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 :			Report		CANDI	DATE		СОМ	4ITTEE	✓	LOBE	BYIST				
Name of Filing C	Committee, Candid	ate or L	obbyist:	F	ARRY,	FRAN	IK FRIEN	DS OF								
Street Address:																
City:	LANGHORNE						State:	PA			Zip Cod	ie: 19	9047-0	221		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDAY PR PRIMARY	E-	2.	30 DA		POST-	3.		AMENDM REPORT		Yes	No		\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PI ELECTION	RE-	5.	30 DA		POST-	6.		TERMINATION Yes REPORT?			No		/
report type)	ANNUAL REPORT	7.	Year 2023				NG METHO				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	Sought by Candida	te:	-				DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
	· ,						МО	DAY	YE	AR	Number	REP 09				
							11		7	2023		(SEE IN	STRUCTIO	ONS FOR C	ODES))
Summary of Expenditures	Receipts and	МО	DAY YEA	\R			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
			2 11	20	23 T	0	3	3	27	2023						
A. Amount Bro	ught Forward Fror	n Last R	eport			\$			105,8	323.35						
B. Total Monet	ary Contributions	And Rec	eipts (From Sch	ed	ule I)	\$				0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			105,8	323.35						
D. Total Expen	ditures (From Sch	edule II	I)			\$			16,5	33.99						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$			89,2	89.36						
F. Value Of In-	Kind Contributions	Receiv	ed (From Sched	ule	II)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			1			
			AF	FI	DAVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign here	. If	this is	a Car	ndidate re	eport, d	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	e attached schedul	es 1	filed on	paper	or by elect	tronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ue
Sworn to and subs	cribed before me this day of	•	20						S	ignature	of Perso	n Submit	ting Rep	ort		_
	Signatu	re				- -					Prin	ted Name	e			_
My Commission Ex	cpires					_		Email								
	мо	D	AY Y	R				Ar	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	didate's	authorized Com	ımi	ittee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowl	edge and belief th	is p	olitical	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subso	ribed before me this									S	ignature o	of Candid	ate			-
	day of					_					Printe	d Name				-
	Signature					-										_
My Commission Exp	ires										Ema					
	мо	D	AY Y	/R		-		Area	Code		Da	Daytime Telephone Number				

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FARRY, FRANK FRIENDS OF	From:	2/11/202	2 <u>3</u> To:	3/27/2023
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	g 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	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

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 Committe	R	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		Rep	orting P	eriod			
			Fro	m:		To):	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
								PAGE TOTAL

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

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		0.0	
Mailing Address							- \$	0.0	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	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			Rep	orting Pe	riod			
			Fron	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 0.00

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:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<u>'</u>	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	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:	2/11/2023 To :	<u>3/27/2023</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)	\$	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 Candidate	Reporting Period							
			From:			To:		
				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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	Period					
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
FARRY, FRANK FRIENDS OF	From	2/11/2023	То:	3/27/2023			

								NOL 1Z		
To Wh	om Paid	мо	DAY	YEAR						
St. Ep	hrem Home & School Assn									
Mailing Address					2	2023	\$	200.00		
City	Bensalem	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure				
		PA	19020	sponsor	ship					
To Wh	om Paid	мо	DAY	YEAR						
BCSH	F									
Mailing Address					2	2023	\$	150.00		
City	Furlong State Zip Code (Plus 4)				Description of Expenditure					
		PA	18925	advertis	sing					
To Wh	om Paid			мо	DAY	YEAR				
Nesha	nminy Valley Music Theatre			М		ILAK				
Mailin	g Address			3	2	2023	\$	100.00		
City	Langhorne	Zip Code (Plus 4)	Descript	tion of Exp	enditure					
		advertising								
To Wh	om Paid			мо	DAY	YEAR				
Friend	ls of Middletown	PIO		ILAK						
Mailing Address					3	2023	\$	1,000.00		
City	Langhorne State Zip Code (Plus 4)				Description of Expenditure					
		PA	19047	contribution						
To Whom Paid					DAY	YEAR				
Trevo	se Horticultural Society	МО		1 Z/IIX						
Mailing Address					3	2023	\$	100.00		
City	Bensalem	Description of Expenditure								
		PA	19020	advertis	sing					
To Wh	om Paid			мо	DAY	YEAR				
Conwe	ell Egan Catholic High School									
Mailing Address					24	2023	\$	200.00		
City	Fairless Hills	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	19030	contribu	ıtion					
To Wh	om Paid			МО	DAY	YEAR				
Tri Co	unty Band									
Mailing Address					24	2023	\$	120.00		
City	Feasterville	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure				
		advertising								
To Wh	om Paid	мо	DAY	YEAR						
Team Chappy										
Mailing Address					24	2023	\$	100.00		
City	Langhorne	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure				
		PA	19056	contribution						
				Contribution						

							.,.02 15
To Whom Paid	мо	DAY	YEAR				
Bucks County Republican	1-10		ILAK				
Mailing Address	3	15	2023	\$	12,500.00		
City Doylestown	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	18901	contribu	ıtion			
							PAGE TOTAL
Enter Grand Total of Ex	\$	16,533.99					