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 9500)237				port ed B		CAND	ANDIDATE COMMITTEE V LOBBYIST							
Name of Filing C	Committee, Candid	late or L	obbyist:		BAR	RRAF	R, STE	PHEN F	RIENDS	OF			-			
Street Address:	1620 BALTIM	ORE PIK	(E,PO BOX 1	705												
City:	CHADDS FOR	D						State:	PA			Zip Cod	le: 19	9317		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST-	3. X		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.	Year 2019					IG METH CHECK O			PAPER / DIS					ГТЕ
Name of Office S	Sought by Candida	te:	•					DATE C	F ELE	СТІО	N	District Number	y Code	County Code		
								МО	DAY	YE	AR	11020.	Code	REP		23
								11		5 2019 (SEE					NS FOR C	ODES)
	Receipts and	МО	DAY Y	/EAR	1			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
Expenditures	irom:		5 7	20	019	Т	0	ϵ	5	10	2019					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			97,5	19.49					
B. Total Moneta	ary Contributions	And Rec	eipts (From S	Sche	dule	e I)	\$			4,5	500.00					
C. Total Funds Available (Sum Of Lines A and B) \$ 102,019.2								19.49								
D. Total Expenditures (From Schedule III) \$ 506.1							06.14									
E. Ending Cash	Balance (Subtrac	t Line D	From Line C))			\$:	101,5	13.35					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	nedul	le II	I)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			,		
				AFF	ΊD	AVI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign he	ere. I	If th	nis is	a Can	didate r	eport, o	candi	date sig	ın here.				
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached sche	dules	file	d on	paper (or by elect	tronic m	edium	, are to t	the best o	f my kno	wledge a	nd belie	f , true
Sworn to and subs	cribed before me thi day of	s	20							S	ignature	of Perso	n Submit	ting Rep	ort	
	Signatu	ıre					- -					Prin	ted Name	e		
My Commission Ex	_											Emai	il			
	мо	D	AY	YR					Are	ea Cod	le	Daytim	e Telepi	none Nui	nber	
Part II- If this is	a report of a can	didate's	authorized C	comm	nitte	ee, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and belief	this	poli	tical	commi	ittee has r	ot viola	ted an	y provis	ions of the	e act of J	une 3,19)37 (P.L.	1333,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate		
	day of						-					Drinto	d Name			
	Signature						-									
My Commission Exp	_											Ema	il			
	МО	D	AY	YR			-		Area	Code		Da	ytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
BARRAR, STEPHEN FRIENDS OF	From:	<u>5/7/201</u>	<u>9</u> To:	6/10/2019
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)			\$	3,500.00
All Other Contributions (Part D)			\$	1,000.00
TOTAL for the Reporting) Period	(3)	\$	4,500.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	4,500.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Name of Filing Comm		Reporting Period						
			From:		То	:		
		I		DATE			AMOUNT	
Full Name of Contribut	ing Committee		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

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 Filling Committee of Candidate					Reporting Period From: To:				
					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	me of Filing Committee or Candidate					Reporting Period					
BARRAR, STEPHEN FRIENDS OF			From:	<u>5/</u>	7/2019	То:	6/10/2019				
				DA	TE		AMOUNT				
Full Name of Contributing Committee PHARMPAC (PA PHARMACY PAC)				МО	DAY	YEAR					
Mailing Address 508 NORTH THIRD S	TREET						\$ 500.00				
City HARRISBURG	State Zip Code (Plus 4) PA 171011199			5	24	2019					
Full Name of Contributing Committee BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT					DAY	YEAR					
Mailing Address ONE OXFD CTR 301 City PITTSBURGH	GRANT ST 20 FL State PA	ate Zip Code (Plus 4)		5	24	2019	\$ 500.00				
Full Name of Contributing Committee PECO PAC	ı			МО	DAY	YEAR					
Mailing Address 2301 MARKET ST S1	4-2						\$ 500.00				
City PHILADELPHIA	State PA	Zip Code	(Plus 4)	5	30	2019					
Full Name of Contributing Committee FIRSTENERGY PAC		-		МО	DAY	YEAR					
Mailing Address 76 S MAIN ST							\$ 500.00				
City AKRON	State OH	Zip Code 443080	(Plus 4)	5	30	2019					
Full Name of Contributing Committee AQUA AMERICA INC H2O PAC (FEDERAL PAC)					DAY	YEAR					
Mailing Address 762 W LANCASTER A	VE			_			\$ 500.00				
City BRYN MAWR	State PA	Zip Code	(Plus 4)	6	3	2019					

