Campaign Finance Report

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

														_	_	_		
Filer Identificat Number :	ion 2	20150	221			Repo Filed		:	CANDI	DATE		СОМИ	MITTEE	✓	LOB	BYIST		
Name of Filing	Committee, Ca	ndidat	te or Lo	obbyist:		FRIEN	DS	OF /	AARON E	BERNST	INE							
Street Address:	C/O THOM	ባAS R	. HILE	MAN, SR.,	1910	COCHR	RAN	RD.	, STE 99	90								
City:	PITTSBUR	GH							State:	PA			Zip Co	de: 15	220-1	.222		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		D DA RIMA		POST-	3. X		AMENDM REPORT		Yes	√ N	0	
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND FRIDA ELECTION	Y PRI	<u>-</u> 5.) da Lect		POST-	6.		TERMIN/ REPORT		Yes	N		\checkmark
report type)	ANNUAL REP	ORT 7	7.	Year 2018					IG METHO				PAPER		\checkmark	DISK	ETTE	
Name of Office	Sought by Can	didate	:				•		DATE O	F ELE	СТІС	N	District Number	Office Code	Pa	ty Code	Cou Cod	
									мо	DAY	YI	AR			RE	>		
					_	_			11		6	2018		(SEE INS	STRUCTI	ONS FOR	CODES	5)
Summary of Expenditures	Receipts an s from:	d	мо	DAY	YEAF		тл		мо	DAY	_	EAR		OR OFFIC	E USE	ONLY	,	
-			<u> </u>	5 1	. 2	018	то		6		4	2018						
	ought Forward			•	n Sche	dule T)	+	\$				775.45						
	-						<u></u>	\$										
C. Total Funds Available (Sum Of Lines A and B)\$ 15,950.D. Total Expenditures (From Schedule III)\$ 11,684.							-											
-	•		Ψ															
	-Kind Contribut				-	le II)	+	<u>\$</u> \$				96.00						
G. Unpaid Deb	ts And Obligat	ions (From S	chedule I\	/)	-		<u>ب</u> \$				260.42	-					
					AFF	IDAV	'IT		CTION				1					
PART I - If this i	is a Committee	repor	rt, trea	surer sign						eport, c	andi	date sig	gn here.					
I swear (or affirm correct and comp		:, inclue	ding the	attached so	hedule	s filed oı	n pa	per o	or by elect	ronic m	edium	, are to i	the best o	f my knov	vledge	and be	lief , tı	rue
Sworn to and sub	scribed before m day of	e this		20							9	Signature	e of Perso	n Submitt	ing Re	port		-
	Sig	Inature					_						Prin	ted Name				-
My Commission E	xpires												Ema	il				_
	МО		DA	AY	YR					Are	ea Coo	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candi	date's a	authorized	Com	nittee,	Can	dida	ate shall	sign he	ere.							
I swear (or affirm No 320) as amend		t of my	/ knowle	edge and bel	ief this	politica	il co	ommi	ttee has n	ot viola	ted an	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subs	cribed before me day of	this		20								S	ignature o	of Candida	ite			-
													Printe	d Name				-
My Commission Ex	Signat	ture											Ema	il				-
	мо	,	DA	AY	YR	1				Area	Code		D	aytime Te	elepho	ne Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** FRIENDS OF AARON BERNSTINE From: <u>5/1/2018</u> **To:** 6/4/2018 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 75.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 500.00 **Contributions Received From Political Committees (Part A)** 100.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 600.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 2,500.00 1,000.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 3,500.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 4,175.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Can	didate		Rep	porting	Period			
FRIENDS OF AARON BERNSTINE	1		Fro	om:	<u>5/1/20</u>) <u>18</u> To	:	<u>6/4/2018</u>
					DATE			AMOUNT
Full Name of Contributing Committe HAPAC-STATE	e			мо	DAY	YEAR		
Mailing Address 30 NORTH 31	RD ST. STE 600			_			\$	250.00
City HARRISBURG	State	Zip Code (Plus	4)	5	16	2018		
	PA	17105						
Full Name of Contributing Committee PAW-PAC	e			мо	DAY	YEAR		
Mailing Address 800 W HERS	HEYPARK DR.						\$	250.00
City HERSHEY	State	Zip Code (Plus	4)	5	7	2018		
	PA	17033						
								PAGE TOTAL
Enter Grand Total of Part A on S	Schedule I, Deta	iled Summary Page, S	ectio	n 2.			\$	500.00

