

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 :		2006131		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF DUANE MILNE												
Street Address: 1052 WEST VALLEY HILL ROAD												
City: MALVERN						State: PA		Zip Code: 19355				
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	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2017	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
						MO	DAY	YEAR	REP			
						11	7	2017	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		11	28	2017		12	31	2017				
A. Amount Brought Forward From Last Report						\$ 23,489.73						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 3,500.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 26,989.73						
D. Total Expenditures (From Schedule III)						\$ 4,354.96						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 22,634.76						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 20,000.00						

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 DUANE MILNE	From: <u>11/28/2017</u> To: <u>12/31/2017</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)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 0.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 3,500.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 3,500.00

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.)	\$ 3,500.00
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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
	From: To:

DATE				AMOUNT
Full Name of Contributor	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 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 DUANE MILNE	Reporting Period From: <u>11/28/2017</u> To: <u>12/31/2017</u>
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				DATE			AMOUNT	
Full Name of Contributing Committee COMMITTEE TO ELECT BRIAN ELLIS				MO	DAY	YEAR	\$ 1,000.00	
Mailing Address 103 DEER RUN ROAD				1	1	2017		
City BUTLER	State PA	Zip Code (Plus 4) 16001						
Full Name of Contributing Committee PECO PAC				MO	DAY	YEAR	\$ 500.00	
Mailing Address 2301 MARKET STREET				11	13	2017		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103						
Full Name of Contributing Committee EADAH ENTERPRISES PAC				MO	DAY	YEAR	\$ 1,000.00	
Mailing Address 511 OLD LANCASTER ROAD STE. 8				12	19	2017		
City BERWYN	State PA	Zip Code (Plus 4) 19312						
Full Name of Contributing Committee TROOPERS ASSOCIATION PAC				MO	DAY	YEAR	\$ 1,000.00	
Mailing Address 3625 VARTAN WAY				12	21	2017		
City HARRISBURG	State PA	Zip Code (Plus 4) 17110						

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

PAGE TOTAL
\$ 3,500.00

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	Reporting Period
	From: To:

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Employer Name			Occupation	
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)

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

PAGE TOTAL
\$ 0.00

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 DUANE MILNE		From: <u>11/28/2017</u> To: <u>12/31/2017</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)	\$ 0.00
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.)			\$ 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 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
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF DUANE MILNE	From <u>11/28/2017</u> To: <u>12/31/2017</u>

DATE				AMOUNT		
To Whom Paid AREA 9 COMMITTEE			MO	DAY	YEAR	\$ 500.00
Mailing Address 142 JAFFREY ROAD			4	17	2017	
City MALVERN	State PA	Zip Code (Plus 4) 19355	Description of Expenditure EVENT SPONSORSHIP			
To Whom Paid DIGITAL CANAL DESIGN			MO	DAY	YEAR	\$ 250.00
Mailing Address 946 PORT PROVIDENCE ROAD			4	26	2017	
City PHOENIXVILLE	State PA	Zip Code (Plus 4) 19460	Description of Expenditure SERVICES RENDERED			
To Whom Paid BOY SCOUTS, TROOP 50			MO	DAY	YEAR	\$ 50.00
Mailing Address POB 663			3	15	2017	
City DEVON	State PA	Zip Code (Plus 4) 19333	Description of Expenditure PROJECT DONATION			
To Whom Paid REPUBLICAN COMMITTEE OF CHESTER COUNTY			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 15 SOUTH CHURCH STREET			5	3	2017	
City WEST CHESTER	State PA	Zip Code (Plus 4) 19380	Description of Expenditure EVENT SPONSORSHIP			
To Whom Paid ROSEMARY SILVA			MO	DAY	YEAR	\$ 220.42
Mailing Address 2733 WHITTLEBY COURT			5	6	2017	
City WEST CHESTER	State PA	Zip Code (Plus 4) 19382	Description of Expenditure EVENT SUPPORT			

