

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Friends of Kerith

ADDRESS (number and street)

P.O. Box 280

Check if different than previously reported. (ACC)

Brookville

PA

15825

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00555458

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

PA

05

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

through

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ryan, Matt, , ,

Signature of Treasurer Ryan, Matt, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Friends of Kerith

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	10416.49	90238.56
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	10416.49	90238.56
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	3611.69	81099.38
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	3611.69	81099.38
8. Cash on Hand at Close of Reporting Period (from Line 27).....	18440.64	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Friends of Kerith

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5399.49	60200.56
(ii) Unitemized.....	3767.00	28641.00
(iii) TOTAL of contributions from individuals ▶	9166.49	88841.56
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1250.00	1250.00
(d) The Candidate.....	0.00	147.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	10416.49	90238.56
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	71.28
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	10416.49	90309.84

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	3611.69	81099.38
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	3611.69	81099.38

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	11635.84
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10416.49
25. SUBTOTAL (add Line 23 and Line 24).....	22052.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3611.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	18440.64

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 21
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Friends of Kerith

A. Full Name (Last, First, Middle Initial)
ActBlue
 Mailing Address 366 Summer St.
 City Somerville State MA Zip Code 02144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1839.76

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11AI.7301
 Amount of Each Receipt this Period
 376.94
 Memo Item

B. Full Name (Last, First, Middle Initial)
ActBlue
 Mailing Address 366 Summer St.
 City Somerville State MA Zip Code 02144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2237.31

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2016
Transaction ID : SA11AI.7420
 Amount of Each Receipt this Period
 397.55
 Memo Item

C. Full Name (Last, First, Middle Initial)
Albrecht, Judith, , ,
 Mailing Address 223 Elm St.
 City State College State PA Zip Code 16801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-employed Audiologist
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 09 / 2016
Transaction ID : SA11AI.7290
 Amount of Each Receipt this Period
 400.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1174.49
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 21	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Kerith

A. Full Name (Last, First, Middle Initial)
Barlow, Jesse, , ,

Mailing Address 1427 S. Pugh St.

City State College	State PA	Zip Code 16801
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FEC ID number of contributing federal political committee. **C**

Name of Employer Penn State University	Occupation Professor
---	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : SA11AI.7329

Amount of Each Receipt this Period
 _____ 50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Bonavita, Maryellen, , ,

Mailing Address 2319 Caldwell Corners Rd.

City Brookville	State PA	Zip Code 15825
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed	Occupation Chef
-----------------------------------	--------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 475.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2016

Transaction ID : SA11AI.7324

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Brendal, John, , ,

Mailing Address 1 Crestview Dr

City Lock Haven	State PA	Zip Code 17745
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Lock Haven Univ.	Occupation Professor
--------------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 19 / 2016

Transaction ID : SA11AI.7283

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 1150.00
TOTAL This Period (last page this line number only)..... ▶	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 21
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Kerith

A. Full Name (Last, First, Middle Initial)
Campbell, Mary Jo, , ,

Mailing Address 5431 Linden Ave.

City Edinboro State PA Zip Code 16412

FEC ID number of contributing federal political committee. **C**

Name of Employer Edinboro University Occupation Professor

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2016

Transaction ID : SA11AI.7316

Amount of Each Receipt this Period
 100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Eggleston, John, , ,

Mailing Address 411 4th Ave.

City Warren State PA Zip Code 16365

FEC ID number of contributing federal political committee. **C**

Name of Employer Warren County Occupation County Commissioner

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2016

Transaction ID : SA11AI.7297

Amount of Each Receipt this Period
 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Foster, Travis, , ,

Mailing Address 3291 Shellers Bnd
Unit 752

City State College State PA Zip Code 16801

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 07 / 2016

Transaction ID : SA11AI.7295

Amount of Each Receipt this Period
 25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **375.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 21	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Friends of Kerith

A. Full Name (Last, First, Middle Initial)
Foster, Travis, , ,

Mailing Address 3291 Shellers Bnd
Unit 752

City State College	State PA	Zip Code 16801
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 03 / 2016

Transaction ID : SA11AI.7294

Amount of Each Receipt this Period
 _____ 50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Gerg, Beth, Ammerman, ,

Mailing Address 347 Main St.

