

Campaign Finance Report

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

Filer Identification Number : 2006008		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF FARNESE											
Street Address:											
City: ELKINS PARK				State: PA		Zip Code: 19027					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/> No		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2016	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
SENATOR IN THE GENERAL ASSEMBLY					MO	DAY	YEAR	1	STS	DEM	51
					11	8	2016	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		10	25	2016		11	28	2016			
A. Amount Brought Forward From Last Report					\$		12,141.20				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		12,100.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		24,241.20				
D. Total Expenditures (From Schedule III)					\$		13,000.00				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		11,241.20				
F. Value Of In-Kind Contributions Received (From Schedule II)					\$		20,000.00				
G. Unpaid Debts And Obligations (From Schedule IV)					\$		0.00				

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF FARNESE	From: <u>10/25/2016</u> To: <u>11/28/2016</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)	\$ 0.00
All Other Contributions (Part B)	\$ 600.00
TOTAL for the Reporting Period (2)	\$ 600.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 7,500.00
All Other Contributions (Part D)	\$ 4,000.00
TOTAL for the Reporting Period (3)	\$ 11,500.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 12,100.00
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Name of Filing Committee or Candidate	Reporting Period From: To:
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	DATE	AMOUNT
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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

PAGE TOTAL	
\$	0.00

PART B
ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

**Use this Part to itemize all other contributions with an aggregate value from
\$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A)**

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF FARNESE	From: <u>10/25/2016</u> To: <u>11/28/2016</u>

DATE				AMOUNT
Full Name of Contributor				
DAVID DUNPHY				
Mailing Address				
City PHILADELPHIA	State	Zip Code (Plus 4)	MO	DAY
	PA	19125	11	23
				2016
				\$ 250.00
Full Name of Contributor				
MATTHEW S. PAPPAJOHN				
Mailing Address				
City PHILADELPHIA	State	Zip Code (Plus 4)	MO	DAY
	PA	19125	10	28
				2016
				\$ 250.00
Full Name of Contributor				
DANIEL MUROFF				
Mailing Address				
City PHILADELPHIA	State	Zip Code (Plus 4)	MO	DAY
	PA	19119	10	25
				2016
				\$ 100.00

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

PAGE TOTAL
\$ 600.00

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate FRIENDS OF FARNESE	Reporting Period From: <u>10/25/2016</u> To: <u>11/28/2016</u>
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				DATE	AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR
THE PENNSYLVANIA INSURANCE PAC						
Mailing Address						
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)	19103	
				11	14	2016
						\$ 500.00
Full Name of Contributing Committee				MO	DAY	YEAR
PRUDENTIAL FINANCIAL INC. STATE AND FEDERAL PAC						
Mailing Address						
City	NEWARK	State	NJ	Zip Code (Plus 4)	071023714	
				11	14	2016
						\$ 500.00
Full Name of Contributing Committee				MO	DAY	YEAR
LAWPAC						
Mailing Address						
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17102	
				11	14	2016
						\$ 1,500.00
Full Name of Contributing Committee				MO	DAY	YEAR
INT'L UNION OF OPERATING ENGINEERS LOCAL 542 POLITICAL						
Mailing Address						
City	FORT WASHINGTON	State	PA	Zip Code (Plus 4)	19034	
				11	22	2016
						\$ 5,000.00

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

PAGE TOTAL
\$ 7,500.00

PART D
ALL OTHER CONTRIBUTIONS
OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of
over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate FRIENDS OF FARNESE	Reporting Period From: <u>10/25/2016</u> To: <u>11/28/2016</u>
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				DATE			AMOUNT
Full Name of Contributor GREGORY HILL				MO	DAY	YEAR	\$ 2,500.00
Mailing Address				11	23	2016	
City HUNTINGDON VALLEY	State PA	Zip Code (Plus 4) 19006					
Employer Name JEFFREY M. BROWN ASSOCIATES, LLC				Occupation DEVELOPER			
Employer Mailing Address/Principal Place of Business			City HUNTINGDON VALLEY		State PA	Zip Code (Plus 4) 19006	
Full Name of Contributor KLEHR HARRISON HARVEY BRANZBURG, LLP				MO	DAY	YEAR	\$ 500.00
Mailing Address				11	14	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City		State AK	Zip Code (Plus 4)	
Full Name of Contributor HOWARD FISCHER				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				11	14	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19102					
Employer Name HOWARD FISCHER ASSOCIATES				Occupation OWNER			
Employer Mailing Address/Principal Place of Business			City PHILADELPHIA		State PA	Zip Code (Plus 4) 19103	

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

PAGE TOTAL
\$ 4,000.00

PART E OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Reporting Period From: To:
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			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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 Period	
FRIENDS OF FARNESE		From: <u>10/25/2016</u> To: <u>11/28/2016</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 20,000.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 20,000.00

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period From: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF FARNESE	From: <u>10/25/2016</u> To: <u>11/28/2016</u>

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$
MADELINE FARNESE				11	18	2016	
Mailing Address							
City	DREXEL HILL	State	PA	Zip Code(Plus 4)		19026	
Employer of Contributor				Occupation			
RETIRED							
Employer Mailing Address/Principal Place of Business			City	State	Zip Code(Plus 4)		Description of Contribution
							LEGAL FEES PAID ON BEHALF
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.							PAGE TOTAL
							20,000.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF FARNESE	From <u>10/25/2016</u> To: <u>11/28/2016</u>

DATE				AMOUNT		
To Whom Paid			MO	DAY	YEAR	\$ 3,000.00
SAINT BERNARD GROUP, LLC			11	17	2016	
Mailing Address			11	17	2016	\$ 10,000.00
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)	19104	
			CONSULTING FEE			
To Whom Paid			MO	DAY	YEAR	\$ 13,000.00
MONTGOMERY, MCCracken, WALKER AND RHOADS			11	21	2016	
Mailing Address			11	21	2016	\$ 13,000.00
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)	19109	
			LEGAL FEES			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 13,000.00

