

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 LAWRENCE											
Street Address:											
City: PHILADELPHIA				State: PA		Zip Code: 19110					
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. X	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				
					11	6	2018				
Summary of Receipts and Expenditures from:					MO	DAY	YEAR	FOR OFFICE USE ONLY			
					10	23	2018				TO
					11	26	2018				
A. Amount Brought Forward From Last Report					\$		21,079.28				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		13,500.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		34,579.28				
D. Total Expenditures (From Schedule III)					\$		14,086.29				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		20,492.99				
F. Value Of In-Kind Contributions Received (From Schedule II)					\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)					\$		71,386.54				

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 LAWRENCE	From: <u>10/23/2018</u> To: <u>11/26/2018</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)	\$ 13,000.00
All Other Contributions (Part D)	\$ 500.00
TOTAL for the Reporting Period (3)	\$ 13,500.00

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.)	\$ 13,500.00
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------

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.**

Name of Filing Committee or Candidate FRIENDS OF FARNESE LAWRENCE	Reporting Period From: <u>10/23/2018</u> To: <u>11/26/2018</u>
---------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------

				DATE	AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR
SHEET METAL WORKERS LOCAL UNION 19 LEAGUE FOR POLITICAL EDUCATION						
Mailing Address						
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)	191475505	
				11	2	2018
						\$ 10,000.00
Full Name of Contributing Committee				MO	DAY	YEAR
PNC PAC						
Mailing Address						
City	PITTSBURGH	State	PA	Zip Code (Plus 4)	152222707	
				10	30	2018
						\$ 2,500.00
Full Name of Contributing Committee				MO	DAY	YEAR
GGR INC PAC						
Mailing Address						
City	HARRISBURG	State	PA	Zip Code (Plus 4)	171011510	
				10	23	2018
						\$ 500.00

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

PAGE TOTAL
\$ 13,000.00

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 LAWRENCE	Reporting Period From: <u>10/23/2018</u> To: <u>11/26/2018</u>
---------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------

			DATE	AMOUNT	
Full Name of Contributor	MO	DAY	YEAR	\$	
LAWRENCE I COHEN	11	26	2018		500.00
Mailing Address					
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191473514			
Employer Name GUESTCOUNTS HOSPITALITY			Occupation RESTAURATEUR		
Employer Mailing Address/Principal Place of Business		City PHILADELPHIA	State PA	Zip Code (Plus 4) 191475501	

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

PAGE TOTAL
\$ 500.00

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:
---------------------------------------	----------------------------------------------------------------------

				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 LAWRENCE		From: <u>10/23/2018</u> To: <u>11/26/2018</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:
---------------------------------------	----------------------------------------------------------------------

			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 FARNESE LAWRENCE	From <u>10/23/2018</u> To: <u>11/26/2018</u>

				DATE	AMOUNT			
To Whom Paid				MO	DAY	YEAR	\$ 500.00	
8TH WARD DEMOCRATIC COMMITTEE				11	5	2018		
Mailing Address								
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)	191031061			Description of Expenditure
				CONTRIBUTION				
To Whom Paid				MO	DAY	YEAR	\$ 1,000.00	
BE THE CHANGE PA				10	23	2018		
Mailing Address								
City	ROYERSFORD	State	PA	Zip Code (Plus 4)	194680254			Description of Expenditure
				CONTRIBUTION				
To Whom Paid				MO	DAY	YEAR	\$ 1,139.19	
CARDMEMBER SERVICE				10	25	2018		
Mailing Address								
City	SAINT LOUIS	State	MO	Zip Code (Plus 4)	631790408			Description of Expenditure
				CREDIT CARD PAYMENT				
To Whom Paid				MO	DAY	YEAR	\$ 2,677.57	
CARDMEMBER SERVICE				11	19	2018		
Mailing Address								
City	SAINT LOUIS	State	MO	Zip Code (Plus 4)	631790408			Description of Expenditure
				CREDIT CARD PAYMENT				
To Whom Paid				MO	DAY	YEAR	\$ 325.00	
CITY & STATE PA				11	13	2018		
Mailing Address								
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)	191074223			Description of Expenditure
				AD				
To Whom Paid				MO	DAY	YEAR	\$ 2,159.76	
HON. LAWRENCE FARNESE				11	13	2018		
Mailing Address								
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)	191024217			Description of Expenditure
				LOAN REPAYMENT				

To Whom Paid FRIENDS OF LABOR			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	29	2018	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191232411	Description of Expenditure CONTRIBUTION			

To Whom Paid RITTENHOUSE POLITICAL PARTNERS			MO	DAY	YEAR	\$ 6,154.05
Mailing Address			11	19	2018	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191074544	Description of Expenditure CONSULTING FEES			

To Whom Paid SAGE PAYMENT SOLUTIONS			MO	DAY	YEAR	\$ 28.72
Mailing Address			11	2	2018	
City RESTON	State VA	Zip Code (Plus 4) 201905858	Description of Expenditure CREDIT CARD PROCESSING FEE			

To Whom Paid TD BANK, N.A.			MO	DAY	YEAR	\$ 2.00
Mailing Address			10	31	2018	
City CHERRY HILL	State NJ	Zip Code (Plus 4) 080032390	Description of Expenditure BANK FEE			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 14,086.29

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 FRIENDS OF FARNESE LAWRENCE	Reporting Period From: <u>10/23/2018</u> To: <u>11/26/2018</u>
---------------------------------------------------------------------------------	------------------------------------------------------------------------------

				DATE		Outstanding Balance of Debt		
Name of Creditor FUMO FOR SENATE				MO	DAY	YEAR	\$ 25,000.00	
Mailing Address				1	10	2017		
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		191303113		Description of Debt LOAN RECEIVED
Name of Creditor FUMO FOR SENATE				MO	DAY	YEAR	\$ 5,000.00	
Mailing Address				1	19	2017		
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		191303113		Description of Debt LOAN RECEIVED
Name of Creditor JAY COSTA FOR STATE SENATE				MO	DAY	YEAR	\$ 17,500.00	
Mailing Address				2	27	2018		
City	PITTSBURGH	State	PA	Zip Code (Plus 4)		152213757		Description of Debt LOAN RECEIVED
Name of Creditor KLEHR, HARRISON, HARVEY, BRANZBURG, LLP				MO	DAY	YEAR	\$ 16,301.35	
Mailing Address				10	25	2018		
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		191032968		Description of Debt LEGAL FEES
Name of Creditor MONTGOMERY, MCCrackEN, WALKER AND RHOADS				MO	DAY	YEAR	\$ 7,585.19	
Mailing Address				11	26	2018		
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		191091099		Description of Debt LEGAL FEES
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 71,386.54	