Campaign Finance Report

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

Filer Identificati Number :	on 2008	3205				port ed B		CANDI	OIDATE COMMITTEE V LOBBYIST				BYIST							
Name of Filing C	Committee, Candid	ate or L	obbyist:		FRII	END	S OF I	FRANK F	ARRY											
Street Address:	PO BOX 231																			
City:	LANGHORNE							State:	PA			Zip Cod	ie: 19	047						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	•				
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	' PRE	<u>-</u>	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	No				
report type)	ANNUAL REPORT	7. X	Year 2018					() CHECK ONE				PAPER		$\overline{}$	DISKE	TTE				
Name of Office S	Sought by Candida	te:	-					DATE O	F ELECTION			District Number	Office Code	Par	ty Code	Count	у			
								МО	DAY	YI	AR		10000	REP		Code				
								11		6	2018		(SEE IN	STRUCTIO	ONS FOR C	ODES)				
	Receipts and	МО	DAY	YEAR	2			МО	DAY	YI	EAR	FO	R OFFI	E USE	ONLY					
Expenditures	from:		11 27	2	018	T	0	12	,	31	2018									
A. Amount Bro	ught Forward Froi	n Last R	eport				\$			127,2	217.55									
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$		760.00											
C. Total Funds	Available (Sum Of	f Lines A	and B)				\$			127,977.55										
D. Total Expend	ditures (From Sch	edule II	I)				\$			4,254.96										
E. Ending Cash	Balance (Subtrac	t Line D	From Line C	:)			\$		123,722.59											
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sc	hedu	le II	I)	\$			3	50.00									
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)			\$				0.00			•						
				AFF	IDA	AVI	ΓSE	CTION												
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere.	If th	nis is	a Can	ididate re	eport, c	andi	date sig	ın here.								
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sch	edules	s file	ed on p	paper o	or by elect	ronic m	edium	, are to t	he best o	f my knov	wledge	and belie	ef , tru	e.			
Sworn to and subs	cribed before me this day of	5	20							5	ignature	of Perso	n Submit	ing Rep	ort		_			
	Signatu	re					-					Prin	ted Name)			-			
My Commission Ex	cpires						_					Ema	il				-			
	МО	D	AY	YR					Are	ea Cod	le	Daytim	e Teleph	one Nu	mber					
Part II- If this is	a report of a can	didate's	authorized (Comn	nitte	ee, Ca	andida	ate shall	sign he	ere.										
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowl	edge and belie	f this	poli	itical	commi	ittee has n	ot viola	ted an	y provisi	ions of the	e act of J	une 3,19	937 (P.L	1333	,			
Sworn to and subsc	ribed before me this day of		20								Si	ignature o	of Candida	ate			-			
							-					Printe	d Name				-			
My Commission Exp	Signature						-					Ema	il				-			
, commission Exp																				
	МО	D	AY	YR					Area	Code		Da	aytime T	elephon	e Numb	er				

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period								
FRIENDS OF FRANK FARRY	From:	11/27/20	<u>18</u> To:	12/31/2018					
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor									
TOTAL for the Reporting) Period	(1)	\$	10.00					
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	\$	0.00							
3. Contributions Received Over \$250.00 (From Part C and Part D)									
Contributions Received From Political Committees (Part C)			\$	500.00					
All Other Contributions (Part D)			\$	0.00					
TOTAL for the Reporting) Period	(3)	\$	500.00					
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)									
TOTAL for the Reporting) Period	(4)	\$	250.00					
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	760.00					

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.

Name of Filing Committee or Candidate			eporting Period				
		F	rom:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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			Rep	orting P	eriod					
Fr			Fro	m:		To	o:			
		'			DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4))							

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

PAGE TOTAL
0.00

500.00

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	Reporting Period						
FRIENDS OF FRANK FARRY	From:	11/27/2018	То:	12/31/2018			

DATE AMOUNT

Full Name of Contributing Committee			МО	DAY	YEAR	
COVANTA ENERGY CORPORATION PAC ACCOUNT			INC BAT	DAI		\$ 500.00
Mailing Address 445 SOUTH STREET		11	27	2018	,	
City MORRISTOWN	State	Zip Code (Plus 4)		_,		
	NJ	07960				

PAGE TOTAL nary Page, Section 3.

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

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			Rep	porting Period							
				Fror	n:			To:			
					D	ATE			Α	MOUNT	
Full Name of Contributor					МО	DAY	YEA	ıR	\$		0.00
Mailing Address											
City	State	Zip	p Code (Plus	5 4)							
Employer Name					Occupation						
Employer Mailing Address/Principal Place	ce of Business		City		•	State		7	Zip Co	de (Plus 4)
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.								PAGE TOTAL			
								\$		(0.00

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			Report	eporting Period						
FRIENDS OF FRANK FARRY	FRIENDS OF FRANK FARRY From:				11/27/201	<u>8</u> To:	12/31/2018			
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR		150.00		
LOWER BUCKS CHAMBER OF COMMERCE		MO	DAY	TEAR	\$	150.00				
Mailing Address 409 HOOD BOULEVARD					31	2018				
City FAIRLESS HILLS	State	Zip Code (Plus 4)	12						
	PA	19030								
Receipt Description RETURNED CK #	1836	•								
Full Name										
ASSUMPTION BVM				МО	DAY	YEAR	\$	100.00		
Mailing Address 1200 MEADOWBROOM	K ROAD			12	31	2018]			
City FEASTERVILLE	State	Zip Code (Plus 4)]] 31	2010				
	PA	19053								
Receipt Description RETURNED CK#	1862	•					•			