500.00

Use this Part to ite	\$ emize all 0 0.01 to \$	50.01 other 250.0	00 in the repo	s wi	ith an 1g peri	aggreg od.			rom
Name of Filing Committee or Candidat	e			Rep	orting Pe	eriod			
FRIENDS OF AARON BERNSTINE					m:	<u>5/1/</u> 2	<u>2018</u> To):	<u>6/4/2018</u>
						DATE			AMOUNT
Full Name of Contributor RAYMOND J. WIMPLE					мо	DAY	YEAR		
Mailing Address 617 MORNINGSTAF	R DR.							\$	100.00
City ELLWOOD CITY	State		Zip Code (Plus 4)		5	7	2018		
	PA		16117						
									PAGE TOTAL
Enter Grand Total of Part A on S	Schedule I,	Detaile	ed Summary Pag	e, Se	ection 2			\$	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			Reporting	eporting Period				
FRIENDS OF AARON BERNSTINE			From:	<u>5/</u>	1/2018	То:		<u>6/4/2018</u>
				DA	TE		Å	MOUNT
Full Name of Contributing Committee FRIENDS OF MARK MUSTIO				мо	DAY	YEAR		
Mailing Address PO BOX 1021							\$	1,000.00
City MOON TOWNSHIP	State PA	Zip Code 15108	e (Plus 4)	5	20	2018	3	
Full Name of Contributing Committee FRIENDS OF DAVE REED				мо	DAY	YEAR		
Mailing Address PO BOX 1440							\$	1,000.00
City INDIANA	State PA	Zip Code 15701	e (Plus 4)	5	21	2018	3	
Full Name of Contributing Committee LAWRENCE COUNTY REPUBLICAN COM	MITTEE	-		мо	DAY	YEAR		
Mailing Address 3015 WILMINGTON	RD.						\$	500.00
City NEW CASTLE	State PA	Zip Code 16105	e (Plus 4)	5	8	2018	3	
								PAGE TOTAL
Enter Grand Total of Part C on Schee	lule I, Detailed Sum	nmary Pa	age, Sectio	n 3.			\$	2,500.00

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			Repo	orting Pe	riod			
FRIENDS OF AARON BERNSTINE			Fron	n:	<u>5/1/2</u>	<u>018</u> То	o: <u>6/4/2018</u>	
				DA	TE		AMOUNT	
Full Name of Contributor DAVID E. BARENSFELD				мо	DAY	YEAR		
Mailing 257 PETRIE RD. Address				_	_		\$ 1,000.00	
City NEW BRIGHTON	State PA	Zip Code (Plus	; 4)	5	7	2018		
Employer Name ELLWOOD GROUP				Occupation PRESIDENT				
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code (Plus 4)	
600 COMMERCIAL AVE.		ELLWOO	D CITY		PA		16117	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Sectio	on 3.		5	PAGE TOTAL 1,000.00	

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			Report	ing Perio	d			
			From:			То:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR		
Mailing Address							\$ i	0.00
City	State	Zip Code (Plus 4)					
Receipt Description		1				1		
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4			PAGE TO	ΓAL
		iiai y i uge,	Section				\$	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 AARON BERNSTINE	From:	<u>5/1/2018</u> то:	<u>6/4/2018</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſ F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	2,496.00
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, 1		\$	2,496.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting Period					
			From:			То:		
				DATE		АМО	UNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)	,					
Description of Contribution:								
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