To Whom Paid ANDREA KEENAN			MO	DAY	YEAR	\$ 24.16
Mailing Address 748 CHESSIE COURT			5	17	2017	
City WEST CHESTER	State PA	Zip Code (Plus 4) 19380	Description of Expenditure EVENT SUPPORT			

To Whom Paid AREA 26 COMMITTEE			MO	DAY	YEAR	\$ 500.00
Mailing Address 518 WHITFORD ROAD			8	7	2017	
City EXTON	State PA	Zip Code (Plus 4) 19341	Description of Expenditure EVENT SPONSORSHIP			

To Whom Paid CONESTOGA GIRDIRON			MO	DAY	YEAR	\$ 200.00
Mailing Address 1542 VALLEY GREENE ROAD			9	6	2017	
City PAOLI	State PA	Zip Code (Plus 4) 19301	Description of Expenditure DONATION			

To Whom Paid AREA 6 REPUBLICAN COMMITTEE			MO	DAY	YEAR	\$ 150.00
Mailing Address 1052 W VALLEY HILL ROAD			9	6	2017	
City MALVERN	State PA	Zip Code (Plus 4) 19355	Description of Expenditure EVENT SPONSORSHIP			

To Whom Paid THE FORTY NINERS CHORUS			MO	DAY	YEAR	\$ 110.00
Mailing Address POB 402			10	23	2017	
City WEST CHESTER	State PA	Zip Code (Plus 4) 19381	Description of Expenditure PROGRAM ADVERTISEMENT			

To Whom Paid REPUBLICAN COMMITTEE OF CHESTER COUNTY			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 15 SOUTH CHURCH STREET			10	31	2017	
City WEST CHESTER	State PA	Zip Code (Plus 4) 19380	Description of Expenditure EVENT SPONSORSHIP			

To Whom Paid BECKY CORBIN			MO	DAY	YEAR	
Mailing Address 180 GORDON DRIVE			12	8	2017	
City EXTON	State PA	Zip Code (Plus 4) 19341	Description of Expenditure EVENT REIMBURSEMENT			

To Whom Paid DUANE MILNE			MO	DAY	YEAR	
Mailing Address 43 STONEHENGE LANE			12	28	2017	
City MALVERN	State PA	Zip Code (Plus 4) 19355	Description of Expenditure YEAR END THANK YOU			

To Whom Paid DUANE MILNE			MO	DAY	YEAR	
Mailing Address 43 STONEHENGE LANE			12	28	2017	
City MALVERN	State PA	Zip Code (Plus 4) 19355	Description of Expenditure PROMOTIONAL ITEMS			

To Whom Paid DUANE MILNE			MO	DAY	YEAR	
Mailing Address 43 STONEHENGE LANE			12	28	2017	
City MALVERN	State PA	Zip Code (Plus 4) 19355	Description of Expenditure COPIES POSTAGE			

To Whom Paid DUANE MILNE			MO	DAY	YEAR	
Mailing Address 43 STONEHENGE LANE			12	28	2017	
City MALVERN	State PA	Zip Code (Plus 4) 19355	Description of Expenditure MEETING & MEAL			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 4,354.96

SCHEDULE IV

STATEMENT OF UNPAID DEBTS

**Use this Section to itemize all unpaid debts and obligations
which are outstanding at the end of the reporting period**

Name of Filing Committee or Candidate				Reporting Period			
FRIENDS OF DUANE MILNE				From: <u>11/28/2017</u> To: <u>12/31/2017</u>			
							Outstanding Balance of Debt
							DATE
Name of Creditor				MO	DAY	YEAR	\$ 20,000.00
DUANE MILNE				10	4	2016	
Mailing Address 43 STONEHENGE LANE				10	4	2016	\$ 20,000.00
City MALVERN		State PA		Zip Code (Plus 4) 19355		Description of Debt LOAN TO FRIENDS OF DUANE MILNE	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 20,000.00