCKE        | N AVENUE    |                  |      |           |        |                 | \$         | 250.00           |
| City ELKINS PARK                       | State       | Zip Code (Plus 4 | )    | 4         | 13     | 2016            |            |                  |
|  | PA          | 19027            |      |           |        |                 |            |                  |
| Full Name of Contributor ANTHONY WEBER |             |                  |      |           | DAY    | YEAR            |            |                  |
| Mailing Address 242 CATHERINE S        | TREET       |                  |      |           |        |                 | \$         | 250.00           |
| City PHILADELPHIA                      | State       | Zip Code (Plus 4 | ,    | 4         | 18     | 2016            |            |                  |
|  | PA          | 19147            |      |           |        |                 |            |                  |
| Full Name of Contributor               |             |                  |      |           |        | V=45            |            |                  |
| BRETT TORGAN                           |             |                  |      | МО        | DAY    | YEAR            |            |                  |
| Mailing Address 136 HENLEY ROAD        |             |                  |      |           |        |                 | \$         | 100.00           |
| City WYNNEWOOD                         | State       | Zip Code (Plus 4 | )    | 4         | 18     | 2016            |            |                  |
|  | PA          | 19096            |      |           |        |                 |            |                  |
| Full Name of Contributor               |             |                  |      | мо        | DAY    | YEAR            |            |                  |
| RCC DESIGN GROUP LLC                   |             |                  |      | 140       | DAI    | ILAK            |            |                  |
| Mailing Address 2101 MARKET STR        | EET         |                  |      |           |        |                 | \$         | 200.00           |
| City PHILADELPHIA                      | State       | Zip Code (Plus 4 | )    | 4         | 18     | 2016            |            |                  |
|  | PA          | 19103            |      |           |        |                 |            |                  |
| Full Name of Contributor               |             |                  |      | мо        | DAY    | YEAR            |            |                  |
| KENNETH C. WELLAR III                  |             |                  |      | 1-10      | DAI    | ILAK            |            |                  |
| Mailing Address 225 S. 18TH STRE       | ET UNIT 922 |                  |      |           |        |                 | \$         | 100.00           |
| City PHILADELPHIA                      | State       | Zip Code (Plus 4 | )    | 4         | 18     | 2016            |            |                  |
|  | PA          | 19103            |      |           |        |                 |            |                  |
| Full Name of Contributor               |             |                  |      | мо        | DAY    | YEAR            |            |                  |
| ELLIS COOK                             |             |                  |      | 140       | DAI    | ILAK            |            |                  |
| Mailing Address 3333 MERIDIAN BI       | VD          |                  |      |           |        |                 | \$         | 250.00           |
| <b>City</b> WARRINGTON                 | State       | Zip Code (Plus 4 | )    | 4         | 18     | 2016            |            |                  |
|  | PA          | 18976            |      |           |        |                 |            |                  |

| Full Na | ame of Contributor          |                   |                   | мо       | DAY  | YEAR  |                  |
|---------|-----------------------------|-------------------|-------------------|----------|------|-------|------------------|
| JEFFR   | EY DEVINE                   |                   |                   |          |      |       |                  |
| Mailing | g Address 1440 MOUNT VER    | NON STREET APT 70 | )3                |          |      |       | <b>\$</b> 250.00 |
| City    | PHILADELPHIA                | State             | Zip Code (Plus 4) | 4        | 18   | 2016  |                  |
|         |                             | PA                | 19130             |          |      |       |                  |
| Full Na | ame of Contributor          |                   |                   | мо       | DAY  | YEAR  |                  |
| DANIE   | EL REISMAN                  |                   |                   |          | 571. | 12/11 |                  |
| Mailin  | g Address 49 ROBERTS AVEN   | IUE               |                   |          |      |       | <b>\$</b> 250.00 |
| City    | HADDONFIELD                 | State             | Zip Code (Plus 4) | 4        | 18   | 2016  |                  |
|         |                             | NJ                | 08033             |          |      |       |                  |
| Full Na | ame of Contributor          |                   |                   | МО       | DAY  | YEAR  |                  |
| JUSTII  | N PESIN                     |                   |                   |          | 5711 | 12/11 |                  |
| Mailin  | g Address 740 MOUNT PLEAS   | ANT ROAD          |                   | ]        |      |       | <b>\$</b> 250.00 |
| City    | BRYN MAWR                   | State             | Zip Code (Plus 4) | 4        | 18   | 2016  |                  |
|         |                             | PA                | 19010             |          |      |       |                  |
| Full Na | ame of Contributor          |                   |                   | мо       | DAY  | YEAR  |                  |
| ART K   | EEGAN                       |                   |                   |          | 571. | 12/11 |                  |
| Mailin  | g Address 218 W EUCLID AV   | ENUE              |                   |          |      |       | <b>\$</b> 250.00 |
| City    | HADDONFIELD                 | State             | Zip Code (Plus 4) | 4        | 18   | 2016  |                  |
|         |                             | NJ                | 08033             |          |      |       |                  |
| Full Na | ame of Contributor          |                   |                   | мо       | DAY  | YEAR  |                  |
| LAURI   | KAVULICH                    |                   |                   | 1.10     | DAI  | ILAK  |                  |
| Mailin  | g Address 24 E BELLS MILL F | ROAD              |                   |          |      |       | <b>\$</b> 250.00 |
| City    | PHILADELPHIA                | State             | Zip Code (Plus 4) | 4        | 18   | 2016  |                  |
|         |                             | PA                | 19118             |          |      |       |                  |
| Full Na | ame of Contributor          |                   |                   | мо       | DAY  | YEAR  |                  |
| MICHA   | AEL BRADY                   |                   |                   |          |      |       |                  |
| Mailing | g Address 116 N HIGHLAND    | ROAD              |                   |          |      |       | <b>\$</b> 100.00 |
| City    | SPRINGFIELD                 | State             | Zip Code (Plus 4) | 4        | 20   | 2016  |                  |
|         |                             | PA                | 19064             |          |      |       |                  |
| Full Na | ame of Contributor          |                   |                   | мо       | DAY  | YEAR  |                  |
| SCOT    | Γ LIPNER                    |                   |                   | 1.10     | DAI  | ILAK  |                  |
| Mailin  | g Address 1420 LOCUST STR   | EET APT 36A       |                   |          |      |       | <b>\$</b> 250.00 |
| City    | PHILADELPHIA                | State             | Zip Code (Plus 4) | 4        | 20   | 2016  |                  |
|         |                             | PA                | 19102             |          |      |       |                  |
| Full Na | ame of Contributor          |                   |                   | мо       | DAY  | YEAR  |                  |
| SCOT    | Γ SCHULTZ                   |                   |                   | 140      | DAI  | ILAK  |                  |
| Mailin  | g Address 1235 LINDEN AVE   | NUE               |                   | <u> </u> |      |       | <b>\$</b> 250.00 |
| City    | YARDLEY                     | State             | Zip Code (Plus 4) | 4        | 20   | 2016  |                  |
|         |                             | PA                | 19067             |          |      |       |                  |
| Full Na | ame of Contributor          |                   |                   | МО       | DAY  | YEAR  |                  |
| THE B   | OONSWANG LAW FIRM, LLC      |                   |                   | 1410     | DAT  | TEAR  |                  |
| Mailin  | g Address 1500 SANSOM ST    | REET #200         |                   |          |      |       | \$ 100.00        |
| City    | PHILADELPHIA                | State             | Zip Code (Plus 4) | 4        | 20   | 2016  |                  |
|         |                             | PA                | 19102             |          |      |       |                  |
|         |                             |                   |                   |          |      |       |                  |