	GI UTILITIES INC/UGI ENERGY SERVICES LLC PAC ailing Address PO Roy 13677					
Mailing Address PO Box 12677					2010	\$ 500.00
City READING	State PA	Zip Code (Plus 4) 19612	6	6	2019	
Full Name of Contributing Commit PABAR PAC (PA BAR ASSN)	tee		мо	DAY	YEAR	
	tee		MO	DAY 8	YEAR 2019	\$ 500.00

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

PAGE TOTAL \$ 3,500.00

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 of Candidat	ame of Filing Committee of Candidate					riod				
BARRAR, STEPHEN FRIENDS OF				Fron	n:	5/7/	2019	To:		6/10/2019
					D	ATE			АМ	OUNT
Full Name of Contributor					мо	DAY		AR		
Gary Krapf					140	DAI	''	-AIX		
Mailing Address 1060 Sauders Lane									\$ \$	500.00
City West Chester	State	Zip	Code (Plus	4)	6	8	3 2	019		
	PA	193	380							
Employer Name Krapf Coaches Inc					Occupation Owner/Principal					
Employer Mailing Address/Principal Pla Business	ace of		City			State			Zip Code	(Plus 4)
1060 Saunders Lane			West Che	ester		PA			19380	
Full Name of Contributor					мо	DAY	YI	AR		
John Lynch										
Mailing 2105 Shadyside Lar	е				_				\$	500.00
City Garnet Valley	State	Zip	Code (Plus	4)	6	8	3 2	019		
	PA	190	060							
Employer Name Pilots Association fo	r the Bay and River [Delawa	are		Occupat	tion	Rive	r Pilo	t	
Employer Mailing Address/Principal Pla Business	ace of		City		ı	State			Zip Code	(Plus 4)
2105 Shadyside Lane			Garnet V	alley		PA			19060	
Enter Grand Total of Part C on Sch	edule I, Detailed S	umm	ary Page,	Section	on 3.				PA	GE TOTAL
	,		, 3-,					\$		1,000.00

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		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•		•	•	
Enter Grand Total of Part E o	on Schedule I. Detailed	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 1, Betanet	. Jammar y r uge,	500.011				\$	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								
BARRAR, STEPHEN FRIENDS OF	From:	<u>5/7/2019</u> To :	6/10/2019						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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)	\$	0.00						
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,		\$	0.00						

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:			То:		
				DATE		AMOUNT		
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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL	
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	e				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reporti	ng Period			
BARRAR, STEPHEN FRIENDS O	F		From	<u>5/</u> 2	7/2019	То:	6/10/2019
				DATE			AMOUNT
To Whom Paid Upper Chichester Republican Pa	rty		мо	DAY	YEAR		
Mailing Address PO Box 2106	5		5	13	2019	\$	100.00
City Upper Chichester	Description of Expenditure Spring Reception-Check #3802						
To Whom Paid 2019 PSATC							
Mailing Address 6 Oxford Circle				16	2019	\$	100.00
City Upper Chichester	State PA	Zip Code (Plus 4) 19014		otion of Exp			
To Whom Paid TD Bank	•		МО	DAY	YEAR		
Mailing Address PO Box 1377	7		5	31	2019	\$	2.00
City Lewiston	State ME	Zip Code (Plus 4) 04243		otion of Exp e Charge-M			
To Whom Paid TD Bank			МО	DAY	YEAR		
Mailing Address PO Box 8403	37		5	20	2019	\$	304.14
City COLUMBUS State GA Zip Code (Plus 4) 31908				otion of Exp e-Business			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D							PAGE TOTAL
Enter Grand Total of Expend	itures on Page 1, Re	eport Cover Page, Item D	٠.			_ ا	E06 14

506.14