Commonwealth of Pennsylvania

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:	2006327	Report Filed By:	CANDIDATE 1.	COMMITTEE 2. X	LOBBYIST 3.

Name of Filing Committee, Candidate or Lobbyist: W.E.S.T.R.U.M. PAC

Street Address: 1300 VIRGINIA DRIVE 1300 VIRGINIA DRIVE

City:	State:	Zip Code:
FT WASHINGTON	PA	19034

TYPE OF REPORT

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:	DATE OF ELECTION MO.	DAY	YEAR	District Number:	Office Code:	Party Code:	County Code:

Summary of Receipts and Expenditures from: MO. DAY YEAR To MO. DAY YEAR

FOR OFFICE USE ONLY

A. Amount Brought Forward From Last Report	$ 1,363.36
B. Total Monetary Contributions and Receipts (From Schedule I)	$ 750.00
C. Total Funds Available (Sum of Lines A and B)	$ 2,113.36
D. Total Expenditures (From Schedule III)	$ 475.98
E. Ending Cash Balance (Subtract Line D from Line C)	$ 1,637.38
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 of Person Submitting Report

Signature

Printed Name

My commission expires _____ 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 of Candidate

Signature

Printed Name

My commission expires _____ MO. DAY YEAR

Area Code Daytime Telephone Number

SCHEDULE I

Contributions And Receipts

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
W.E.S.T.R.U.M. PAC	From _____ To _____

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - $50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	$ -

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

3. CONTRIBUTIONS OVER $250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	$ -
All Other Contributions (Part D)	$ 500.00
TOTAL for the Reporting Period (3)	$ 500.00

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period (4)	$ -

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 Page 1, Report Cover Page, Item B.)	$ 750.00

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 Committe or Candidate	Reporting Period
W.E.S.T.R.U.M. PAC	From _____ To _____

Full Name of Contributor	MO.	DAY	YEAR	
Robert & Jennifer Irons	3	4	2016	$ 250.00

Mailing Address		
612 Covered Bridge Lane		
City	State	Zip Code (Plus 4)
Doylestown	PA	18901

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

Part B Total $ 250.00

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
W.E.S.T.R.U.M. PAC	From _____ To _____

Full Name of Contributor	MO.	DAY	YEAR	
Richard & Kimberley Forbes	3	4	2016	$ 500.00

Mailing Address		
509 Hays		
City: Lower Gwynedd	State: PA	Zip Code (Plus 4): 19002

Employer Name	Occupation

Employer Mailing Address/Principal Place of Business

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

Part D Total $ 500.00

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 Committe or Candidate	Reporting Period
W.E.S.T.R.U.M. PAC	From _____ To _____

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)	$ –

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2 and 3; also enter this amount on Page 1, Report Cover Page, Item F.	$ 0

SCHEDULE III

Statement Of Expenditures

Name of Filing Committe or Candidate	Reporting Period
W.E.S.T.R.U.M. PAC	From _____ To _____

To Whom Paid	MO.	DAY	YEAR	
Philadelphia Builders for Affordable Housing	2	10	2016	$ 200.00
Mailing Address: 1735 Market Street Suite 432A				
City: Philadelphia / State: PA / Zip Code (Plus 4): 19103				
Description of Expenditure: Fund Raiser				
To Whom Paid	MO.	DAY	YEAR	
Katie McGinty for Senate	2	18	2016	$ 250.00
Mailing Address: 30 South 17th Street				
City: Philadelphia / State: PA / Zip Code (Plus 4): 19103				
Description of Expenditure: Contribution				
To Whom Paid	MO.	DAY	YEAR	
Citizens Bank	1	6	2016	$ 12.99
Mailing Address:				
City: Philadelphia / State: PA / Zip Code (Plus 4):				
Description of Expenditure: Bank Fee				
To Whom Paid	MO.	DAY	YEAR	
Citizens Bank	2	3	2016	$ 12.99
Mailing Address:				
City: Philadelphia / State: PA / Zip Code (Plus 4):				
Description of Expenditure: Bank Fee				

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

Schedule III Total $ 475.98