| Full Name of Contributor       |                   |                   | мо | DAY | YEAR |                  |
|--------------------------------|-------------------|-------------------|----|-----|------|------------------|
| INSIGHT ROOFING AND SIDING, LL | <u> </u>          |                   |    |     |      |                  |
| Mailing Address PO BOX 44      |                   |                   |    |     |      | <b>\$</b> 250.00 |
| City ORELAND                   | State             | Zip Code (Plus 4) | 4  | 20  | 2016 |                  |
|                                | PA                | 19075             |    |     |      |                  |
| Full Name of Contributor       |                   |                   | МО | DAY | YEAR |                  |
| CMQ FLOOR COVERING             |                   |                   |    |     |      |                  |
| Mailing Address 2524 FORD ROA  | D                 |                   | _  |     |      | <b>\$</b> 200.00 |
| City BRISTOL                   | State             | Zip Code (Plus 4) | 4  | 20  | 2016 |                  |
|                                | PA                | 19007             |    |     |      |                  |
| Full Name of Contributor       |                   |                   | МО | DAY | YEAR |                  |
| GORDON GISS                    |                   |                   |    |     |      |                  |
| Mailing Address 1600 ARCH STR  | EET               |                   |    |     |      | <b>\$</b> 100.00 |
| City PHILADELPHIA              | State             | Zip Code (Plus 4) | 4  | 20  | 2016 |                  |
|                                | PA                | 19103             |    |     |      |                  |
| Full Name of Contributor       |                   |                   | МО | DAY | YEAR |                  |
| LION CONSTRUCTION MANAGEMEN    | ΓLLC              |                   |    |     |      |                  |
| Mailing Address 2301 WASHING   | TON AVE SUITE 111 |                   |    |     |      | <b>\$</b> 250.00 |
| City PHILADELPHIA              | State             | Zip Code (Plus 4) | 5  | 4   | 2016 |                  |
|                                | PA                | 19146             |    |     |      |                  |
| Full Name of Contributor       |                   |                   | МО | DAY | YEAR |                  |
| TED ROBB                       |                   |                   |    |     | , _, |                  |
| Mailing Address 236 S. 7TH STR | EET               |                   |    |     |      | <b>\$</b> 250.00 |
| City PHILADELPHIA              | State             | Zip Code (Plus 4) | 5  | 16  | 2016 |                  |
|                                | PA                | 19106             |    |     |      |                  |
|                                |                   |                   |    |     |      |                  |

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

**PAGE TOTAL \$** 4,150.00

#### **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     |        |      |                    |
|---------------------------------------|-----------------|----------|-----------|------------|--------|------|--------------------|
| FRIENDS OF FARNESE                    |                 |          | From:     | <u>4/1</u> | 2/2016 | То:  | <u>5/16/2016</u>   |
|                                       |                 |          |           | DA         | TE     |      | AMOUNT             |
| Full Name of Contributing Committee   |                 |          |           | МО         | DAY    | YEAR |                    |
| THE GLAXOSMITHKLINE POLITICAL ACT     | TON COMMITTEE   |          |           |            |        |      | <b>\$</b> 1,000.00 |
| Mailing Address FIVE MOORE DRIVE      |                 |          |           | 4          | 14     | 2016 |                    |
| City RESEARCH TRIANGLE PARK           | State           | Zip Code | (Plus 4)  |            |        |      |                    |
|                                       | NC              | 27709    |           |            |        |      |                    |
| Full Name of Contributing Committee   |                 |          |           | мо         | DAY    | YEAR |                    |
| PENNSYLVANIA AFL-CIO COPE             |                 |          |           |            | 27.1.  |      | <b>\$</b> 500.00   |
| Mailing Address 319 MARKET STREET     | 3RD FLOOR       |          |           | 4          | 19     | 2016 |                    |
| City HARRISBURG                       | State           | Zip Code | (Plus 4)  | ·          |        |      |                    |
|                                       | PA              | 17101    |           |            |        |      |                    |
| Full Name of Contributing Committee   | -               | -        |           | мо         | DAY    | YEAR |                    |
| INDEPENDENCE BLUE CROSS PAC           |                 |          |           | МО         | DAI    | ILAK | <b>\$</b> 500.00   |
| Mailing Address 1901 MARKET STREE     | ΞΤ              |          |           | 4          | 19     | 2016 |                    |
| City PHILADELPHIA                     | State           | Zip Code | (Plus 4)  | 7          | 13     | 2010 |                    |
|                                       | PA              | 19103    |           |            |        |      |                    |
| Full Name of Contributing Committee   | •               |          |           | мо         | DAY    | YEAR |                    |
| GREATER PHILADELPHIA ASSOCIATION      | OF REALTORS PAC |          |           | MO         | DAT    | TEAR | <b>\$</b> 1,500.00 |
| Mailing Address 1341 N. DELAWARE      | AVE #200        |          |           | 4          | 28     | 2016 | 1,500100           |
| City PHILADELPHIA                     | State           | Zip Code | (Plus 4)  | 7          | 20     | 2010 |                    |
|                                       | PA              | 19125    |           |            |        |      |                    |
| Full Name of Contributing Committee   | •               | •        |           |            |        |      |                    |
| MALADY & WOOTEN PAC                   |                 |          |           | МО         | DAY    | YEAR | \$ 500.00          |
| Mailing Address 604 NORTH THIRD S     | TREET           |          |           | 4          | 28     | 2016 | 300.00             |
| City HARRISBURG                       | State           | Zip Code | (Plus 4)  | 7          | 20     | 2010 |                    |
|                                       | PA              | 17101    |           |            |        |      |                    |
| Full Name of Contributing Committee   | !               |          |           |            |        |      |                    |
| EXELONPAC                             |                 |          |           | МО         | DAY    | YEAR | <b>\$</b> 500.00   |
| Mailing Address P.O. BOX 805379       |                 |          |           | 4          | 28     | 2016 | . 333.00           |
| City CHICAGO                          | State           | Zip Code | (Plus 4)  |            |        | 2010 |                    |
|                                       | IL              | 60680    |           |            |        |      |                    |

