

# 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>	2004233	<b>Report Filed By:</b>	CANDIDATE	1.	<b>COMMITTEE</b>	2.	X	<b>LOBBYIST</b>	3.
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Name of Filing Committee, Candidate or Lobbyist:  
Fraternal Order of Police Lodge 5 PAC Fund

Street Address:  
11630 Caroline Road

City: Philadelphia	State: PA	Zip Code: 19154
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<b>TYPE OF REPORT</b>	6th Tuesday Pre-Primary	1.	X	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	Amendment Report?	YES	NO	X
	6th Tuesday Pre-Election	4.		2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termination Report?	YES	NO	X
	Annual Report	7.		YEAR	2016						

Name of Office Sought by Candidate:	<b>DATE OF ELECTION</b>	District Number:	Office Code:	Party Code:	County Code:
	MO. DAY YEAR				51

<b>Summary of Receipts and Expenditures from:</b>	MO.	DAY	YEAR	To	MO.	DAY	YEAR	<b>FOR OFFICE USE ONLY</b>	
A. Amount Brought Forward From Last Report								\$ 19,445.78	
B. Total Monetary Contributions and Receipts (From Schedule I)								\$ 25,665.54	
C. Total Funds Available (Sum of Lines A and B)								\$ 45,111.32	
D. Total Expenditures (From Schedule III)								\$ 26,000.00	
E. Ending Cash Balance (Subtract Line D from Line C)								\$ 19,111.32	
F. Value of In-Kind Contributions Received (From Schedule II)								\$ -	
G. Unpaid Debts and Obligations (From Schedule IV)								\$ -	

**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, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

_____ day of _____ 20 _____	}	_____
Signature		Signature of Person Submitting Report
_____		_____
My commission expires		Printed Name
MO. DAY YEAR		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		Signature of Candidate
_____		_____
My commission expires		Printed Name
MO. DAY YEAR		Area Code Daytime Telephone Number

SCHEDULE I  
**Contributions And Receipts**

Detailed Summary Page

Name of Filing Committee or Candidate Fraternal Order of Police Lodge 5 PAC Fund	Reporting Period From _____ To _____
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<b>1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR</b>	
TOTAL for the Reporting Period (1)	\$ 15,365.54

<b>2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)</b>	
Contributions Received from Political Committees (Part A)	\$ -
All Other Contributions (Part B)	\$ 300.00
TOTAL for the Reporting Period (2)	\$ 300.00

<b>3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)</b>	
Contributions Received from Political Committees (Part C)	\$ -
All Other Contributions (Part D)	\$ -
TOTAL for the Reporting Period (3)	\$ 0

<b>4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)</b>	
TOTAL for the Reporting Period (4)	\$ 10,000.00

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	\$ 25,665.54
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## 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.)

Name of Filing Committee or Candidate Fraternal Order of Police Lodge 5 PAC Fund			Reporting Period From _____ To _____			
Full Name of Contributor Michael O. Shellenberger			MO. 3	DAY 3	YEAR 2016	\$ 200.00
Mailing Address 950 Cathedral Road						
City Philadelphia	State PA	Zip Code (Plus 4) 19128				
Full Name of Contributor Claudia Johnson			MO. 3	DAY 3	YEAR 2016	\$ 100.00
Mailing Address 511 S. 48th Street						
City Philadelphia	State PA	Zip Code (Plus 4) 19143				
Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.						<b>Part B Total</b> \$ 300.00

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 Fraternal Order of Police Lodge 5 PAC Fund				Reporting Period From _____ To _____			
Full Name Rafferty for AG				MO. 2	DAY 25	YEAR 2016	\$ 10,000.00
Mailing Address PO Box 11757							
City Harrisburg			State PA		Zip Code (Plus 4) 17108		
Receipt Description Void Check 1304							
Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.							<b>Part E Total</b> \$ 10,000.00

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 Fraternal Order of Police Lodge 5 PAC Fund	Reporting Period From _____ To _____
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ -

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ -

3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$ -

<b>TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD</b> (Add and enter amount totals from Boxes 1, 2 and 3; also enter this amount on Page 1, Report Cover Page, Item F.             )	\$ 0
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## SCHEDULE III

## Statement Of Expenditures

Name of Filing Committee or Candidate Fraternal Order of Police Lodge 5 PAC Fund			Reporting Period From _____ To _____			
To Whom Paid Friends of Darrell Clark			MO. 1	DAY 20	YEAR 2016	\$ 1,000.00
Mailing Address PO Box 60093						
City Philadelphia	State PA	Zip Code (Plus 4) 19102				
Description of Expenditure Contribution						
To Whom Paid Rafferty for AG			MO. 1	DAY 28	YEAR 2016	\$ 10,000.00
Mailing Address PO Box 11757						
City Harrisburg	State PA	Zip Code (Plus 4) 17108				
Description of Expenditure Contribution						
To Whom Paid Rafferty for AG			MO. 3	DAY 3	YEAR 2016	\$ 10,000.00
Mailing Address PO Box 11757						
City Harrisburg	State PA	Zip Code (Plus 4) 17108				
Description of Expenditure Contribution						
To Whom Paid Josh Shapiro for AG			MO. 3	DAY 5	YEAR 2016	\$ 5,000.00
Mailing Address PO Box 1238						
City Norristown	State PA	Zip Code (Plus 4) 19404				
Description of Expenditure Contribution						
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						Schedule III Total \$ 26,000.00