City Brookville	State PA	Zip Code 15825
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Attorney
-----------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2016

Transaction ID : SA11AI.7296

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Jackson, Lawrence, , ,

Mailing Address 1534 Follett Run Rd.

City Warren	State PA	Zip Code 16365
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation N/A
-------------------------	-------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2016

Transaction ID : SA11AI.7322

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 400.00
TOTAL This Period (last page this line number only)..... ▶	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 21
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Kerith

A. Full Name (Last, First, Middle Initial)
Miller, Judith, , ,
Mailing Address **77 S. Seventh Ave**

City **Clarion** State **PA** Zip Code **16214**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 26 / 2016

Transaction ID : **SA11AI.7298**

Amount of Each Receipt this Period
200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Nuernberger, Claudine, , ,
Mailing Address **439 Hillcrest Ave**

City **State College** State **PA** Zip Code **16803**

FEC ID number of contributing federal political committee. **C**

Name of Employer **N/A** Occupation **N/A**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 22 / 2016

Transaction ID : **SA11AI.7292**

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Purvis, Cynthia, , ,
Mailing Address **101 W. 34th St.**

City **Erie** State **PA** Zip Code **16508**

FEC ID number of contributing federal political committee. **C**

Name of Employer **N/A** Occupation **N/A**

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : **SA11AI.7334**

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **500.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 21
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Friends of Kerith

A. Full Name (Last, First, Middle Initial)
Purvis, Cynthia, , ,
 Mailing Address 101 W. 34th St.
 City Erie State PA Zip Code 16508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation N/A
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date **325.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11AI.7318
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Rhodes, Caroline, , ,
 Mailing Address 13050 Fox Hollow Dr.
 City Edinboro State PA Zip Code 16412
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2016
Transaction ID : SA11AI.7288
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Sawdy, Larry, , ,
 Mailing Address 623 Sommerheim Dr.
 City Erie State PA Zip Code 16505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date **235.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 06 / 2016
Transaction ID : SA11AI.7310
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **700.00**
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 21
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Kerith

A. Full Name (Last, First, Middle Initial)
Shepherd, Robert, , ,

Mailing Address 767 Beaver Branch Rd.

City Pennsylvania Furnace State PA Zip Code 16865

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **375.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 02 2016

Transaction ID : **SA11AI.7291**

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Sughrue, John, , ,

Mailing Address 225 E. Market St

City Clearfield State PA Zip Code 16830

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **400.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 26 2016

Transaction ID : **SA11AI.7291**

Amount of Each Receipt this Period
150.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Tabachnick, Rachel, , ,

Mailing Address 111 Grandview Ave.
Apt. 701

City Pittsburgh State PA Zip Code 15211

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **1500.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 19 2016

Transaction ID : **SA11AI.7289**

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **900.00**

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 21
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Kerith

A. Full Name (Last, First, Middle Initial)
Trevino, Daniel, , ,

Mailing Address 121 Blueberry Hill Ln.

City: Port Matilda State: PA Zip Code: 16870

FEC ID number of contributing federal political committee: **C**

Name of Employer: Retired Occupation: Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: **800.00**

Date of Receipt: 08 / 06 / 2016

Transaction ID : SA11AI.7306

Amount of Each Receipt this Period: **100.00**

Memo Item

B. Full Name (Last, First, Middle Initial)
Trevino, Daniel, , ,

Mailing Address 121 Blueberry Hill Ln.