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

PAGE TOTAL

4,500.00

\$

### 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 Re                  |                   |                           | Repo       | Reporting Period |                   |        |               |          |              |
|---|-------------------|---------------------------|------------|------------------|-------------------|--------|---------------|----------|--------------|
| FRIENDS OF FARNESE  |                   |                           |            | Fron             | 1:                | 4/12/2 | <u>016</u> To | :        | 5/16/2016    |
|   |                   |                           |            |                  | DA                | \TE    |               | Al       | MOUNT        |
| Full Name of Contributor                                  |                   |                           |            |                  | мо                | DAY    | YEAR          |          | F00.00       |
| OBERMAYER REBMANN MAXWELL & amp                           | ; HIPPEL, LLP     |                           |            |                  | 110               | DAI    | ILAK          | \$       | 500.00       |
| <b>Mailing Address</b> ONE PENN CENTER BLVD.              | 19TH FLOOR 1617 J | OHN                       | F. KENNEI  | ΟY               | 4                 | 18     | 2016          |          |              |
| City PHILADELPHIA   | State             | Zip C                     | Code (Plus | 4)               |                   |        |               |          |              |
|   | PA                | 1910                      | 31895      |                  |                   |        |               | _        |              |
| Employer Name   |                   |                           |            |                  | Occupat           | ion    |               |          |              |
| Employer Mailing Address/Principal Plac                   | e of Business     | 0                         | City       |                  |                   | State  |               | Zip Cod  | e (Plus 4)   |
|   |                   |                           |            |                  |                   | PA     |               |          |              |
| Full Name of Contributor                                  |                   |                           |            |                  |                   | 547    | V=45          |          |              |
| ALARCON & Amp; MARRONE                                    |                   |                           |            |                  | МО                | DAY    | YEAR          | \$       | 250.00       |
| Mailing Address 2740 N. FRONT STR                         | EET FLOOR 3       |                           |            |                  | 4                 | 18     | 2016          | 1        |              |
| City PHILADELPHIA   | State             | Zip Code (Plus 4)         |            |                  | 10                | 2010   |               |          |              |
|   | PA                | 1913                      | 33         |                  | l                 |        |               |          |              |
| Employer Name   |                   |                           |            |                  | Occupat           | ion    |               |          |              |
| Employer Mailing Address/Principal Plac                   | e of Business     | 0                         | City       |                  |                   | State  |               | Zip Cod  | e (Plus 4)   |
|   |                   |                           |            |                  |                   |        |               |          |              |
| Full Name of Contributor                                  |                   |                           |            |                  |                   | DAY    | VEAD          |          |              |
| CLAUDIA BALDERSTON  |                   |                           |            |                  | МО                | DAY    | YEAR          | \$       | 1,000.00     |
| Mailing Address 235 DELANEY STRE                          | ET                |                           |            |                  | 4                 | 18     | 2016          | 1        |              |
| City PHILADELPHIA   | State             | Zip C                     | Code (Plus | 4)               | .                 | 10     | 2010          |          |              |
|   | PA                | 1910                      | 06         |                  | l                 |        |               |          |              |
| Employer Name SELF EMPLOYED                               |                   |                           |            |                  | Occupat           | ion    | DOCTOR        | R OF DEI | NTAL SURGERY |
| Employer Mailing Address/Principal Plac                   | e of Business     | (                         | City       |                  |                   | State  |               | Zip Cod  | e (Plus 4)   |
| 2016 LOCUST STREET  |                   | F                         | PHILADELP  | PHIA             |                   | PA     |               | 19103    |              |
| Full Name of Contributor                                  |                   |                           |            |                  | мо                | DAY    | YEAR          |          |              |
| ELI ROSEN   |                   |                           |            |                  | МО                | DAT    | TEAK          | \$       | 500.00       |
| Mailing Address 1001 PRINCETON A                          | VENUE             |                           |            |                  | 4                 | 18     | 2016          |          |              |
| City LAKEWOOD   | State             | Zip C                     | Code (Plus | 4)               |                   |        | 2010          |          |              |
|   | l I               | 0870                      | )1         |                  |                   |        |               |          |              |
| Employer Name GEBROE-HAMMER ASSOCIATES                    |                   | Occupation VICE PRESIDENT |            | T                |                   |        |               |          |              |
| Employer Mailing Address/Principal Place of Business City |                   | State                     |            |                  | Zip Code (Plus 4) |        |               |          |              |
| 2 W. NORTHFIELD ROAD #301 LIVINGSTON                      |                   |                           |            | NJ               |                   | 07039  |               |          |              |

