

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		2008205		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> FARRY, FRANK FRIENDS OF												
<b>Street Address:</b> PO BOX 231												
<b>City:</b> LANGHORNE						<b>State:</b> PA		<b>Zip Code:</b> 19047-0221				
<b>TYPE OF REPORT</b>  (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	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2020	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
REPRESENTATIVE IN THE GENERAL ASSEMBLY						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	142	STH	REP	09
						11	3	2020	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		11	24	2020		12	31	2020				
<b>A. Amount Brought Forward From Last Report</b>						\$		78,313.42				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$		11,455.00				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$		89,768.42				
<b>D. Total Expenditures (From Schedule III)</b>						\$		3,238.58				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$		86,529.84				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$		300.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$		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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FARRY, FRANK FRIENDS OF	From: <u>11/24/2020</u> To: <u>12/31/2020</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 250.00
<b>All Other Contributions (Part B)</b>	\$ 500.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 750.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 10,000.00
<b>All Other Contributions (Part D)</b>	\$ 500.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 10,500.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 205.00

<b>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.)</b>	\$ 11,455.00
---	--------------

**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.**

<b>Name of Filing Committee or Candidate</b>  FARRY, FRANK FRIENDS OF	<b>Reporting Period</b>  <b>From:</b> <u>11/24/2020</u> <b>To:</b> <u>12/31/2020</u>
<div style="display: flex; justify-content: space-between;"> <span><b>DATE</b></span> <span><b>AMOUNT</b></span> </div>	

<b>Full Name of Contributing Committee</b> BUCHANAN INGERSOLL& ROONEY COM EFF STATE GVT			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> ONE OXFD CTR 301 GRANT ST 20 FL			12	30	2020	
<b>City</b> PITTSBURGH	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  15219-1410				

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

<b>PAGE TOTAL</b>
\$ 250.00

## 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)**

<b>Name of Filing Committee or Candidate</b> FARRY, FRANK FRIENDS OF	<b>Reporting Period</b> From: <u>11/24/2020</u> To: <u>12/31/2020</u>
---	--

<b>DATE</b>	<b>AMOUNT</b>
-------------	---------------

<b>Full Name of Contributor</b> Theodore Weaver, Jr.			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 103 East Winchester Ave			12	30	2020	
<b>City</b> Langhorne	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19047				

<b>Full Name of Contributor</b> Kevin L. Johnson			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b> 1759 Hamilton Drive			12	30	2020	
<b>City</b> Phoenixville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19460				

<b>Full Name of Contributor</b> Veronica Lykon			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b> 615 Ford Road			12	30	2020	
<b>City</b> Hulmeville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19047				

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

<b>PAGE TOTAL</b>
\$ 500.00

# 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.

<b>Name of Filing Committee or Candidate</b>  FARRY, FRANK FRIENDS OF	<b>Reporting Period</b>  <b>From:</b> <u>11/24/2020</u> <b>To:</b> <u>12/31/2020</u>
---	--

				DATE	AMOUNT		
Full Name of Contributing Committee PENNSYLVANIA BEER ALLIANCE(PA BEER WHOLESALER-PBWA)				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 407 N FRONT ST				12	30	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101-1205					
Full Name of Contributing Committee IBEW PAC VOLUNTARY FUND				MO	DAY	YEAR	\$ 7,000.00
Mailing Address 900 SEVENTH STREET NW				12	30	2020	
City WASHINGTON	State DC	Zip Code (Plus 4) 20001					
Full Name of Contributing Committee CROWN PAC (PA) CROWN CORK & SEAL				MO	DAY	YEAR	\$ 1,000.00
Mailing Address C/O CROWN HOLDINGS, INC 770 TOWNSHI				12	30	2020	
City YARDLEY	State PA	Zip Code (Plus 4) 19067					
Full Name of Contributing Committee PECO PAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 2301 MARKET ST S14-2				12	30	2020	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103-0000					

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

PAGE TOTAL
\$ 10,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  FARRY, FRANK FRIENDS OF	<b>Reporting Period</b>  <b>From:</b> <u>11/24/2020</u> <b>To:</b> <u>12/31/2020</u>
---	--

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
BSI Consulting LLC							
<b>Mailing Address</b> 735 Birch Ave							\$ 500.00
<b>City</b> Bensalem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19020	12	30	2020		
<b>Employer Name</b> BSI Consulting LLC				<b>Occupation</b> Limited Liability Company			
<b>Employer Mailing Address/Principal Place of Business</b> 735 Birch Ave			<b>City</b> Bensalem		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19020	

