

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:	2004233	Report Filed By:	CANDIDATE	1.	COMMITTEE	2.	X	LOBBYIST	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

TYPE OF REPORT	6th Tuesday Pre-Primary	1.	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	X	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			District Number:	Office Code:	Party Code:	County Code:
MO.	DAY	YEAR				
						51

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY
A. Amount Brought Forward From Last Report								\$ 5,006.24
B. Total Monetary Contributions and Receipts (From Schedule I)								\$ 7,762.12
C. Total Funds Available (Sum of Lines A and B)								\$ 12,768.36
D. Total Expenditures (From Schedule III)								\$ 4,023.40
E. Ending Cash Balance (Subtract Line D from Line C)								\$ 8,744.96
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 _____ MO. DAY YEAR	}	_____ Printed Name
		_____ 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 _____ MO. DAY YEAR	}	_____ Printed Name
		_____ 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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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 7,602.12

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)	\$ 160.00
TOTAL for the Reporting Period (2)	\$ 160.00

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

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.)	\$ 7,762.12
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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. 4	DAY 15	YEAR 2016	\$ 100.00
Mailing Address 950 Cathedral Road						
City Philadelphia	State PA	Zip Code (Plus 4) 19128				
Full Name of Contributor Claudia Johnson			MO. 4	DAY 15	YEAR 2016	\$ 60.00
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.						Part B Total \$ 160.00

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)	\$ -

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
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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 DePasquale for PA			MO. 4	DAY 13	YEAR 2016	\$ 500.00
Mailing Address PO Box 391						
City Harrisburg	State PA	Zip Code (Plus 4) 17108				
Description of Expenditure Contribution						
To Whom Paid Committee to Re-Elect John Taylor			MO. 4	DAY 13	YEAR 2016	\$ 500.00
Mailing Address 1600 Walnut Street						
City Philadelphia	State PA	Zip Code (Plus 4) 19103				
Description of Expenditure Contribution						
To Whom Paid PFCU PAC			MO. 4	DAY 21	YEAR 2016	\$ 600.00
Mailing Address 12800 Townend Rd						
City Philadelphia	State PA	Zip Code (Plus 4) 19154				
Description of Expenditure Contributions						
To Whom Paid Novak Francella LLC			MO. 4	DAY 22	YEAR 2016	\$ 1,062.50
Mailing Address One Presidential Blvd Ste 330						
City Bala Cynwyd	State PA	Zip Code (Plus 4) 19004				
Description of Expenditure Accounting fee						
To Whom Paid Mike Chitwood for Sheriff			MO. 4	DAY 22	YEAR 2016	\$ 1,000.00
Mailing Address PO Box 290344						
City Port Orange	State FL	Zip Code (Plus 4) 32129				
Description of Expenditure Contribution						
To Whom Paid LEHB			MO. 4	DAY 29	YEAR 2016	\$ 360.90
Mailing Address 2233 Spring Garden						
City Philadelphia	State PA	Zip Code (Plus 4) 19130				
Description of Expenditure Political campaign calls						

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

Schedule III Total

\$ 4,023.40