City: Port Matilda State: PA Zip Code: 16870

FEC ID number of contributing federal political committee: **C**

Name of Employer: Retired Occupation: Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: **900.00**

Date of Receipt: 09 / 06 / 2016

Transaction ID : SA11AI.7312

Amount of Each Receipt this Period: **100.00**

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee: **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	200.00
TOTAL This Period (last page this line number only).....▶	5399.49

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 21	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Kerith

A. Full Name (Last, First, Middle Initial)
Clearfield Democratic Committee

Mailing Address 106 N. Second St

City: Clearfield State: PA Zip Code: 16830

FEC ID number of contributing federal political committee: **C**

Name of Employer: _____ Occupation: _____

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2016

Transaction ID : SA11C.7351

Amount of Each Receipt this Period
 _____ 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Democray for America

Mailing Address PO Box 1717

City: Burlington State: VT Zip Code: 05402

FEC ID number of contributing federal political committee: **C** C00370007

Name of Employer: _____ Occupation: _____

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2016

Transaction ID : SA11C.7349

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City: _____ State: _____ Zip Code: _____

FEC ID number of contributing federal political committee: **C**

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 1250.00
TOTAL This Period (last page this line number only)..... ▶	_____ 1250.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Kerith

Full Name (Last, First, Middle Initial) A. Diano, David, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2016	
Mailing Address 236 Cornerstone Dr.			FEC Identification Number C	
City Newtown Square	State PA	Zip Code 19073	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement VoterWeb		Category/ Type 001	Transaction ID : SB17.7271	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Diano, David, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016	
Mailing Address 236 Cornerstone Dr.			FEC Identification Number C	
City Newtown Square	State PA	Zip Code 19073	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement VoterWeb		Category/ Type 001	Transaction ID : SB17.7272	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Nationbuilder			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2016	
Mailing Address 520 S. Grand Ave			FEC Identification Number C	
City Los Angeles	State CA	Zip Code 90001	Amount of Each Disbursement this Period 59.00	
Purpose of Disbursement Web Services		Category/ Type 001	Transaction ID : SB17.7268	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	559.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 21			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Kerith

Full Name (Last, First, Middle Initial) A. Radel, Jennifer, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016		
Mailing Address 182 Tunnel Hill Rd.			FEC Identification Number C		
City Brookville	State PA	Zip Code 15825	Amount of Each Disbursement this Period 320.00		
Purpose of Disbursement Payroll		Category/ Type 001	Transaction ID : SB17.7273		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Radel, Jennifer, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2016		
Mailing Address 182 Tunnel Hill Rd.			FEC Identification Number C		
City Brookville	State PA	Zip Code 15825	Amount of Each Disbursement this Period 320.00		
Purpose of Disbursement Payroll		Category/ Type 001	Transaction ID : SB17.7274		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Radel, Jennifer, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2016		
Mailing Address 182 Tunnel Hill Rd.			FEC Identification Number C		
City Brookville	State PA	Zip Code 15825	Amount of Each Disbursement this Period 364.00		
Purpose of Disbursement Payroll		Category/ Type 001	Transaction ID : SB17.7278		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1004.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 21			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Kerith

Full Name (Last, First, Middle Initial) A. Radel, Jennifer, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2016		
Mailing Address 182 Tunnel Hill Rd.			FEC Identification Number C		
City Brookville	State PA	Zip Code 15825	Amount of Each Disbursement this Period 392.00		
Purpose of Disbursement Payroll		Category/ Type 001	Transaction ID : SB17.7279		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Radel, Jennifer, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2016		
Mailing Address 182 Tunnel Hill Rd.			FEC Identification Number C		
City Brookville	State PA	Zip Code 15825	Amount of Each Disbursement this Period 304.00		
Purpose of Disbursement Payroll		Category/ Type 001	Transaction ID : SB17.7275		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Radel, Jennifer, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2016		
Mailing Address 182 Tunnel Hill Rd.			FEC Identification Number C		
City Brookville	State PA	Zip Code 15825	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Payroll		Category/ Type 001	Transaction ID : SB17.7280		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	996.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 21	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Kerith