| Full Name of Contributor  |  |  | мо             | DAY  | YEAR                              | \$  | 350.00                               |
|---|--|--|----------------|--|-----------------------------------|---|--------------------------------------|
| SEAN EDWARDS  |  |  |                |  |                                   |   |                                      |
| Mailing Address 618 CARPENTER ST  |  |  | 4              | 18   | 2016                              | 1   |                                      |
| City PHILADELPHIA   | State  | Zip Code (Plus 4)  |                |  |                                   |   |                                      |
|   | PA I:  | 19147  |                |  |                                   | l   |                                      |
| Employer Name RITTENHOUSE COMM  | UNICATIONS GROUP   |  | Occupat        | ion  | PRESIDI                           | ENT   |                                      |
| Employer Mailing Address/Principal Plac   | ce of Business   | City   |                | State  |                                   | Zip Code  | (Plus 4)                             |
| 1616 WALNUT STREET  |  | PHILADELPHIA   |                | PA   |                                   | 19103   |                                      |
| Full Name of Contributor  |  | · ·  |                |  |                                   |   |                                      |
|   |  |  | МО             | DAY  | YEAR                              | \$  | 250.00                               |
| AARON WEINER CONSTRUCTION   |  |  |                |  |                                   | -   |                                      |
| Mailing Address P.O. BOX 1090   |  | Zin Cada (Diva 4)  | 4              | 18   | 2016                              |   |                                      |
| City HUNTINGDON VALLEY  | 1  | Zip Code (Plus 4)  |                |  |                                   |   |                                      |
|   | I PA I :   | 19006  |                |  |                                   | ı   |                                      |
| Employer Name   |  |  | Occupat        | ion  |                                   |   |                                      |
| Employer Mailing Address/Principal Plac   | ce of Business   | City   |                | State  |                                   | Zip Code  | (Plus 4)                             |
|   |  |  |                |  |                                   |   |                                      |
| Full Name of Contributor  |  | <del></del>  |                |  |                                   |   |                                      |
| SAUL EWING, LLP   |  |  | МО             | DAY  | YEAR                              | \$  | 1,000.00                             |
|   | EST 1500 MARKET ST   | RFFT 38TH  |                |  |                                   | 1   |                                      |
| FLOOR   | 251 2500 17 11 11 12 15 15   | 111217 30111   | 4              | 28   | 2016                              |   |                                      |
| City PHILADELPHIA   | State  | Zip Code (Plus 4)  | 1              |  |                                   |   |                                      |
|   | PA   :   | 191022186  | 1              | '  | •                                 | •   |                                      |
| Employer Name   | Occupat  | ion:   |                |  |                                   |   |                                      |
| Employer Mailing Address/Principal Plac   | ce of Business   | City   | <u> </u>       | State  |                                   | Zip Code  | (Plus 4)                             |
|   |  |  |                | PA   |                                   | -   |                                      |
|   |  |  |                | IFA  |                                   |   |                                      |
| Full Name of Contributor  |  |  |                | ] PA   |                                   |   |                                      |
| Full Name of Contributor  |  |  | МО             | DAY  | YEAR                              | <b>\$</b>   | 1,000.00                             |
| MYRON BERMAN  | 111/6  |  | МО             |  | YEAR                              | \$  | 1,000.00                             |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B   |  | Ein Code (Dive 4)  | <b>MO</b> 5    |  | <b>YEAR</b> 2016                  | \$  | 1,000.00                             |
| MYRON BERMAN  | State  | Zip Code (Plus 4)  |                | DAY  |                                   | \$  | 1,000.00                             |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND   | State 2  | Zip Code (Plus 4)  | - 5            | DAY 4  |                                   | \$  | 1,000.00                             |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B   | State 2  |  |                | <b>DAY</b> 4                                 |                                   |   | 1,000.00                             |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND   | State 7<br>NY 5  |  | - 5            | <b>DAY</b> 4                                 | 2016                              |   |                                      |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN   | State 7<br>NY 5  | 10312  | - 5            | DAY 4  | 2016                              | PAL   |                                      |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place   | State 7<br>NY 5  | 10312 City   | - 5<br>Occupat | DAY  4  cion  State  NY                      | 2016<br>PRINCIF                   | AL Zip Code                                       | (Plus 4)                             |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place 370 LEXINGTON AVENUESUITE 1810  | State 7<br>NY 5  | 10312 City   | - 5            | DAY 4  | 2016                              | AL Zip Code                                       |                                      |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place 370 LEXINGTON AVENUESUITE 1810  Full Name of Contributor  GARY JONAS  | State 7<br>NY 5<br>D, LLC<br>ce of Business  | 10312 City   | Occupat        | DAY  4  ion State NY  DAY                    | 2016 PRINCIF                      | PAL Zip Code 10017                                | (Plus 4)                             |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place 370 LEXINGTON AVENUESUITE 1810  Full Name of Contributor  GARY JONAS  Mailing Address 305 JULLIAN COUR  | State 7 NY 5 D, LLC ce of Business   | 10312 City   | - 5<br>Occupat | DAY  4  cion  State  NY                      | 2016<br>PRINCIF                   | PAL Zip Code 10017                                | (Plus 4)                             |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place 370 LEXINGTON AVENUESUITE 1810  Full Name of Contributor  GARY JONAS  | State 7 NY 5 D, LLC 5 De of Business T State 7   | City NEW YORK  Zip Code (Plus 4)                         | Occupat        | DAY  4  ion State NY  DAY                    | 2016 PRINCIF                      | PAL Zip Code 10017                                | (Plus 4)                             |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place 370 LEXINGTON AVENUESUITE 1810  Full Name of Contributor  GARY JONAS  Mailing Address 305 JULLIAN COUR  City PLYMOUTH MEETING   | State 7 NY 5 D, LLC 5 See of Business  T State 7 State 7                                   | City NEW YORK  | оссиран мо 5   | DAY  4  cion State NY  DAY                   | 2016 PRINCIF YEAR 2016            | Zip Code<br>10017                                 | (Plus 4)<br>1,000.00                 |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place 370 LEXINGTON AVENUESUITE 1810  Full Name of Contributor  GARY JONAS  Mailing Address 305 JULLIAN COUR  City PLYMOUTH MEETING  Employer Name HOW PROPERTIES   | State NY D, LLC ce of Business  T State PA   | City NEW YORK  Zip Code (Plus 4)                         | Occupat        | DAY  4  State NY  DAY  16                    | 2016 PRINCIF YEAR 2016            | PAL Zip Code 10017 \$ PMENT D                     | (Plus 4)<br>1,000.00<br>IRECTOR      |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place 370 LEXINGTON AVENUESUITE 1810  Full Name of Contributor GARY JONAS  Mailing Address 305 JULLIAN COUR  City PLYMOUTH MEETING  Employer Name HOW PROPERTIES  Employer Mailing Address/Principal Place  | State NY D, LLC ce of Business  T State PA   | City NEW YORK  Zip Code (Plus 4) 19462  City             | MO 5           | DAY  4  State NY  DAY  16  State State       | 2016 PRINCIF YEAR 2016            | Zip Code 10017  \$ PMENT D Zip Code               | (Plus 4)<br>1,000.00                 |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place 370 LEXINGTON AVENUESUITE 1810  Full Name of Contributor  GARY JONAS  Mailing Address 305 JULLIAN COUR  City PLYMOUTH MEETING  Employer Name HOW PROPERTIES   | State NY D, LLC ce of Business  T State PA   | City NEW YORK  Zip Code (Plus 4)                         | MO 5           | DAY  4  State NY  DAY  16                    | 2016 PRINCIF YEAR 2016            | PAL Zip Code 10017 \$ PMENT D                     | (Plus 4)<br>1,000.00<br>IRECTOR      |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place 370 LEXINGTON AVENUESUITE 1810  Full Name of Contributor GARY JONAS  Mailing Address 305 JULLIAN COUR  City PLYMOUTH MEETING  Employer Name HOW PROPERTIES  Employer Mailing Address/Principal Place  | State NY D, LLC ce of Business  T State PA   | City NEW YORK  Zip Code (Plus 4) 19462  City             | MO 5           | DAY  4  ion State NY  DAY  16  cion State PA | 2016 PRINCIF YEAR 2016            | PMENT D Zip Code 19428                            | (Plus 4)  1,000.00  IRECTOR (Plus 4) |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place 370 LEXINGTON AVENUESUITE 1810  Full Name of Contributor  GARY JONAS  Mailing Address 305 JULLIAN COUR  City PLYMOUTH MEETING  Employer Name HOW PROPERTIES  Employer Mailing Address/Principal Place 1145 FORREST STREETSUITE 300  | State NY D, LLC ce of Business  T State PA   | City NEW YORK  Zip Code (Plus 4) 19462  City             | MO 5           | DAY  4  State NY  DAY  16  State State       | 2016 PRINCIF YEAR 2016            | Zip Code 10017  \$ PMENT D Zip Code               | (Plus 4)<br>1,000.00<br>IRECTOR      |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place 370 LEXINGTON AVENUESUITE 1810  Full Name of Contributor  GARY JONAS  Mailing Address 305 JULLIAN COUR  City PLYMOUTH MEETING  Employer Name HOW PROPERTIES  Employer Mailing Address/Principal Place 1145 FORREST STREETSUITE 300  Full Name of Contributor  | State NY  D, LLC ce of Business  T  State PA  ce of Business                               | City NEW YORK  Zip Code (Plus 4) 19462  City             | MO 5 Occupat   | DAY  4  State NY  DAY  16  State PA  DAY     | 2016  PRINCIF  YEAR  2016  DEVELO | PMENT D Zip Code 19428                            | (Plus 4)  1,000.00  IRECTOR (Plus 4) |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place 370 LEXINGTON AVENUESUITE 1810  Full Name of Contributor  GARY JONAS  Mailing Address 305 JULLIAN COUR  City PLYMOUTH MEETING  Employer Name HOW PROPERTIES  Employer Mailing Address/Principal Place 1145 FORREST STREETSUITE 300  Full Name of Contributor  DILWORTH PAXSON LLP   | State NY  D, LLC ce of Business  T  State PA  ce of Business  EET SUITE 3500E              | City NEW YORK  Zip Code (Plus 4) 19462  City             | MO 5           | DAY  4  ion State NY  DAY  16  cion State PA | 2016 PRINCIF YEAR 2016            | PMENT D Zip Code 19428                            | (Plus 4)  1,000.00  IRECTOR (Plus 4) |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place 370 LEXINGTON AVENUESUITE 1810  Full Name of Contributor  GARY JONAS  Mailing Address 305 JULLIAN COUR  City PLYMOUTH MEETING  Employer Name HOW PROPERTIES  Employer Mailing Address/Principal Place 1145 FORREST STREETSUITE 300  Full Name of Contributor  DILWORTH PAXSON LLP  Mailing Address 1500 MARKET STREETSUITE              | State NY D, LLC ce of Business  T State PA ce of Business  EET SUITE 3500E State 3         | City NEW YORK  Pip Code (Plus 4) 19462  City CONSHOHOCKE | MO 5 Occupat   | DAY  4  State NY  DAY  16  State PA  DAY     | 2016  PRINCIF  YEAR  2016  DEVELO | PMENT D Zip Code 19428                            | (Plus 4)  1,000.00  IRECTOR (Plus 4) |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place 370 LEXINGTON AVENUESUITE 1810  Full Name of Contributor  GARY JONAS  Mailing Address 305 JULLIAN COUR  City PLYMOUTH MEETING  Employer Name HOW PROPERTIES  Employer Mailing Address/Principal Place 1145 FORREST STREETSUITE 300  Full Name of Contributor  DILWORTH PAXSON LLP  Mailing Address 1500 MARKET STREE  City PHILADELPHIA | State NY D, LLC ce of Business  T State PA ce of Business  EET SUITE 3500E State 3         | City NEW YORK  Zip Code (Plus 4)  City CONSHOHOCKE       | MO 5 Occupat   | DAY  4  State NY  DAY  16  State PA  DAY  16 | 2016  PRINCIF  YEAR  2016  DEVELO | PMENT D Zip Code 19428                            | (Plus 4)  1,000.00  IRECTOR (Plus 4) |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place 370 LEXINGTON AVENUESUITE 1810  Full Name of Contributor  GARY JONAS  Mailing Address 305 JULLIAN COUR  City PLYMOUTH MEETING  Employer Name HOW PROPERTIES  Employer Mailing Address/Principal Place 1145 FORREST STREETSUITE 300  Full Name of Contributor  DILWORTH PAXSON LLP  Mailing Address 1500 MARKET STRE  City PHILADELPHIA  | State NY  D, LLC ce of Business  T  State PA  ce of Business  EET SUITE 3500E  State PA  : | City NEW YORK  Zip Code (Plus 4) 19462  City CONSHOHOCKE | MO 5 Occupat   | DAY  4  State NY  DAY  16  State PA  DAY  16 | 2016  PRINCIF  YEAR  2016  DEVELO | PMENT D Zip Code 10017  \$ PMENT D Zip Code 19428 | 1,000.00  IRECTOR (Plus 4)  1,000.00 |
| MYRON BERMAN  Mailing Address 141 ELTINGVILLE B  City STATEN ISLAND  Employer Name BP REAL ESTATE FUN  Employer Mailing Address/Principal Place 370 LEXINGTON AVENUESUITE 1810  Full Name of Contributor  GARY JONAS  Mailing Address 305 JULLIAN COUR  City PLYMOUTH MEETING  Employer Name HOW PROPERTIES  Employer Mailing Address/Principal Place 1145 FORREST STREETSUITE 300  Full Name of Contributor  DILWORTH PAXSON LLP  Mailing Address 1500 MARKET STREE  City PHILADELPHIA | State NY  D, LLC ce of Business  T  State PA  ce of Business  EET SUITE 3500E  State PA  : | City NEW YORK  Zip Code (Plus 4)  City CONSHOHOCKE       | MO 5 Occupat   | DAY  4  State NY  DAY  16  State PA  DAY  16 | 2016  PRINCIF  YEAR  2016  DEVELO | PMENT D Zip Code 19428                            | 1,000.00  IRECTOR (Plus 4)  1,000.00 |