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

PAGE TOTAL										
\$	250.00									

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 FRANK FARRY	From:	<u>11/27/2018</u> To:	12/31/2018						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)									
TOTAL for the Reporting Pe	eriod (2)	\$	0.00						
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)									
TOTAL for the Reporting Pe	eriod (3)	\$	350.00						
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	350.00						

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reportin	g Period			
F			From: To:				
				DATE			AMOUNT
Full Name of Contributor				DAY	YEAR		
Mailing Address						7 \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•		•	•	•		
Enter Grand Total of Part F on	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	Reporting Period						
FRIENDS OF FRANK FARRY	From:	11/27/2018 To:	<u>12/31/2018</u>				

						DATE			AMOUNT
Full Name of Contributor FOUR LANES END, LLC					мо	DAY	YEAR	_	252.00
Mailing Address 106 MAPLE AVE				12		1	2018	\$	350.00
City LANGHORNE	State		Zip Code(Plus 4)						
	PA		19047						
Employer of Contributor N/A Occupation N/A						/A			
Employer Mailing Address/Princip	oal Place of Business	Cit	Э	State	e Zip	Zip Code(Plus 4)		Description of Contribution	
N/A									
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed							PAGE TOTAL		
Summary Page, Section 3.									350.00
							1		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
FRIENDS OF FRANK FARRY	From	11/27/2018	То:	12/31/2018			

							AMOUNT		
To Whom Paid			мо	DAY	YEAR				
DAVID SANDER			110						
Mailing Address 435 HULMEVILLE AVE			11	30	2018	\$	250.00		
City PENNDEL	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	19047	SERVICES						
To Whom Paid			мо	DAY	YEAR				
FIRESIDE INN			140		ILAK				
Mailing Address 237 ELMWOOD AVE				2	2018	\$	156.85		
City FEASTERVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	DINING								
To Whom Paid			мо	DAY	YEAR				
MIDDLETOWN COUNTRY CLU	В		MO	DAT	TEAR				
Mailing Address 420 N. BELLEVUE AVE				2	2018	\$	27.50		
City LANGHORNE	State	Zip Code (Plus 4)	Description of Expenditure						
	19047	DINING							
To Whom Paid			МО	DAY	YEAR				
MIDTOWN TAVERN			МО	DAT	TEAK				
Mailing Address 1102 N. 2ND STREET			12	2	2018	\$	39.00		
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure						
	17102	DINING							
To Whom Paid			МО	DAY	YEAR				
MCGRATH'S PUB			МО	DAT	TEAK				
Mailing Address 202 LOCUST STREET			12	2	2018	\$	39.00		
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>			
	PA	17101	DINING						
To Whom Paid			MC	DAY	VEAD				
LAS MARGARITAS			МО	DAY	YEAR				
Mailing Address 765 2ND S	STREET PIKE		12	2	2018	\$	61.98		
City SOUTHAMPTON	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure				
	PA	18966	DINING						
			1======						

								PAGE	12		
To Whom Paid					DAY	YEAR					
FAST SIGNS					27.1.						
Mailing Address 2901 BRUNSWICK PIKE				12	2	2018	\$		3,012.16		
City LAWRENCEVILLE		State	Zip Code (Plus 4)	Descript	ion of Exp	enditure					
		NJ	08648	SIGNS							
To Whom Paid					DAY	YEAR					
FACEBOOK											
Mailing Address 1 HACKER WAY					2	2018	\$		28.75		
City MENLO PARK		State	Zip Code (Plus 4)	Descript	ion of Exp	enditure					
CA 94025					MEDIA						
To Whom Paid					DAY	YEAR					
IRISH ROVER STATIONHOUSE											
Mailing Address 10	lailing Address 1033 S. BELLEVUE AVE				2	2018	\$		66.22		
City LANGHORNE		State	Zip Code (Plus 4)	Descript	ion of Exp	enditure					
PA 19047					DINING						
To Whom Paid				МО	DAY	YEAR					
OLD NESHAMINY INN											
Mailing Address 15	558 E. MAPLE AVE			12	2	2018	\$		413.24		
City LANGHORNE		State	Zip Code (Plus 4)	Description of Expenditure							
		PA	19047	CATERING							
To Whom Paid					DAY	YEAR					
BUCK HOTEL				МО	27.1.						
	Mailing Address 1200 BUCK ROAD										
Mailing Address 12	200 BUCK ROAD			12	2	2018	\$		60.26		
Mailing Address 12 City FEASTERVILLI		State	Zip Code (Plus 4)	-	2 tion of Exp		\$		60.26		
		State PA	Zip Code (Plus 4) 19053	-	ion of Exp		\$		60.26		
				Descript DINING	ion of Exp	enditure	\$		60.26		
City FEASTERVILLI	E	PA		Descript	ion of Exp		\$		60.26		
City FEASTERVILLI To Whom Paid UPPER SOUTHAMPTO	E	PA DMMITTEE		Descript DINING	ion of Exp	enditure	\$				
City FEASTERVILLI To Whom Paid UPPER SOUTHAMPTO	N REPUBLICAN CO	PA DMMITTEE		Descript DINING MO 12	DAY	YEAR 2018			100.00		
City FEASTERVILLI To Whom Paid UPPER SOUTHAMPTO Mailing Address 80	N REPUBLICAN CO	PA DMMITTEE DR	19053	Description DINING MO 12 Description	DAY	YEAR 2018					
City FEASTERVILLI To Whom Paid UPPER SOUTHAMPTO Mailing Address 80	N REPUBLICAN CO DO WILLOWPENN D	PA DMMITTEE DR State PA	19053 Zip Code (Plus 4) 18966	Descript DINING MO 12 Descript CONTRI	DAY 4 tion of Exp	YEAR 2018		PAGE			