Full Name (Last, First, Middle Initial) A. Radel, Jennifer, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2016	
Mailing Address 182 Tunnel Hill Rd.			FEC Identification Number C	
City Brookville	State PA	Zip Code 15825	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Payroll		Category/ Type 001	Transaction ID : SB17.7276	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Radel, Jennifer, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2016	
Mailing Address 182 Tunnel Hill Rd.			FEC Identification Number C	
City Brookville	State PA	Zip Code 15825	Amount of Each Disbursement this Period 38.25	
Purpose of Disbursement Payroll		Category/ Type 001	Transaction ID : SB17.7282	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. USPS			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016	
Mailing Address White St.			FEC Identification Number C	
City Brookville	State PA	Zip Code 15825	Amount of Each Disbursement this Period 47.00	
Purpose of Disbursement Postage		Category/ Type 003	Transaction ID : SB17.7270	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	585.25
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 21			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Kerith

Full Name (Last, First, Middle Initial) A. USPS			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016		
Mailing Address White St.			FEC Identification Number C		
City Brookville	State PA	Zip Code 15825	Amount of Each Disbursement this Period 200.00		
Purpose of Disbursement MoneyOrder - filing fee		Category/ Type 001	Transaction ID : SB17.7281		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. USPS			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2016		
Mailing Address White St.			FEC Identification Number C		
City Brookville	State PA	Zip Code 15825	Amount of Each Disbursement this Period 47.00		
Purpose of Disbursement Postage		Category/ Type 003	Transaction ID : SB17.7269		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	247.00
TOTAL This Period (last page this line number only).....▶	3391.25

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Friends of Kerith

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Agovino, Joseph, , ,			Nature of Debt (Purpose): Payroll
Mailing Address 388 Twin Lane South			
City Wantaugh	State NY	Zip Code 11793	

Outstanding Balance Beginning This Period 1600.00		Transaction ID : SD10.7125	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1600.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Agovino, Joseph, , ,			Nature of Debt (Purpose): Payroll
Mailing Address 388 Twin Lane South			
City Wantaugh	State NY	Zip Code 11793	

Outstanding Balance Beginning This Period 1600.00		Transaction ID : SD10.7126	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1600.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Agovino, Joseph, , ,			Nature of Debt (Purpose): Payroll
Mailing Address 388 Twin Lane South			
City Wantaugh	State NY	Zip Code 11793	

Outstanding Balance Beginning This Period 1600.00		Transaction ID : SD10.7127	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1600.00	

1) SUBTOTALS This Period This Page (optional)	▶	4800.00
2) TOTALS This Period (last page this line number only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Friends of Kerith

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Agovino, Joseph, , ,			Nature of Debt (Purpose): Payroll
Mailing Address 388 Twin Lane South			
City Wantaugh	State NY	Zip Code 11793	

Outstanding Balance Beginning This Period <input type="text" value="1600.00"/>		Transaction ID : SD10.7128	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1600.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Agovino, Joseph, , ,			Nature of Debt (Purpose): Payroll
Mailing Address 388 Twin Lane South			
City Wantaugh	State NY	Zip Code 11793	

Outstanding Balance Beginning This Period <input type="text" value="1600.00"/>		Transaction ID : SD10.7129	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1600.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Agovino, Joseph, , ,			Nature of Debt (Purpose): Payment
Mailing Address 388 Twin Lane South			
City Wantaugh	State NY	Zip Code 11793	

Outstanding Balance Beginning This Period <input type="text" value="-8000.00"/>		Transaction ID : SD10.7149	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="-8000.00"/>	

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="-4800.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
Friends of Kerith

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Moser, Michael, , ,			Nature of Debt (Purpose): Salary (4/4)
Mailing Address 2006 Carlton Dr.			
City Lebanon	State PA	Zip Code 17042	

Outstanding Balance Beginning This Period -500.00		Transaction ID : SD10.4815	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period -500.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Moser, Michael, , ,			Nature of Debt (Purpose): Salary (4/18)
Mailing Address 2006 Carlton Dr.			
City Lebanon	State PA	Zip Code 17042	

Outstanding Balance Beginning This Period -1000.00		Transaction ID : SD10.4816	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period -1000.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Moser, Michael, , ,			Nature of Debt (Purpose): Salary (5/30)
Mailing Address 2006 Carlton Dr.			
City Lebanon	State PA	Zip Code 17042	

Outstanding Balance Beginning This Period 1500.00		Transaction ID : SD10.4819	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00	

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	