| ne of Contributor                 |  |   | MO   | DAY  | VEAD   |   |  |  |  |
|-----------------------------------|--|---|--|--|--|---|--|--|--|
| LZER COMPANY                      |  |   | MO   | DAT  | TEAR   | <b>\$</b>   | 250.00   |  |  |
| Address 975 EASTON ROAD           | SUITE 100  |   | 1  | 20   | 2016   | 7   |  |  |  |
| WARRINGTON                        | State  | Zip Code (Plus 4)   |  | 20   | 2010   |   |  |  |  |
|                                   | PA   | 18976   |  |  |  |   |  |  |  |
| er Name                           |  |   | Occupat  | ion  |  |   |  |  |  |
| er Mailing Address/Principal Plac | e of Business  | City  |  | State  |  | Zip Code (  | Plus 4)  |  |  |
|                                   |  |   |  |  |  |   |  |  |  |
| ne of Contributor                 |  | <u> </u>  |  | •  |  |   |  |  |  |
|                                   |  |   | МО   | DAY  | YEAR   | \$  | 250.00   |  |  |
|                                   | FFT FLOOR 3  |   |  |  |  | 7   |  |  |  |
|                                   | State  | Zip Code (Plus 4)   | 4  | 18   | 2016   |   |  |  |  |
|                                   | ΡΔ   |   |  |  |  |   |  |  |  |
| er Name                           | 1171   | 1 13133   | Occupat  | ion  | <u> </u>   |   |  |  |  |
|                                   | e of Business  | City  | Госсири  | 1  |  | Zip Code (  | Plus 4)  |  |  |
|                                   | an riace of Basiness only  |   |  |  |  | p   | ,  |  |  |
| us of Combribation                |  |   |  |  |  |   |  |  |  |
|                                   |  |   | МО   | DAY  | YEAR   | \$  | 250.00   |  |  |
|                                   | CUITE 100  |   |  |  |  | -   |  |  |  |
|                                   |  | Zin Code (Plus 4)   | 4  | 20   | 2016   |   |  |  |  |
| WARRINGTON                        |  |   |  |  |  |   |  |  |  |
| N                                 | I PA   | 1 18976   |  |  | <u> </u>   | 1   |  |  |  |
|                                   | C D  | a't-  | Occupat  | T  |  | 71 01- 4  | (DI 4)   |  |  |
| er Mailing Address/Principal Plac | e of Business  | City  |  | State  |  | Zip Code (  | Plus 4)  |  |  |
|                                   |  |   |  |  |  | _   |  |  |  |
|                                   |  |   | мо   | DAY  | YEAR   | <b> </b>  | 250.00   |  |  |
|                                   |  |   |  |  |  |   |  |  |  |
|                                   | Cha ha   | Tin Code (Disc 4)   | 4  | 18   | 2016   |   |  |  |  |
| HUNTINGDON VALLEY                 |  |   |  |  |  |   |  |  |  |
|                                   | I PA   | 19006   |  |  | l  | ı   |  |  |  |
| er Name                           |  | <u> </u>  | Occupat  | 1  |  |   |  |  |  |
|                                   | e of Business  | City  |  | State  |  | Zip Code (  | Plus 4)  |  |  |
| er Mailing Address/Principal Plac |  |   |  |  |  |   |  |  |  |
| er Mailing Address/Principal Plac |  |   |  |  |  |   |  |  |  |
| er Mailing Address/Principal Plac |  | ummary Page, Sec  | ction 3.   |  |  | PAG   | E TOTAL  |  |  |
|                                   |  | ummary Page, Sec  | ction 3.   |  |  | PAG   | 7,850.00   |  |  |
|                                   | Address 975 EASTON ROAD WARRINGTON  Per Name Per Mailing Address/Principal Place Per Mamp; MARRONE Address 2740 N. FRONT STR PHILADELPHIA  Per Name Per Mailing Address/Principal Place Per Mailing Address/Principal Place Per Mailing Address 975 EASTON ROAD WARRINGTON  Per Name Per Mailing Address/Principal Place Per Mailing Address Principal Place Per Name Per N | Address 975 EASTON ROAD SUITE 100 WARRINGTON State PA  PA  PA  PA  PA  PA  PA  PA  PA  PA | Address 975 EASTON ROAD SUITE 100 WARRINGTON State 18976  PA 19133  PHILADELPHIA State 2 Zip Code (Plus 4) 19133  PA 19136  PA 19136  PA 19137  PA 19137  PA 19139  PA 19139  PA 19139  PA 18976  PA 19006  PA 19006 | Address 975 EASTON ROAD SUITE 100  WARRINGTON  State PA  18976  Occupation  The part of Contributor  PA  PA  PA  PA  PA  PA  PA  PA  PA  P | Address 975 EASTON ROAD SUITE 100 WARRINGTON State Zip Code (Plus 4) PA 18976  PO Cocupation  For Mailing Address/Principal Place of Business  City State  PHILADELPHIA State Zip Code (Plus 4) PA 19133  PHILADELPHIA State Zip Code (Plus 4) PA 19133  PAY  Cocupation  To Name  To Name  PA 19133  City State  PA 19133  Cocupation  State  PA 19133  Cocupation  City State  PA 19133  Cocupation  State  PA 19133  Cocupation  City State  PA 18976  City State  PA 18976  City State  PA 18976  Cocupation  Cocupation  State Zip Code (Plus 4) PA 18976  City State  PA 18976  City State  PA 18976  Cocupation  Cocupation  Cocupation  Cocupation  Cocupation  Cocupation  Cocupation  City State  PA 18976  Cocupation  Cocupati | Address 975 EASTON ROAD SUITE 100 WARRINGTON State PA 18976  City State City State PA 18976  Cocupation  State PA 18 2016  PA | Address 975 EASTON ROAD SUITE 100 WARRINGTON State PA 18976  City State PA 18 2016  PA 18 2016 |  |  |