PAGE 10

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting P	eriod			
FRIENDS OF AARON BERNSTINE					Fro	om:	<u>5/1/20</u>	<u>18</u> To:	<u>6/4/2018</u>	
							DATE		AM	IOUNT
Full Name of Contributor HOUSE REPUBLICAN CAMPAIGN COMM	IITTEE					мо	DAY	YEAR		
Mailing Address 500 N 3RD ST. #4 City HADDISBUDG State Zip Code(Plus 4)						_		2010	\$	2,496.00
City HARRISBURG	State PA		Zip Code(Plus 4) 17101			5	25	2018		
Employer of Contributor N/A						Occupation PAC				
Employer Mailing Address/Principal Plac Business	e of	City		State		Zip 4)	Code(Plus	Descri	otion of Con	tribution
N/A								STAMP MAILIN	s for futi Igs	JRE
Enter Grand Total of Part G on Sch	edule II, In	n-Kind	Contributi	ons De	taile	ed			PA	GE TOTAL
Summary Page, Section 3.	·									2,496.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period				
FRIENDS OF AARON BERNSTINE			From	<u>5/</u>	<u>1/2018</u>	То:	<u>6/4/2018</u>	
				DATE			AMOUNT	
To Whom Paid MAILCHIMP			мо	DAY	YEAR			
Mailing Address 675 PONCE DE LEO	N AVE NE		6	2	2018	\$	173.15	
City ATLANTA	State GA	Zip Code (Plus 4) 30308		ntion of Exp JNICATION		3		
To Whom Paid COLDSPARK MEDIA			мо	DAY	YEAR			
Mailing Address 307 FOURTH AVE. S	TE 920		5	2	2018	\$	2,742.17	
City PITTSBURGH State Zip Code (Plus 4) PA 15222			-	ition of Exp IGN MATE		1		
To Whom Paid RAISE THE MONEY			мо	DAY	YEAR			
Mailing Address PO BOX 26466			5	14	2018	\$	1.47	
City LITTLE ROCK	State AR	Zip Code (Plus 4) 72221	Description of Expenditure FEE					
To Whom Paid STAPLES		<u>.</u>	мо	DAY	YEAR			
Mailing Address 1675 STATE ROUTE	228		5	7	2018	\$	420.12	
City CRANBERRY TWP.	State PA	Zip Code (Plus 4) 16066	-	tion of Exp IGN MATE		5		
To Whom Paid FACEBOOK			мо	DAY	YEAR			
Mailing Address 1 HACKER WAY			5	31	2018	\$	249.17	
City MENLO PARK	State CA	Zip Code (Plus 4) 94025		Description of Expenditure ADVERTISING				

							PAGE	12
To Whom Paid BEAVER VALLEY L	ODGE #4 FOP			мо	DAY	YEAR		
Mailing Address	PO BOX 111			5	18	2018	\$	300.00
City MONACA		State PA	Zip Code (Plus 4) 15061		ition of Exp	penditure		
To Whom Paid AARON BERNSTIN	IE			мо	DAY	YEAR		
Mailing Address	254 STATE ROUTE	168		5	18	2018	\$	7,000.00
City NEW GALI	LEE	State PA	Zip Code (Plus 4) 16141		tion of Exp EIMBURSE			
To Whom Paid AMAZON				мо	DAY	YEAR		
Mailing Address	410 TERRY AVE. N.			5	11	2018	\$	237.89
City SEATTLE		State WA	Zip Code (Plus 4) 98109		tion of Exp			
To Whom Paid GIANT EAGLE				мо	DAY	YEAR		
Mailing Address	2650 CONSTITUTIO	ON BLVD.		5	7	2018	\$	87.45
City BEAVER F	ALLS	State PA	Zip Code (Plus 4) 15010		tion of Exp			
To Whom Paid SUBWAY		-		мо	DAY	YEAR		
Mailing Address	325 SUB WAY			5	16	2018	\$	375.99
City MILFORD		State CT	Zip Code (Plus 4) 06461	-	tion of Exp			
To Whom Paid PIZZA JOE'S				мо	DAY	YEAR		
Mailing Address	Mailing Address 275 COMMERCE AVE.					2018	\$	75.67
City NEW CAST	ΓLE	State PA	Zip Code (Plus 4) 16101		tion of Exp			

	om Paid PIZZA DEN	мо	DAY	YEAR				
Mailing	Address 662 CENTRE	/ILLE PIKE		5	16	2018	\$	21.19
City SLIPPERY ROCK State Zip Code (Plus 4) Description of Expenditu PA 16057 VOLUNTEER SUPPLIES							•	
								PAGE TOTAL
Enter	Grand Total of Expendit	tures on Page 1, Re	port Cover Page, Item D.	•			\$	11,684.27

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			Reporting Period					
FRIENDS OF AARON BERNSTINE			From:	<u>5/1/2018</u> To:				<u>6/4/2018</u>
					DATE			Outstanding Balance of Debt
Name of Creditor AARON BERNSTINE				мо	DAY	YEAR		
Mailing Address 254 STATE ROUTE 168				5	16	2018	\$	22,260.42
City NEW GALILEE	State	Zip Code (Pl	us 4)	Description of Debt				
	PA	16141	16141		UNREIMBURSED EXPENSE			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.								PAGE TOTAL
							\$	22,260.42
Mailing Address 254 STATE ROUTE 168 City NEW GALILEE State Zip Code (Plus 4) PA 16141				Description of Debt UNREIMBURSED EXPENSES PAGE TOTAL				