### **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 :	on 2008	205			Rep File			CANDI	DATE		СОМ	1ITTEE	<b>√</b>	LOBE	SYIST		
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		FAR	RY,	FRAN	K FRIEN	DS OF								
Street Address:	PO BOX 231																
City:	LANGHORNE							State:	PA			Zip Cod	<b>ie:</b> 19	9047-0	221		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. <b>X</b>	2ND FRIDA' PRIMARY	Y PRE	- 2	2.	30 DA		POST-	3.		AMENDM REPORT?		Yes	No		<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	Ē	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No		<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2023					NG METHO				PAPER		<b>/</b>	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	code	REP		09	
								11		7	2023	(SEE INSTRUCTIONS FOR CODES)					
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YI	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		2 11	2	023	Т	0	3		27	2023						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$	_		105,8	323.35						
B. Total Monet	ary Contributions A	And Rec	eipts (From	Sche	dule	I)	\$				0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 105,823.35																	
D. Total Expenditures (From Schedule III) \$ 16,533.99																	
E. Ending Cash	Balance (Subtract	Line D	From Line (	C)			\$			89,2	89.36						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II	)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	)			\$		0.00					•			
				AFF	IDA	١٧٧	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign l	nere.	If thi	is is	a Car	ndidate re	eport, o	andi	date sig	ın here.					
I swear (or affirm) correct and complete	) that this report, incl ete.	uding the	e attached scl	nedule	s filed	d on	paper	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge a	and beli	ef , tr	ue.
Sworn to and subs	cribed before me this day of	;	20							S	ignature	of Perso	n Submit	ting Rep	ort		-
							- -					Prin	ted Name	e			-
My Commission Ex	Signatu pires	re										Ema	il				-
	мо	D	AY	YR			_		Are	ea Coc	le	Daytim	e Teleph	none Nu	mber		_
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	comm	ittee has n	ot viola	ted an	y provisi	ions of the	e act of J	une 3,19	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this										Si	ignature o	of Candid	ate			-
	day of 						_					Printe	d Name				-
	Signature						-										_
My Commission Exp	<del>-</del>											Ema	il				
	МО	D	AY	YR	1		•		Area Code Daytime Telephone Number					er	-		

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -							
Name of Filing Committee or Candidate	Reporting Period						
FARRY, FRANK FRIENDS OF	From:	<u>2/11/202</u>	<u>3</u> To:	<u>3/27/2023</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	J 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			\$	0.00			

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			From:			То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	•	•				-		DAGE TOTAL

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

0.00

## 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 Cand	idate		Rep	oorting P				
		Fro	From: T		To	):		
					DATE		АМ	OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
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:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	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 Candida	ate			Rep	orting Pe	riod			
				Froi	n:		То	:	
					D	ATE		AN	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	i <b>4</b> )					
Employer Name	•	•			Occupa	tion	•	•	
Employer Mailing Address/Principal Business	Place of		City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on So	chedule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	AGE 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	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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 <b>To:</b>	3/27/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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 Candid	ate		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting P	Period			
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (	Contributions De	etaile	ed				PAGE TOTAL 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	

				DATE			AMOUNT
<b>To Whom Paid</b> Committee to Elect Joseph DiGi	irolamo		мо	DAY	YEAR		
Mailing Address 3982 Grace	Ave		2	14	2023	\$	1,750.00
<b>City</b> Bensalem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19020	<b>Descrip</b> contrib	ition of Exp ution	l penditure		
<b>To Whom Paid</b> The S Club			МО	DAY	YEAR		
Mailing Address 2940 N 7th	Street		3	2	2023	\$	79.97
City Harrisburg State Zip Code (Plus 4) PA 17110			<b>Descrip</b> dining	tion of Exp	penditure		
<b>To Whom Paid</b> Cork and Fork		·	МО	DAY	YEAR		
Mailing Address 200 State S	treet		3	2	2023	\$	24.00
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	<b>Descrip</b> dining	tion of Exp	penditure		
To Whom Paid Giant Food Store		·	МО	DAY	YEAR		
Mailing Address 158 N. Flow	ers Mill Rd		3	2	2023	\$	32.02
<b>City</b> Langhorne	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19047	<b>Descrip</b> baskets	otion of Exp	penditure		
<b>To Whom Paid</b> Dollar Tree			МО	DAY	YEAR		
Mailing Address 1307 Lincoln	n Highway		3	2	2023	\$	53.00
<b>City</b> Levittown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19056	Description of Expenditure basket donations				