## 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              |                | Report  | ing Peri | od  |      |            |
|---------------------------|---------------------------|----------------|---------|----------|-----|------|------------|
|                           |                           |                | From:   |          |     | To:  |            |
|                           |                           |                |         | D        | ATE |      | AMOUNT     |
| Full Name                 |                           |                |         | мо       | DAY | YEAR | \$<br>0.00 |
| Mailing Address           |                           |                |         |          |     |      |            |
| City                      | State                     | Zip Code (I    | Plus 4) |          |     |      |            |
| Receipt Description       | •                         | •              |         |          | •   |      |            |
| Futor Count Total of Doub | For Cabadula I Batailad   | Commence Dance | Castian | 4        |     |      | PAGE TOTAL |
| Enter Grand Total of Part | e on Schedule 1, Detailed | Summary Page,  | Section | 4.       |     |      | \$<br>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 FARNESE   | From:           | 4/12/2016 <b>To</b> : | <u>5/16/2016</u> |  |  |  |  |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR  |                 |                       |                  |  |  |  |  |
| TOTAL for the Reporting Pe   | eriod (1)       | \$                    | 0.00             |  |  |  |  |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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, | <u> </u>        | \$                    | 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 |          |      |             |           |      |
|--|-------|-------------------|------------------|----------|------|-------------|-----------|------|
| F  |       |                   | From:            |          |      | То:         |           |      |
|  |       |                   |                  | DATE     |      |             | AMOUNT    |      |
| Full Name of Contributor   |       |                   | МО               | DAY      | YEAR |             |           |      |
| Mailing Address  |       |                   |                  |          |      | <b>7</b> \$ |           | 0.00 |
| City   | State | Zip Code (Plus 4) |                  |          |      |             |           |      |
| Description of Contribution:   | -     | <b>-</b>          | •                | •        | •    |             |           |      |
|  |       |                   |                  |          |      |             |           |      |
| Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detail |       |                   | iled Sum         | mary Pag | ge,  |             | PAGE TOTA | L    |
| Section 2.   |       |                   |                  |          |      | \$          |           | 0.00 |

