

# 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 VALLEY HILL RD											
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.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2018	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	6	2018	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		9	18	2018		10	22	2018			
A. Amount Brought Forward From Last Report					\$ 21,066.76						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 12,750.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 33,816.76						
D. Total Expenditures (From Schedule III)					\$ 32,994.00						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 822.76						
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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF DUANE MILNE	From: <u>9/18/2018</u> To: <u>10/22/2018</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 750.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 750.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 12,500.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 12,500.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 13,250.00
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**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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF DUANE MILNE	From: <u>9/18/2018</u> To: <u>10/22/2018</u>
<b>DATE</b>	<b>AMOUNT</b>

<b>Full Name of Contributing Committee</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
PA COMMITTEE FOR AFFORDABLE HOUSING				
<b>Mailing Address</b> 2509 FRONT STREET				
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	8 9 2018	

<b>Full Name of Contributing Committee</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
CERTIFIED PUBLIC ACCOUNTANTS PAC				
<b>Mailing Address</b> 500 N 3RD STREET				
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	9 25 2018	

<b>Full Name of Contributing Committee</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
CRISCI ASSOCIATES PAC				
<b>Mailing Address</b> 201 STATE STREET				
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	10 2 2018	

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

<b>PAGE TOTAL</b>
\$ 750.00

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
	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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF DUANE MILNE	<b>Reporting Period</b>  <b>From:</b> <u>9/18/2018</u> <b>To:</b> <u>10/22/2018</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee FUNERAL SERVICE PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 7441 ALLENTOWN BLVD				8	19	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 17112					
Full Name of Contributing Committee BIKEPAC				MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 564				9	25	2018	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055					
Full Name of Contributing Committee APSCUF/CAP-PA				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 319 N. FRONT STREET				9	25	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee FRATERNAL ORDER OF POLICE				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 2949 NORTH FRONT STREET				10	1	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110					
Full Name of Contributing Committee PSEA PACE				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 400 N THIRD STREET				9	27	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 17105					

Full Name of Contributing Committee PHHA PAC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1001 HARRAHS BLVD			9	30	2018	
City CHESTER	State PA	Zip Code (Plus 4) 19103				

Full Name of Contributing Committee PENNSYLVANIA INSURANCE PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 1600 MARKET STREET STE 1720			10	3	2018	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103				

Full Name of Contributing Committee MCNEES PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address P.O. BOX 1166			10	3	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				

Full Name of Contributing Committee CHAMBER PAC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 417 WALNUT STREET			10	9	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011902				

Full Name of Contributing Committee VERIZON COMMUNICATIONS INC GOOD GOV'T CLUB			MO	DAY	YEAR	\$ 500.00
Mailing Address 417 WALNUT STREET						
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				

Full Name of Contributing Committee COMCAST CORPORATION & NBC UNIVERSAL			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 1701 JFK BOULEVARD			10	9	2018	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103				

Full Name of Contributing Committee JOHNSON & JOHNSON PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 13501 I STREET NW SUITE 1210			10	4	2018	
City WASHINGTON	State PA	Zip Code (Plus 4) 20005				

Full Name of Contributing Committee COMMITTEE TO ELECT BRIAN ELLIS			MO	DAY	YEAR	\$ 500.00
Mailing Address 103 DEER RUN ROAD			10	11	2018	
City BUTLER	State PA	Zip Code (Plus 4) 160012873				

Full Name of Contributing Committee EXCELON PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 101 CONSTITUTION AVE NW			10	11	2018	
City WASHINGTON	State PA	Zip Code (Plus 4) 20001				

Full Name of Contributing Committee REPUBLICAN COMMITTEE OF WEST WHITELAND			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 100 TWIN OAKS LANE			10	18	2018	
City WEST CHESTER	State PA	Zip Code (Plus 4) 19380				

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

<b>PAGE TOTAL</b>
\$ 12,500.00

**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: <span style="float: right;">To:</span>

				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.

