

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 : 9800010		Report Filed By :		CANDIDATE		COMMITTEE ✓	LOBBYIST
Name of Filing Committee, Candidate or Lobbyist: FRIENDS FOR DARYL METCALFE							
Street Address: P.O. BOX 1536							
City: CRANBERRY TWP				State: PA		Zip Code: 16066	
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. X	AMENDMENT REPORT? Yes No ✓
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT? Yes No ✓
	ANNUAL REPORT	7.	Year 2018	FILING METHOD () CHECK ONE		PAPER ✓	DISKETTE
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number	Office Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY				MO	DAY	YEAR	
				11	6	2018	
				(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	MO	DAY	YEAR
		5	1	2018	6	4	2018
		TO					
A. Amount Brought Forward From Last Report				\$ 125,879.78			
B. Total Monetary Contributions And Receipts (From Schedule I)				\$ 2,325.00			
C. Total Funds Available (Sum Of Lines A and B)				\$ 128,204.78			
D. Total Expenditures (From Schedule III)				\$ 967.45			
E. Ending Cash Balance (Subtract Line D From Line C)				\$ 127,237.33			
F. Value Of In-Kind Contributions Received (From Schedule II)				\$ 0.00			
G. Unpaid Debts And Obligations (From Schedule IV)				\$ 0.00			
FOR OFFICE USE ONLY							

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 FOR DARYL METCALFE	From: <u>5/1/2018</u> To: <u>6/4/2018</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 25.00

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)	\$ 100.00
TOTAL for the Reporting Period (2)	\$ 100.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 2,200.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 2,200.00

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.)	\$ 2,325.00
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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
FRIENDS FOR DARYL METCALFE	From: <u>5/1/2018</u> To: <u>6/4/2018</u>

DATE					AMOUNT		
Full Name of Contributor R. C. KURTZROCK				MO	DAY	YEAR	\$100.00
Mailing Address244 STATE RD				5	10	2018	
CityVALENCIA	StatePA	Zip Code (Plus 4)160592222					

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

PAGE TOTAL
\$ 100.00

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 FOR DARYL METCALFE	Reporting Period From: <u>5/1/2018</u> To: <u>6/4/2018</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee CHAMBERPAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 417 WALNUT STREET				5	23	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011902					
Full Name of Contributing Committee ENERGY VOICES PAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 2200 GEORGETOWN DR STE 500				5	24	2018	
City SEWICKLEY	State PA	Zip Code (Plus 4) 15143					
Full Name of Contributing Committee FIRST ENERGY POLITICAL ACTION COMMITTEE				MO	DAY	YEAR	\$ 300.00
Mailing Address 76 S. MAIN STREET				5	14	2018	
City AKRON	State OH	Zip Code (Plus 4) 443081890					
Full Name of Contributing Committee NFG PAPAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 1100 STATE STREET				5	14	2018	
City ERIE	State PA	Zip Code (Plus 4) 16501					
Full Name of Contributing Committee PA ASSN. OF DEER FARMERS PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 200 N. THIRD STREET SUITE 1500				5	23	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					

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

PAGE TOTAL

\$ 2,200.00

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	\$ 0.00
Mailing Address							
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 FOR DARYL METCALFE		From: <u>5/1/2018</u> To: <u>6/4/2018</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 RECEIVED - 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 FOR DARYL METCALFE	From <u>5/1/2018</u> To: <u>6/4/2018</u>

DATE				AMOUNT
To Whom Paid RICK FOR CONGRESS	MO	DAY	YEAR	
Mailing Address 404 BOSTON HOLLOW ROAD	5	14	2018	\$ 500.00
City ELIZABETH	State PA	Zip Code (Plus 4) 15037	Description of Expenditure CONTRIBUTION	
To Whom Paid VERIZON	MO	DAY	YEAR	
Mailing Address P.O. BOX 25505	5	14	2018	\$ 70.87
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 18002	Description of Expenditure SMART PHONE EQUIP & SERVICE	
To Whom Paid RALLY PIRYX LLC	MO	DAY	YEAR	
Mailing Address 995 MARKET STREET 2ND FLOOR	5	24	2018	\$ 1.44
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 94103	Description of Expenditure FEE	
To Whom Paid ARMSTRONG	MO	DAY	YEAR	
Mailing Address P.O. BOX 37749	6	1	2018	\$ 76.65
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19101	Description of Expenditure INTERNET & PHONE SERVICE	
To Whom Paid BANK OF AMERICA	MO	DAY	YEAR	
Mailing Address P.O. BOX 15019	6	2	2018	\$ 318.49
City WILMINGTON	State DE	Zip Code (Plus 4) 19886	Description of Expenditure VISA PAYMENT FOR POSTAGE, FUEL, VAN INS, ENVELOPES, DINNER MEETING	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL \$ 967.45