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

| Name of Filing Committee or Candidate   |                |     | Reporting Period |        |       |                |       |      |                  |      |
|---|----------------|-----|------------------|--------|-------|----------------|-------|------|------------------|------|
|   |                |     |                  | Fro    | m:    |                | To:   |      |                  |      |
|   |                |     |                  |        |       | DATE           |       |      | AMOUNT           | •    |
| Full Name of Contributor  |                |     |                  |        | мо    | DAY            | YEAR  |      |                  |      |
| Mailing Address   |                |     |                  |        |       |                |       | 1    | \$               | 0.00 |
| City  | State          |     | Zip Code(Plus 4) |        |       |                |       |      |                  |      |
| Employer of Contributor   |                |     |                  |        | Occup | oation         |       |      |                  |      |
| Employer Mailing Address/Principal Place of Business City   |                |     |                  | Stat   | e Zi  | p Code(Plus 4) | Descr | ipti | ion of Contribut | ion  |
| Enter Grand Total of Part G on Sch  | edule II, In-K | ind | Contributions D  | etaile | ed    |                |       |      | PAGE TO          | TAL  |
| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. |                |     |                  |        |       |                |       |      | 0.00             |      |

# SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Report | Reporting Period |     |                  |  |  |  |
|---------------------------------------|--------|------------------|-----|------------------|--|--|--|
| FRIENDS OF FARNESE                    | From   | 4/12/2016        | То: | <u>5/16/2016</u> |  |  |  |
|                                       |        | DATE             |     |                  |  |  |  |
| To Whom Paid                          |        |                  |     |                  |  |  |  |