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

<b>PAGE TOTAL</b>
\$ 500.00

## 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.**

<b>Name of Filing Committee or Candidate</b>  FARRY, FRANK FRIENDS OF	<b>Reporting Period</b>  From: <u>11/24/2020</u> To: <u>12/31/2020</u>
---	--

				DATE		AMOUNT	
<b>Full Name</b> Langhorne Lions Club				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 50.00
<b>Mailing Address</b> 507 S. Bellevue Avenue				12	30	2020	
<b>City</b> Langhorne	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19047					
<b>Receipt Description</b> returned check							
<b>Full Name</b> VFW District 8				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 55.00
<b>Mailing Address</b> 9311 Longview Dr				12	30	2020	
<b>City</b> Morrisville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19067					
<b>Receipt Description</b> Returned check							
<b>Full Name</b> BCSHF				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 3113 E. Brighton Street				12	30	2020	
<b>City</b> Furlong	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18925					
<b>Receipt Description</b> returned check							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL	
\$	205.00

## 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FARRY, FRANK FRIENDS OF		From: <u>11/24/2020</u> To: <u>12/31/2020</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period		(3)	\$ 300.00
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.)			\$ 300.00



**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
---------------------------------------	--

			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.						<b>PAGE TOTAL</b>  \$ 0.00

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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FARRY, FRANK FRIENDS OF	From: <u>11/24/2020</u> To: <u>12/31/2020</u>

					DATE		AMOUNT	
Full Name of Contributor Four Lanes End, LLC					MO	DAY	YEAR	\$ 300.00
Mailing Address 106 Maple Ave					12	1	2020	
City Langhorne		State PA		Zip Code(Plus 4) 19047				
Employer of Contributor Four Lanes End					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 300.00

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FARRY, FRANK FRIENDS OF	From <u>11/24/2020</u> To: <u>12/31/2020</u>

DATE				AMOUNT		
To Whom Paid American Express			MO	DAY	YEAR	\$ 155.30
Mailing Address 200 Vesey Street			11	24	2020	
City New York	State NY	Zip Code (Plus 4) 10285	Description of Expenditure annual fees			
To Whom Paid Woods Wear			MO	DAY	YEAR	\$ 812.00
Mailing Address 40 Martin Gross Drive			12	2	2020	
City Langhorne	State PA	Zip Code (Plus 4) 19047	Description of Expenditure Face masks			
To Whom Paid United States Postal Service			MO	DAY	YEAR	\$ 385.00
Mailing Address 980 Wheeler Way			12	2	2020	
City Langhorne	State PA	Zip Code (Plus 4) 19047	Description of Expenditure postage			
To Whom Paid Irish Rover			MO	DAY	YEAR	\$ 299.55
Mailing Address 1033 S. Bellevue Ave			12	2	2020	
City Langhorne	State PA	Zip Code (Plus 4) 19047	Description of Expenditure dining			
To Whom Paid Brothers Pizza			MO	DAY	YEAR	\$ 56.34
Mailing Address 110 N. Pine Street			12	2	2020	
City Langhorne	State PA	Zip Code (Plus 4) 19047	Description of Expenditure dining			

<b>To Whom Paid</b> Lowe's Home Centers, LLC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 175.73
<b>Mailing Address</b> 1400 East Lincoln Highway			12	2	2020	
<b>City</b> Langhorne	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19047	<b>Description of Expenditure</b> posts for signs			

  

<b>To Whom Paid</b> Iron Oven Restaurant			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 255.36
<b>Mailing Address</b> 1134 Street Road			12	2	2020	
<b>City</b> Southampton	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18966	<b>Description of Expenditure</b> dining			

  

<b>To Whom Paid</b> Old Neshaminy inn			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 530.00
<b>Mailing Address</b> 1558 E. Maple Ave			12	2	2020	
<b>City</b> Langhorne	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19047	<b>Description of Expenditure</b> catering			

  

<b>To Whom Paid</b> Sunoco			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 65.16
<b>Mailing Address</b> 620 Bristol & Brownsville Road			12	2	2020	
<b>City</b> Trevoze	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19053	<b>Description of Expenditure</b> auto expense			

  

<b>To Whom Paid</b> Sandy's Beef & Ale			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 295.93
<b>Mailing Address</b> 2028 E. Old Lincoln Highway			12	2	2020	
<b>City</b> Langhorne	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19047	<b>Description of Expenditure</b> catering			

  

<b>To Whom Paid</b> Langhorne Coffee House			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 208.21
<b>Mailing Address</b> 102 S. Bellevue Ave			12	2	2020	
<b>City</b> Langhorne	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19047	<b>Description of Expenditure</b> dining			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 3,238.58

