### **Campaign Finance Report**

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

Filer Identification 2008205 Report Filed By: CANDIDATE COMMITTEE LOBBYIS									BYIST								
Name of Filing C	Committee, Candi	date or L	obbyist:	F	-ARR\	/, FI	RAN	K FRIENI	DS OF								
Street Address:																	
City:	LANGHORNE							State:	PA			<b>Zip Code:</b> 1904			221		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.						Y I ARY				AMENDM REPORT		Yes	No	•	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY F ELECTION	PRE-	- 5.	_	0 DA		POST-	6.		TERMINATION REPORT?		Yes	No		<b>\</b>
report type)	ANNUAL REPOR	7.	<b>Year</b> 2020					IG METHO				PAPER		<b>/</b>	DISKE	TTE	
Name of Office S	ought by Candid	ate:	-					DATE 0	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	ΥI	AR	142	STH	REP	1	09	
REPRESENTATI	VE IN THE GENE	RAL ASS	EMBLY					11		3	2020		(SEE IN	STRUCTI	ONS FOR (	CODES	)
	Receipts and	МО	DAY YE	AR				мо	DAY	Y	EAR	FC	R OFFI	CE USE	ONLY		
Expenditures	from:		5 19	20	)20	то	)	6		22	2020						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			152,	123.44						
B. Total Moneta	ary Contributions	And Rec	eipts (From Sc	hec	lule I	)	\$			:	280.00						
C. Total Funds	Available (Sum C	f Lines A	and B)				\$			152,	703.44						
D. Total Expend	ditures (From Sc	nedule II	I)				\$				27.29						
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)				\$		:	152,6	76.15	]					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	dul	e II)		\$			3	300.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)				\$				0.00						
			Al	13	[DAV	IT/	SE	CTION									
PART I - If this is	a Committee re	port, trea	surer sign her	e. I	f this	is a	Can	didate re	eport, o	candi	date sig	jn here.					
I swear (or affirm) correct and complete	) that this report, in ete.	cluding the	attached schedu	ıles	filed o	n pa	per o	or by elect	ronic m	edium	, are to t	the best o	f my knov	wledge	and beli	ef , tru	ue
Sworn to and subs	cribed before me th	is	20							S	Signature	of Perso	n Submit	ting Rep	ort		-
	Signat	ure				_						Prin	ted Name	•			-
My Commission Ex	cpires								Email								-
ı	мо	D	AY '	ΥR					Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a car	ididate's	authorized Cor	nm	ittee,	Car	ndida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief t	his	politica	al co	ommi	ittee has n	ot viola	ted ar	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc		5							Signature of Candidate							-	
	day of ————————————————————————————————————											Printe	d Name				-
	Signature					_											_
My Commission Exp	ires											Ema	il				
	МО	D	AY	YR		_			Area	Code		D	aytime T	elephon	e Numb	er	-

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FARRY, FRANK FRIENDS OF	<u>0</u> To:	6/22/2020		
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	30.00
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)			\$	250.00
TOTAL for the Reporting	) Period	(2)	\$	250.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	280.00

#### **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 Candidat	Reporting	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

**Reporting Period** 

FARRY, FRANK FRIENDS OF

From: 5/19/2020 To:

DATE

6/22/2020

AMOUNT

Full Name of Contributor John McGrath III	МО	DAY	YEAR			
Mailing Address						<b>\$</b> 250.00
City Villanova	State	Zip Code (Plus 4)	5	22	2020	
	PA	19085				

PAGE TOTAL

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

**\$** 250.00

#### **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:			То:				
				DA	TE		P	AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR			0.00	
Mailing Address							<b>-</b>   \$		0.00	
City	State	Zip Cod	e (Plus 4)							
								PAGE TOTA	AL	
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	age, Sectio	n 3.			\$	(	0.00	

### 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				Repo	orting Pe	riod					
				Fron	n:		٦	То:			
					D	ATE			А	MOUNT	
Full Name of Contributor					МО	DAY	YEAR	R	\$		0.00
Mailing Address											
City	State	Zip	Code (Plus	4)							
Employer Name					Occupa	tion					
Employer Mailing Address/Principal Plac	e of Business		City			State		z	ip Cod	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Sเ	umm	nary Page,	Section	on 3.			\$	F	PAGE TOTA	<b>L</b> .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	ing Peri	od			
			From:			To:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	<b>'</b>						<u> </u>	
	- C		<b>.</b> .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	Section	4.			\$	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 Perio	d	
FARRY, FRANK FRIENDS OF	From:	<u>5/19/2020</u> <b>To:</b>	<u>6/22/2020</u>
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 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)	\$	300.00
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,		\$	300.00

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Car	Reporting Period							
	From:		To	То:				
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•				
					-			
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Deta				mary Pa	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 I	Period	
FARRY, FRANK FRIENDS OF	From:	<u>5/19/2020</u> <b>To:</b>	<u>6/22/2020</u>

						DATE		AMOUNT
Full Name of Contributor					мо	DAY	YEAR	
Four Lanes End, LLC						JA!	ILAK	
Mailing Address					6	1	2020	\$ 300.00
City Langhorne	State		Zip Code(Plus	4)				
	PA		19047					
Employer of Contributor n/a			•		Occupa	tion n/	′a	
Employer Mailing Address/Principal	Place of Business	Cit	ty	State	Zip	Code(Plus 4)	Descri	ption of Contribution
		La	inghorne	PA	190	47	rent	
Enter Grand Total of Part G on	Schedule II. In-K	ind (	Contributions	Detaile	d			PAGE TOTAL
Summary Page, Section 3.	- ctane	•			300.00			
Summary rage, Section 51								

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting	g Period		
FARRY, FRANK FRIENDS OF	From	5/19/2020	То:	6/22/2020
		DATE		AMOUNT

			DATE				AMOUNT
To Whom Paid			МО	DAY	YEAR		
Anedote			MO		ILAK		
Mailing Address			5	22	2020	\$	10.30
City Baton Rouge	State	Zip Code (Plus 4)	Description of Expenditure				
	LA	70810	fees				
To Whom Paid				DAY	YEAR		
American Express			МО		ILAK		
Mailing Address			5	22	2020	\$	16.99
City New York	State	Zip Code (Plus 4)	Descript	tion of Exp			
	NY	10285	webhosting				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	27.29