### **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	DATE		СОМ	1ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		FRI	IEND	S OF I	FRANK F	ARRY								
Street Address:	PO BOX 231																
City:	LANGHORNE							State:	PA			Zip Cod	<b>ie:</b> 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	≣-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	•	
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2018					IG METHO				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	Sought by Candida	te:	-					DATE O	F ELE	СТІС	N	District Number	District Office Party Code Coo				
								мо	DAY	YI	AR		10000	REP			
								11		6	2018		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY	YEAR	R			МО	DAY	YI	EAR	FO	R OFFI	E USE	ONLY		
Expenditures	s from:		11 27	2	018	3 <b>T</b>	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 O	f Lines A	and B)				\$			127,9	977.55						
D. Total Expend	ditures (From Sch	edule II	I)				\$			4,2	254.96						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C	C)			\$		1	L23,7	22.59						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sc	hedu	le I	Ί)	\$			3	50.00						
G. Unpaid Debt	s And Obligations	(From 9	Schedule IV	)			\$				0.00			•			
				AFF	ID	AVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	nere.	If th	his is	a Can	didate re	eport, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	attached sch	edules	s file	ed on	paper (	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 thi day of	5	20							S	Signature	of Perso	n Submit	ting 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, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende		ny knowl	edge and belie	ef this	poli	itical	commi	ittee has n	ot viola	ted an	y provis	ons of the act of June 3,1937 (P.L. 133					
Sworn to and subsc	ribed before me this										S	ignature o	of Candida	ate			-
	day of						-					Printe	d Name				-
My Commission F	Signature						-					Ema	il				-
My Commission Exp							_										
	МО	D	AY	YR	1		-		Area	Code		Da	aytime T	elephon	e Numb	er	

## SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF FRANK FARRY	From:	11/27/201	<u>.8</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	Period	(2)	\$	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 an 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

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

**PAGE TOTAL**\$ 0.00

### 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 o	r Candidate		Rep Fro	oorting P	eriod	To	o:	
			l		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

#### **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 P	eriod		
FRIENDS OF FRANK FARRY	From:	11/27/2018	То:	12/31/2018

DATE AMOUNT

Full Name of Contributing Committee  COVANTA ENERGY CORPORATION PAC A	ACCOUNT		МО	DAY	YEAR	
Mailing Address 445 SOUTH STREET						<b>\$</b> 500.00
City MORRISTOWN	<b>State</b> NJ	<b>Zip Code (Plus 4)</b> 07960	11	27	2018	

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

**PAGE TOTAL \$** 500.00

### 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	orting Pe	riod				
			Fron	n:		То	:		
				D/	ATE		А	MOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	C	0.00
City	State	Zip Code (Plus	s 4)						
Employer Name				Occupat	ion				
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.				PAGE TOTAL	
						_	•	0.00	0

### 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	ing Perio	od		
FRIENDS OF FRANK FARRY			From:		11/27/201	<u>8</u> To:	12/31/2018
				D	ATE		AMOUNT
Full Name  LOWER BUCKS CHAMBER OF COMMERC	CE			МО	DAY	YEAR	
Mailing Address 409 HOOD BOULEVA	ARD			1.0	24	2010	<b>\$</b> 150.00
City FAIRLESS HILLS	<b>State</b> PA	<b>Zip Code (</b> 19030	Plus 4)	12	31	2018	
Receipt Description RETURNED CK	#1836						
Full Name ASSUMPTION BVM				МО	DAY	YEAR	
Mailing Address 1200 MEADOWBRO	OK ROAD			12	24	2010	\$ 100.00
<b>City</b> FEASTERVILLE	<b>State</b> PA	<b>Zip Code (</b> 19053	Plus 4)	12	31	2018	
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 Per	iod	
FRIENDS OF FRANK FARRY	From:	<u>11/27/2018</u> <b>To:</b>	12/31/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T 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 Candidat	e		Reporting	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	edule II, In-Kin	d Contributions Deta	iled Sum	mary Pac	ie, F		PAGE TOTAL
Section 2.	, , , , , , , , , , , , , , , , , , , ,			,		\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate			Rep	orting P	eriod		
FRIENDS OF FRANK FARRY			Fror	n:	11/27/20:	<u>18</u> To:	12/31/2018
					DATE		AMOUNT
Full Name of Contributor FOUR LANES END, LLC				мо	DAY	YEAR	
Mailing Address 106 MAPLE AVE						2010	\$ 350.00
City LANGHORNE	State	Zip Code(Plus 4)		12	1	2018	
	PA	19047					

Employer of Contributor N/A

Employer Mailing Address/Principal Place of Business
N/A

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
350.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate		Reporti	ng Period			
FRIENDS OF FRANK FARRY			From	11/2	7/2018	То:	12/31/2018
				DATE			AMOUNT
<b>To Whom Paid</b> DAVID SANDER			мо	DAY	YEAR		
Mailing Address 435 HULME	VILLE AVE		11	30	2018	\$	250.00
City PENNDEL State Zip Code (Plus 4) PA 19047			<b>Descrip</b> SERVIO	otion of Exp	penditure		
To Whom Paid FIRESIDE INN			мо	DAY	YEAR		
Mailing Address 237 ELMWOOD AVE			12	2	2018	\$	156.85
City FEASTERVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19053	<b>Descrip</b>	otion of Exp	penditure		
To Whom Paid MIDDLETOWN COUNTRY CLUB		·	мо	DAY	YEAR		
Mailing Address 420 N. BEL	LEVUE AVE		12	2	2018	\$	27.50
City LANGHORNE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19047	<b>Descrip</b>	otion of Exp	penditure		
<b>To Whom Paid</b> MIDTOWN TAVERN			МО	DAY	YEAR		
Mailing Address 1102 N. 2N	ailing Address 1102 N. 2ND STREET			2	2018	\$	39.00
City HARRISBURG  State  PA  17102			<b>Descrip</b>	otion of Exp	enditure		