To Whom Paid											
To Whom Paid St. Ephrem Catholic Church				мо	DAY	YEAR					
Mailing Address 5400 Hulmeville Road				3	2	2023	\$		125.00		
<b>City</b> Bensalem		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19020		<b>Description of Expenditure</b> sponsorship						
To Whom Paid St. Ephrem Home & School Assn				МО	DAY	YEAR					
Mailing Address 5400 Hulmeville Road			3	2	2023	\$		200.00			
<b>City</b> Bensalem		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19020		scription of Expenditure onsorship						
To Whom Paid BCSHF				МО	DAY	YEAR					
Mailing Address 3113 E. Brighton Street			3	2	2023	\$		150.00			
<b>City</b> Furlong		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18925	Description of Expenditure advertising							
To Whom Paid Neshaminy Valley Music Theatre			МО	DAY	YEAR						
Mailing Address PO Box 131						\$					
Mailing Address	PO Box 131			3	2	2023	Description of Expenditure advertising				
Mailing Address  City Langhorne		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19047	Descrip	tion of Exp				100.00		
	3			Descrip	tion of Exp				100.00		
City Langhorne  To Whom Paid	3			<b>Descrip</b> advertis	otion of Exp	penditure	\$		1,000.00		
City Langhorne  To Whom Paid  Friends of Middlete	own PO Box 1235			Descrip advertis	DAY  3  ption of Exp	YEAR 2023	\$				
City Langhorne  To Whom Paid Friends of Middlete  Mailing Address	own PO Box 1235	PA	19047  Zip Code (Plus 4)	MO 3 Descrip	DAY  3  ption of Exp	YEAR 2023	\$				
To Whom Paid Friends of Middleto Mailing Address City Langhorne To Whom Paid	own PO Box 1235	PA  State PA	19047  Zip Code (Plus 4)	MO  3  Description  Contribution	DAY  3  btion of Expution	YEAR 2023 Denditure	\$				

To Whom Paid Conwell Egan Catholic High School				DAY	YEAR			
Conwent Egun Cuthone riight c	oci i oci							
Mailing Address 611 Wistar Road				24	2023	\$	200.00	
City Fairless Hills	State	Zip Code (Plus 4)	Descrip	ation of Ev	anditura			
rdiffess fills	PA	19030	Description of Expenditure  contribution					
	170 13030			Contribution				
To Whom Paid								
Tri County Band			МО	DAY	YEAR			
,								
Mailing Address 403 Elmw	ood Ave		3	24	2023	<b>\$</b>	120.00	
	Chaha	Zin Codo (Divo 4)						
<b>City</b> Feasterville	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	19053	adverti	ising				
To Whom Paid	'	<u>'</u>						
Team Chappy			МО	DAY	YEAR			
Mailing Address 459 Knoll	brook Dr		3	24	2023	\$	100.00	
City Langhorne	State	Zip Code (Plus 4)	Descrip	ation of Ev	l nondituro			
Langhorne	PA	19056	Description of Expenditure  contribution					
		19030	Contrib	ution				
To Whom Paid			мо	DAY	YEAR			
Bucks County Republican Co	mmittee		МО	DAT	TEAR			
Mailing Address 115 North Broad Street			3	15	2023	\$	12,500.00	
<b>City</b> Doylestown	State	Zip Code (Plus 4)	Description of Expenditure contribution					
Doylestown	PA	18901						
	17	10501	Contrib	40011				
							PAGE TOTAL	
Enter Grand Total of Expe	nditures on Page 1, Re	port Cover Page, Item D	).			   \$	16 522 62	
						<del>→</del>	16,533.99	