|   |                               |                              |                  |                                   |                            | DATE              |           |          | AMOUNT    |
|---|-------------------------------|------------------------------|------------------|-----------------------------------|----------------------------|-------------------|-----------|----------|-----------|
| To Whom Paid  |                               |                              |                  |                                   |                            | DAY               | YEAR      |          |           |
| MONTGOMERY, MCCRACKEN, WALKER AND RHOADS                          |                               |                              |                  |                                   | МО                         |                   | ILAK      |          |           |
| Mailing   | g Address                     | ress 123 SOUTH BROAD STREET  |                  |                                   |                            | 14                | 2016      | \$       | 25,875.14 |
| City PHILADELPHIA State Zip Code (Plus 4)                         |                               |                              |                  | Descrip                           | tion of Exp                | enditure          |           |          |           |
| PA 19109  |                               |                              |                  |                                   | LEGAL F                    | EES               |           |          |           |
| To Wh   | om Paid                       |                              |                  |                                   | мо                         | DAY               | YEAR      |          |           |
| PEPPER HAMILTON, LLP  |                               |                              |                  |                                   |                            |                   | ILAK      |          |           |
| Mailing Address 3000 TWO LOGAN SQUARE EIGHTEENTH AND ARCH STREETS |                               |                              |                  |                                   | 4                          | 14                | 2016      | \$       | 21,447.42 |
| City  | PHILADELF                     | PHIA                         | State            | Zip Code (Plus 4)                 | Descrip                    | tion of Exp       | enditure  |          |           |
|   |                               |                              | PA               | 19103                             | LEGAL F                    | EES               |           |          |           |
| To Wh   | om Paid                       |                              |                  |                                   | мо                         | DAY               | YEAR      |          |           |
| PEPPE   | R HAMILTON                    | N, LLP                       |                  |                                   | МО                         | DA1               | ILAK      |          |           |
| Mailing   | g Address                     | 3000 TWO LOGAN S<br>STREETS  | QUARE EIGHTEENTH | AND ARCH                          | 4                          | 18                | 2016      | \$       | 6,541.50  |
| City  | PHILADELF                     | PHIA                         | State            | Zip Code (Plus 4)                 | Description of Expenditure |                   |           |          |           |
|   |                               |                              | PA               | 19103                             | LEGAL F                    | EES               |           |          |           |
| To Wh   | om Paid                       |                              |                  |                                   | мо                         | DAY               | YEAR      |          |           |
| THE S   | ALOON                         |                              |                  |                                   | PIO                        |                   | ILAK      |          |           |
| Mailing   | g Address                     | 750 S. 7TH STREET            |                  |                                   | 4                          | 19                | 2016      | \$       | 2,294.94  |
| City  | PHILADELF                     | PHIA                         | State            | Zip Code (Plus 4)                 | Descrip                    | tion of Exp       | enditure  |          |           |
|   |                               |                              | PA               | 19147                             | EVENT                      | EXPENSE           |           |          |           |
| To Wh   | om Paid                       |                              |                  |                                   | мо                         | DAY               | YEAR      |          |           |
| SAINT   | BERNARD (                     | GROUP, LLC                   |                  |                                   | МО                         | DAT               | TEAR      |          |           |
|   |                               |                              |                  |                                   |                            |                   |           | \$       | 3,000.00  |
| Mailing   | g Address                     | P.O. BOX 13260               |                  |                                   | 4                          | 21                | 2016      | <b>–</b> | 3,000.00  |
| Mailing<br>City   | g Address PHILADELF           |                              | State            | Zip Code (Plus 4)                 |                            | 21<br>tion of Exp |           | <u> </u> | 3,000.00  |
|   | _                             |                              | State<br>PA      | <b>Zip Code (Plus 4)</b><br>19104 | Descrip                    |                   | enditure  | <b>*</b> | 3,000.00  |
| City  | _                             |                              |                  |                                   | <b>Descrip</b> CONSU       | tion of Exp       | enditure  | *        | 3,000.00  |
| City<br>To Who  | PHILADELF                     | PHIA                         |                  |                                   | Descrip                    | tion of Exp       | enditure  | *        | 3,000.00  |
| City  To Who  | PHILADELF                     | PHIA                         |                  |                                   | <b>Descrip</b> CONSU       | tion of Exp       | enditure  | \$       | 4,390.42  |
| City  To Who  | PHILADELF  om Paid  BERNARD ( | GROUP, LLC<br>P.O. BOX 13260 |                  |                                   | Descrip<br>CONSUI<br>MO    | tion of Exp       | YEAR 2016 |          |           |

| 2,500.00                   |  |  |  |  |  |  |
|----------------------------|--|--|--|--|--|--|
| Description of Expenditure |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
| 700.00                     |  |  |  |  |  |  |
| Description of Expenditure |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
| 2,000.00                   |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
| 1,494.51                   |  |  |  |  |  |  |
| Description of Expenditure |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
| 4,000.00                   |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
| CONSULTING FEE             |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
| 3,500.00                   |  |  |  |  |  |  |
| 3,500.00                   |  |  |  |  |  |  |
| 3,500.00                   |  |  |  |  |  |  |
| 3,500.00                   |  |  |  |  |  |  |
| 3,500.00                   |  |  |  |  |  |  |
| 3,500.00                   |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |
| 126.46                     |  |  |  |  |  |  |
|                            |  |  |  |  |  |  |

| To Whom Paid  |   |                    | мо      | DAY         | YEAR     |            |           |
|---|---|--------------------|---------|-------------|----------|------------|-----------|
| AARON WEINER CONSTRUCTION   |   |                    |         |             | I LAK    |            |           |
| Mailing Address P.O. BOX 1090   |   |                    | 4       | 18          | 2016     | \$         | 250.00    |
| City HUNTINGDON VALLEY State Zip Code (Plus 4)                          |   |                    | Descrip | tion of Exp | enditure |            |           |
| PA 19006  |   |                    | REFUND  | OF DONA     | TION     |            |           |
| To Whom Paid  |   |                    | МО      | DAY         | YEAR     |            |           |
| THE SELZER COMPANY  |   |                    | 140     |             | ILAK     |            |           |
| Mailing Address 975 EASTON ROA  | Mailing Address 975 EASTON ROAD SUITE 100 |                    |         | 20          | 2016     | \$         | 250.00    |
| City WARRINGTON   | State                                     | Zip Code (Plus 4)  | Descrip | tion of Exp | enditure |            |           |
|   | 18976                                     | REFUND OF DONATION |         |             |          |            |           |
|   |   |                    |         |             |          | PAGE TOTAL |           |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. |   |                    |         |             |          | \$         | 78,620.39 |