Mailing Address 1102 N. 2ND STREET			12	2	2018	\$	39.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17102	Description of Expenditure DINING				
To Whom Paid MCGRATH'S PUB			МО	DAY	YEAR		
Mailing Address 202 LOCUST STREET			12	2	2018	\$	39.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	Description of Expenditure DINING				

To Whom Paid   Racker Mark Card Table   Mail or Mai							PA	JE 12	
State   PA				МО	DAY	YEAR			
To Whom Paid	Mailing Address 765 2ND STREET PIKE			12	2	2018	\$	61.98	
Mailing   Address   2901 BRUNSWICK   PIKE     12   2   2018   3,012.16	City SOUTHAMPTON								
City   LAWRENCEVILLE   State   N   N   08648   Description of Expenditure   SIGNS				МО	DAY	YEAR			
N3	Mailing Address 2901 BRUNSWICK PIKE			12	2	2018	\$	3,012.16	
Mailing   Address   1   HACKER WAY   12   2   2018   \$   28.75	City LAWRENCEVILLE								
State   CA   PARK   CA   PARK   CA   PARK   CA   PARK				МО	DAY	YEAR			
TO Whom Paid   CA   94025   MEDIA	Mailing Address 1 HACKER W	AY		12	2	2018	\$	28.75	
Mo	City MENLO PARK								
City LANGHORNE State PA State 19047 Description of Expenditure DINING  To Whom Paid OLD NESHAMINY INN  Mailing Address 1558 E. MAPLE AVE PA 2ip Code (Plus 4) 19047  To Whom Paid OLD NESHAMINY INN  Mo DAY YEAR  LANGHORNE State PA 2ip Code (Plus 4) 19047  To Whom Paid BUCK HOTEL  Mo DAY YEAR  At 13.24  To Whom Paid BUCK HOTEL  Mo DAY YEAR  Langhorne CATERING  To Whom Paid BUCK HOTEL  Mo DAY YEAR  Address 1200 BUCK ROAD  State PA 2ip Code (Plus 4) 19047  Langhorne PA 2ip Code (Plus 4) 19047  Description of Expenditure  City FEASTERVILLE  State Zip Code (Plus 4) Description of Expenditure				МО	DAY	YEAR			
To Whom Paid OLD NESHAMINY INN  Mailing Address 1558 E. MAPLE AVE  City LANGHORNE  State PA 19047  To Whom Paid BUCK HOTEL  Mo DAY YEAR  12 2 2018 \$ 413.24  PA 219047  Description of Expenditure CATERING  To Whom Paid BUCK HOTEL  Mo DAY YEAR  12 2 2018 \$ 60.26  PA 219047  Description of Expenditure CATERING	Mailing Address 1033 S. BELLEVUE AVE			12	2	2018	\$	66.22	
OLD NESHAMINY INN  Mo DAY YEAR  Mailing Address 1558 E. MAPLE AVE  12 2 2018 \$ 413.24  City LANGHORNE State PA 19047 CATERING  To Whom Paid BUCK HOTEL  Mo DAY YEAR  Mo DAY YEAR  Mo DAY YEAR  City FEASTERVILLE State 2 2018 \$ 60.26	City LANGHORNE								
City LANGHORNE State PA 19047 CATERING  To Whom Paid BUCK HOTEL  Mailing Address 1200 BUCK ROAD  State PA 2ip Code (Plus 4) Description of Expenditure  Catering Pa 2 2018 \$ 60.26  City FEASTERVILLE  State Zip Code (Plus 4) Description of Expenditure				МО	DAY	YEAR			
To Whom Paid BUCK HOTEL  Mailing Address 1200 BUCK ROAD  State   Zip Code (Plus 4)   Description of Expenditure    Description of Expenditure    CATERING    MO DAY   YEAR    FEASTERVILLE   State   Zip Code (Plus 4)   Description of Expenditure    Description of Expenditure	Mailing Address 1558 E. MAP	LE AVE		12	2	2018	\$	413.24	
BUCK HOTEL  Mo DAY YEAR  Mailing Address 1200 BUCK ROAD  12 2 2018 \$ 60.26  City FEASTERVILLE  State Zip Code (Plus 4) Description of Expenditure	City LANGHORNE								
City FEASTERVILLE State Zip Code (Plus 4) Description of Expenditure				МО	DAY	YEAR			
PEASTERVILLE Description of Expenditure	Mailing Address 1200 BUCK ROAD			12	2	2018	\$	60.26	
	City FEASTERVILLE					penditure			

To Whom Paid UPPER SOUTHAMPTON REPUBLICAN COMMITTEE			мо	DAY	YEAR	
Mailing Address 800 WILLOWPENN DR			12	4	2018	\$ 100.00
City SOUTHAMPTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18966	1	otion of Exp IBUTION	enditure	
Enter Grand Total of Expend	itures on Page 1, Re	port Cover Page, Item D				\$ <b>PAGE TOTAL</b> 4,254.96