

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. X	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.	Year 2021	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	2	2021	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		5	4	2021		6	7	2021			
A. Amount Brought Forward From Last Report					\$ 75,795.68						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 26,600.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 102,395.68						
D. Total Expenditures (From Schedule III)					\$ 6,138.63						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 96,257.05						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
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>5/4/2021</u> To: <u>6/7/2021</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)	\$ 25,400.00
All Other Contributions (Part D)	\$ 1,200.00
TOTAL for the Reporting Period (3)	\$ 26,600.00

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.)	\$ 26,600.00
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Name of Filing Committee or Candidate	Reporting Period
	<div>From:</div> <div>To:</div>

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

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 FARRY, FRANK FRIENDS OF	Reporting Period From: <u>5/4/2021</u> To: <u>6/7/2021</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee MALADY & WOOTEN PAC				MO	DAY	YEAR	\$ 400.00
Mailing Address 604 N THIRD ST				5	28	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101-0000					
Full Name of Contributing Committee Committee for a Better Tomorrow				MO	DAY	YEAR	\$ 20,000.00
Mailing Address 123 S. Broad St, Suite 2200				6	3	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 19109					
Full Name of Contributing Committee 2999 Group				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 2999 Street Road				5	28	2021	
City Bensalem	State PA	Zip Code (Plus 4) 19020					

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

PAGE TOTAL
\$ 25,400.00

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 FARRY, FRANK FRIENDS OF	Reporting Period From: <u>5/4/2021</u> To: <u>6/7/2021</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Allen Toadvine				5	28	2021	\$ 400.00
Mailing Address 1602 Carlene Court							
City Langhorne	State PA	Zip Code (Plus 4) 19047					
Employer Name Begley, Carlin & Mandio LLP				Occupation Attorney			
Employer Mailing Address/Principal Place of Business 680 Middletown Boulevard			City Langhorne		State PA	Zip Code (Plus 4) 19047	
Jeffrey P. Garton				5	28	2021	\$ 400.00
Mailing Address PO Box 308							
City Langhorne	State PA	Zip Code (Plus 4) 19047					
Employer Name Begley, Carlin & Mandio LLP				Occupation Attorney			
Employer Mailing Address/Principal Place of Business 680 Middletown Boulevard			City Langhorne		State PA	Zip Code (Plus 4) 19047	
John Torrente				6	7	2021	\$ 400.00
Mailing Address 680 Middletown Boulevard							
City Langhorne	State PA	Zip Code (Plus 4) 19047					
Employer Name Begley, Carlin & Mandio LLP				Occupation Attorney			
Employer Mailing Address/Principal Place of Business 680 Middletown Boulevard			City Langhorne		State PA	Zip Code (Plus 4) 19047	

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

PAGE TOTAL	
\$	1,200.00

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:

			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>5/4/2021</u> To: <u>6/7/2021</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 RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
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.)		\$	0.00

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			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FARRY, FRANK FRIENDS OF	From <u>5/4/2021</u> To: <u>6/7/2021</u>

DATE				AMOUNT		
To Whom Paid Frank Farry			MO	DAY	YEAR	\$ 550.00
Mailing Address 116 East Winchester Ave			5	6	2021	
City Langhorne	State PA	Zip Code (Plus 4) 19047	Description of Expenditure reimbursement for expenses			
To Whom Paid Harran for Sheriff			MO	DAY	YEAR	\$ 250.00
Mailing Address Po box 582			5	12	2021	
City Bensalem	State PA	Zip Code (Plus 4) 19020	Description of Expenditure contribution			
To Whom Paid Bucks County Heroes Scholarship Fund			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1760 S. Easton Road			5	12	2021	
City Doylestown	State PA	Zip Code (Plus 4) 18901	Description of Expenditure sponsor			
To Whom Paid AOH Division 1			MO	DAY	YEAR	\$ 60.00
Mailing Address 614 Corson Street			5	13	2021	
City Bristol	State PA	Zip Code (Plus 4) 19007	Description of Expenditure advertising			
To Whom Paid Centennial Baseball			MO	DAY	YEAR	\$ 250.00
Mailing Address PO Box 938			5	13	2021	
City Southampton	State PA	Zip Code (Plus 4) 18966	Description of Expenditure sponsorships			

To Whom Paid Lower South American Legion Baseball			MO	DAY	YEAR	\$ 550.00
Mailing Address 1231 Jasmine Way			5	13	2021	
City Feasterville	State PA	Zip Code (Plus 4) 19053	Description of Expenditure sponsorships			

To Whom Paid Maple Point Middle School PTO			MO	DAY	YEAR	\$ 50.00
Mailing Address 2250 Langhorne-Yardley Road			5	13	2021	
City Langhorne	State PA	Zip Code (Plus 4) 19047	Description of Expenditure contribution			

To Whom Paid Bucks County CLC			MO	DAY	YEAR	\$ 200.00
Mailing Address 3031 Walton Road			6	2	2021	
City Plymouth Meeting	State PA	Zip Code (Plus 4) 19462	Description of Expenditure sponsor			

To Whom Paid HRCC			MO	DAY	YEAR	\$ 1,500.00
Mailing Address PO Box 11787			6	3	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure contribution			

To Whom Paid Cork and Fork			MO	DAY	YEAR	\$ 121.24
Mailing Address 200 State Street			6	2	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure dining			

To Whom Paid HRCC			MO	DAY	YEAR	\$ 60.00
Mailing Address PO Box 11787			6	2	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure contribution			

To Whom Paid Pat Deon Beverages			MO	DAY	YEAR	
Mailing Address 540 South Oxford Valley Road			6	2	2021	
City Fairless Hills	State PA	Zip Code (Plus 4) 19030	Description of Expenditure cigars for event			

To Whom Paid McGraths Pub			MO	DAY	YEAR	
Mailing Address 202 Locust Street			6	2	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure dining			

To Whom Paid Sturges Speakeasy			MO	DAY	YEAR	
Mailing Address 400 Forester Street			6	2	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure dining			

To Whom Paid Kristin Benhayon			MO	DAY	YEAR	
Mailing Address 6 Firebush Road			6	7	2021	
City Levittown	State PA	Zip Code (Plus 4) 19056	Description of Expenditure reimbursement for expenses			

To Whom Paid Wayne DeAngelo for Assembly			MO	DAY	YEAR	
Mailing Address 105 Limewood Dr			5	13	2021	
City Hamilton	State NJ	Zip Code (Plus 4) 08690	Description of Expenditure sponsor			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 6,138.63