<b>PAGE TOTAL</b>
\$ 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
	<div style="display: flex; justify-content: space-between;"> <span>From:</span> <span>To:</span> </div>

			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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF DUANE MILNE		From: <u>9/18/2018</u> To: <u>10/22/2018</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)			\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)			\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							<b>PAGE TOTAL</b> \$ 0.00

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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF DUANE MILNE	From <u>9/18/2018</u> To: <u>10/22/2018</u>

DATE				AMOUNT		
To Whom Paid JAMES SKYMBA			MO	DAY	YEAR	\$ 190.00
Mailing Address 1243 KING ROAD			6	7	2018	
City MALVERN	State PA	Zip Code (Plus 4) 19355	Description of Expenditure DONATION EAST WHITELAND FIRE POLICE			
To Whom Paid CONESTOGA GRID IRON			MO	DAY	YEAR	\$ 200.00
Mailing Address 1727 INDIAN RUN ROAD			7	18	2018	
City MALVERN	State PA	Zip Code (Plus 4) 19355	Description of Expenditure BROCHURE ADVERTISEMENT			
To Whom Paid REPUBLICAN PARTY OF WEST WHITELAND			MO	DAY	YEAR	\$ 500.00
Mailing Address 100 TWIN OAKS LANE			8	22	2018	
City WEST CHESTER	State PA	Zip Code (Plus 4) 19900	Description of Expenditure DONATION			
To Whom Paid HRCC			MO	DAY	YEAR	\$ 5,000.00
Mailing Address P.O. BOX 11787			10	4	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure DONATION			
To Whom Paid HRCC			MO	DAY	YEAR	\$ 5,000.00
Mailing Address P.O. BOX 11787			10	5	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure DONATION			

To Whom Paid WEST CHESTER POST OFFICE			MO	DAY	YEAR	\$ 300.00
Mailing Address 1050 AIRPORT ROAD			10	6	2018	
City WEST CHESTER	State PA	Zip Code (Plus 4) 19380	Description of Expenditure POSTAGE STAMPS			

To Whom Paid STAPLES			MO	DAY	YEAR	\$ 20.12
Mailing Address 430 EXTON SQUARE WAY			10	9	2018	
City EXTON	State PA	Zip Code (Plus 4) 19341	Description of Expenditure STATIONARY			

To Whom Paid WEST CHESTER POST OFFICE			MO	DAY	YEAR	\$ 150.00
Mailing Address 1050 AIRPORT ROAD			10	9	2018	
City WEST CHESTER	State PA	Zip Code (Plus 4) 19380	Description of Expenditure POSTAGE STAMPS			

To Whom Paid ROBERT JONES			MO	DAY	YEAR	\$ 50.00
Mailing Address 1052 VALLEY HILL RD			10	11	2018	
City MALVERN	State PA	Zip Code (Plus 4) 19355	Description of Expenditure POSTAGE			

To Whom Paid HALLOWELL & BRASTETTER			MO	DAY	YEAR	\$ 3,336.88
Mailing Address 3031 LOGAN STREET			10	11	2018	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure BROCHURES			

To Whom Paid HALLOWELL & BRASTETTER			MO	DAY	YEAR	\$ 8,247.00
Mailing Address 3031 LOGAN STREET			10	11	2018	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure DIGITAL ADS			

<b>To Whom Paid</b> HRCC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> PO BOX 11787			10	19	2018	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Description of Expenditure</b> DONATIONS			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 32,994.00

**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**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF DUANE MILNE				<b>Reporting Period</b>  From: <u>9/18/2018</u> To: <u>10/22/2018</u>			
							<b>Outstanding Balance of Debt</b>
							<b>DATE</b>
<b>Name of Creditor</b> DUANE D. MILNE				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 29,000.00
<b>Mailing Address</b> 43 STONEHENGE LANE				10	14	2016	
<b>City</b> MALVERN	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 19355		<b>Description of Debt</b> LOAN TO FRIENDS OF DUANE MILNE		
<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>							<b>PAGE TOTAL</b>  \$ 29,000.00