

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.X	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.	Year 2011	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	8	2011	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:	MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
	1	1	2011		5	2	2011			
A. Amount Brought Forward From Last Report				\$ 14,963.83						
B. Total Monetary Contributions And Receipts (From Schedule I)				\$ 250.00						
C. Total Funds Available (Sum Of Lines A and B)				\$ 15,213.83						
D. Total Expenditures (From Schedule III)				\$ 4,100.62						
E. Ending Cash Balance (Subtract Line D From Line C)				\$ 11,113.21						
F. Value Of In-Kind Contributions Received (From Schedule II)				\$ 3,000.00						
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>1/1/2011</u> To: <u>5/2/2011</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)	\$ 250.00
All Other Contributions (Part B)	\$ 0.00
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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 250.00
---	-----------

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 Candidate FARRY, FRANK FRIENDS OF	Reporting Period From: <u>1/1/2011</u> To: <u>5/2/2011</u>
DATE	
AMOUNT	

Full Name of Contributing Committee INDEPENDENCE BLUE CROSS PAC (IBC PAC)			MO	DAY	YEAR	\$ 250.00
Mailing Address 1901 MARKET STREET			1	18	2011	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103				

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

PAGE TOTAL
\$ 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:	To:

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

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

PAGE TOTAL
\$ 0.00

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	Reporting Period
	From: To:

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

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>1/1/2011</u> To: <u>5/2/2011</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)	\$ 3,000.00
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.)			\$ 3,000.00

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			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 FARRY, FRANK FRIENDS OF				Reporting Period From: <u>1/1/2011</u> To: <u>5/2/2011</u>			
---	--	--	--	--	--	--	--

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
FOUR LANES END, LLC							
Mailing Address 106 MAPLE AVENUE							\$ 3,000.00
City LANGHORNE	State PA	Zip Code(Plus 4) 19047		1	1	2011	
Employer of Contributor N/A				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
						RENT- JANUARY-MAY, 2011@ \$600/MO	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 3,000.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FARRY, FRANK FRIENDS OF	From <u>1/1/2011</u> To: <u>5/2/2011</u>

DATE				AMOUNT		
To Whom Paid UNITED STATES POSTAL SERVICE			MO	DAY	YEAR	\$ 60.00
Mailing Address			2	9	2011	
City	LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure PO BOX FEE		
To Whom Paid BEGLEY, CARLIN & MANDIO			MO	DAY	YEAR	\$ 287.54
Mailing Address 680 MIDDLETOWN BOULEVARD			2	9	2011	
City	LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure REIMBURSEMENT FOR EXPENSES		
To Whom Paid MIDDLETOWN ATHLETIC ASSN			MO	DAY	YEAR	\$ 275.00
Mailing Address 19 QUEST ROAD			3	7	2011	
City	LEVITTOWN	State PA	Zip Code (Plus 4) 19057	Description of Expenditure SPONSOR		
To Whom Paid LANGHORNE LIONS			MO	DAY	YEAR	\$ 100.00
Mailing Address 2151 E. LINCOLN HIGHWAY APR M-5			3	7	2011	
City	LEVITTOWN	State PA	Zip Code (Plus 4) 19056	Description of Expenditure AD		
To Whom Paid PA YOUTH CORRAL			MO	DAY	YEAR	\$ 50.00
Mailing Address 7910 RAMBLER ROAD			3	7	2011	
City	ELKINS PARL	State PA	Zip Code (Plus 4) 19027	Description of Expenditure AD		

To Whom Paid NESHAMINY VALLEY MUSIC THEATER			MO	DAY	YEAR	\$ 45.00
Mailing Address PO BOX 131			3	7	2011	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure AD			

To Whom Paid FEASTERVILLE BUSINESS ASSN			MO	DAY	YEAR	\$ 35.00
Mailing Address 67 BUCK ROAD			3	7	2011	
City FEASTERVILLE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure AD			

To Whom Paid BUCKS COUNTY CHAPTER SPORTS HALL OF FAME			MO	DAY	YEAR	\$ 75.00
Mailing Address PO BOX 41			3	7	2011	
City NEWTOWN	State PA	Zip Code (Plus 4) 18940	Description of Expenditure AD			

To Whom Paid MIDDLETOWN COMMUNITY FOUNDATION			MO	DAY	YEAR	\$ 100.00
Mailing Address ROUTE 413			3	7	2011	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure CHRISTMAS TREE			

To Whom Paid NESHAMINY WILDCATS ATHLETIC ASSN			MO	DAY	YEAR	\$ 300.00
Mailing Address PO BOX 227			3	7	2011	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure SPONSOR			

To Whom Paid AMERICAN RED CROSS LOWER BUCKS CHAPTER			MO	DAY	YEAR	\$ 250.00
Mailing Address			3	7	2011	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure BREAKFAST			

To Whom Paid FEASTERVILLE BUSINESS ASSN			MO	DAY	YEAR	\$ 55.00
Mailing Address 67 BUCK ROAD			3	14	2011	
City FEASTERVILLE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure DINNER			
To Whom Paid GALS LSAA SOFTBALL			MO	DAY	YEAR	\$ 225.00
Mailing Address 2024 OAKFORD AVENUE			3	14	2011	
City OAKFORD	State PA	Zip Code (Plus 4) 19053	Description of Expenditure SPONSOR			
To Whom Paid LAA			MO	DAY	YEAR	\$ 300.00
Mailing Address 275 HAMPTON DRIVE			3	14	2011	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure SPONSOR			
To Whom Paid LSAA			MO	DAY	YEAR	\$ 250.00
Mailing Address 511 HAZEL AVE			3	14	2011	
City FEASTERVILLE	State PA	Zip Code (Plus 4) 19053	Description of Expenditure SPONSOR			
To Whom Paid NHS IMB			MO	DAY	YEAR	\$ 50.00
Mailing Address 2001 OLD LINCOLN HWY			3	22	2011	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure AD			
To Whom Paid FITZPATRICK FOR CONGRESS			MO	DAY	YEAR	\$ 1,000.00
Mailing Address PO BOX 185			3	31	2011	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure CONTRIBUTION			

To Whom Paid FRIENDS OF GARY GAMBARDELLA			MO	DAY	YEAR	\$ 50.00
Mailing Address PO BOX 324			3	31	2011	
City PLUMSTEADVILLE	State PA	Zip Code (Plus 4) 18949	Description of Expenditure CONTRIBUTION			

To Whom Paid CURLYS CREATIONS, LLC			MO	DAY	YEAR	\$ 437.00
Mailing Address PO BOX 7047			4	19	2011	
City PENNDEL	State PA	Zip Code (Plus 4) 19047	Description of Expenditure CATERING			

To Whom Paid VOFM			MO	DAY	YEAR	\$ 120.00
Mailing Address 239 SUGARBERRY LANE			4	19	2011	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure AD			

To Whom Paid BEGLEY, CARLIN & MANDIO			MO	DAY	YEAR	\$ 36.08
Mailing Address 680 MIDDLETOWN BLVD.			4	19	2011	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure REIMBURSEMENT FOR EXPENSES			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 4,100.62

