

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 : 2008205		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: FARRY, FRANK FRIENDS OF											
Street Address: PO BOX 231											
City: LANGHORNE				State: PA		Zip Code: 19047-0221					
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	<input checked="" type="checkbox"/> No		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2019	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	REP 09			
					11	5	2019	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		9	17	2019		10	21	2019			
A. Amount Brought Forward From Last Report					\$ 120,302.98						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 0.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 120,302.98						
D. Total Expenditures (From Schedule III)					\$ 5,864.11						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 114,438.87						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 350.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 0.00						

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
FARRY, FRANK FRIENDS OF	From: <u>9/17/2019</u> To: <u>10/21/2019</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)	\$ 0.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 0.00

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.)	\$ 0.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	0.00

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	Reporting Period	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 0.00

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	Reporting Period
	From: To:

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

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:
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			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	
FARRY, FRANK FRIENDS OF		From: <u>9/17/2019</u> To: <u>10/21/2019</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 RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 350.00
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.)			\$ 350.00

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:
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			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
FARRY, FRANK FRIENDS OF	From: <u>9/17/2019</u> To: <u>10/21/2019</u>

					DATE	AMOUNT		
Full Name of Contributor Four Lanes End, LLC					MO	DAY	YEAR	\$ 350.00
Mailing Address 106 Maple Ave					10	1	2019	
City Langhorne	State PA		Zip Code(Plus 4) 19047					
Employer of Contributor n/a					Occupation Limited Liability Company			
Employer Mailing Address/Principal Place of Business 106 Maple Ave			City Langhorne	State PA	Zip Code(Plus 4) 19047		Description of Contribution rent	
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 Candidate	Reporting Period
FARRY, FRANK FRIENDS OF	From <u>9/17/2019</u> To: <u>10/21/2019</u>

DATE				AMOUNT		
To Whom Paid Labor PAC AFL-CIO			MO	DAY	YEAR	\$ 75.00
Mailing Address 3031 Walton Road, Bldg C			9	26	2019	
City PLYMOUTH MEETING	State PA	Zip Code (Plus 4) 19462	Description of Expenditure ticket to event			
To Whom Paid Visit Bucks County			MO	DAY	YEAR	\$ 55.00
Mailing Address 3207 Street Road			9	26	2019	
City Bensalem	State PA	Zip Code (Plus 4) 19020	Description of Expenditure ticket to event			
To Whom Paid AOH Division 2			MO	DAY	YEAR	\$ 50.00
Mailing Address 58 Fourleaf Road			9	26	2019	
City Levittown	State PA	Zip Code (Plus 4) 19056	Description of Expenditure advertising			
To Whom Paid Northampton Township Republican Committee			MO	DAY	YEAR	\$ 500.00
Mailing Address 196 Hilltop Drive			9	27	2019	
City Churchville	State PA	Zip Code (Plus 4) 18966	Description of Expenditure contribution			
To Whom Paid Upper Southampton Republican Club			MO	DAY	YEAR	\$ 150.00
Mailing Address PO Box922			9	27	2019	
City Southampton	State PA	Zip Code (Plus 4) 18966	Description of Expenditure contribution			

To Whom Paid Friends of Langhorne Manor			MO	DAY	YEAR	\$ 100.00
Mailing Address 507 Hill Ave			9	27	2019	
City Langhorne	State PA	Zip Code (Plus 4) 19047	Description of Expenditure contribution			

To Whom Paid Fireside Smokehouse			MO	DAY	YEAR	\$ 60.00
Mailing Address 237 Elmwood Ave			10	2	2019	
City Feasterville	State PA	Zip Code (Plus 4) 19053	Description of Expenditure dining			

To Whom Paid Toscana 52			MO	DAY	YEAR	\$ 84.94
Mailing Address 4603 Street Road			10	2	2019	
City Feasterville	State PA	Zip Code (Plus 4) 19053	Description of Expenditure dining			

To Whom Paid Renaissance Hotel			MO	DAY	YEAR	\$ 39.17
Mailing Address 107 6th Street			10	2	2019	
City Pittsburgh	State PA	Zip Code (Plus 4) 15222	Description of Expenditure dining			

To Whom Paid Brian Fitzpatrick for Congress			MO	DAY	YEAR	\$ 1,000.00
Mailing Address Po Box 939			9	30	2019	
City Langhorne	State PA	Zip Code (Plus 4) 19047	Description of Expenditure contribution			

To Whom Paid Bucks County Republican Committee			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 115 North Broad Street			10	10	2019	
City Doylestown	State PA	Zip Code (Plus 4) 18901	Description of Expenditure contribution			

To Whom Paid Committee to Re-Elect Mary K. Smithson			MO	DAY	YEAR	\$ 250.00
Mailing Address 6 Cavallo Way			10	21	2019	
City Doylestown	State PA	Zip Code (Plus 4) 18901	Description of Expenditure contribution			

To Whom Paid Committee to Elect Campbell			MO	DAY	YEAR	\$ 250.00
Mailing Address PO Box 873			10	21	2019	
City Quakertown	State PA	Zip Code (Plus 4) 18951	Description of Expenditure contribution			

To Whom Paid Friends of Don Petrille			MO	DAY	YEAR	\$ 250.00
Mailing Address Po Box 1677			10	21	2019	
City Doylestown	State PA	Zip Code (Plus 4) 18901	Description of Expenditure contribution			

To Whom Paid Friends of Tom Panzer			MO	DAY	YEAR	\$ 250.00
Mailing Address PO Box 123			10	21	2019	
City Doylestown	State PA	Zip Code (Plus 4) 18901	Description of Expenditure contribution			

To Whom Paid Friends of Rob Loughery			MO	DAY	YEAR	\$ 250.00
Mailing Address PO Box 639			10	21	2019	
City Langhorne	State PA	Zip Code (Plus 4) 19047	Description of Expenditure contribution			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 5,864.11

