

# 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

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
01 / 01 / 2018

through

M M / D D / Y Y Y Y  
03 / 31 / 2018

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  
04 / 15 / 2018

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

FEC FORM 3  
(Revised 05/2016)

**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
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	6330.00	105545.61
(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)).....	6330.00	105545.61
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	7382.17	83756.49
(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)).....	7382.17	83756.49
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	7355.87	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	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).....	4450.00	70537.08
(ii) Unitemized .....	1880.00	32861.53
(iii) TOTAL of contributions from individuals .....	6330.00	103398.61
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2000.00
(d) The Candidate .....	0.00	147.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6330.00	105545.61
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. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	6330.00	105616.89

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 14

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	7382.17	83756.49
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	7382.17	83756.49

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	8408.04
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6330.00
25. SUBTOTAL (add Line 23 and Line 24).....	14738.04
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	7382.17
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	7355.87

**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 14  
(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)  
**Barlow, Jesse, , ,**

Mailing Address 1427 S. Pugh St.

City State College State PA Zip Code 16801

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

Name of Employer Penn State University Occupation Professor

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 30 2018

**Transaction ID : SA11AI.7716**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 200.00

Memo Item  
Donation

**B.** Full Name (Last, First, Middle Initial)  
**Briscoe, Forrest, , ,**

Mailing Address 1345 Old Boalsburgh Rd

City State College State PA Zip Code 16801

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

Name of Employer Penn State Univ Occupation Professor

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 03 2018

**Transaction ID : SA11AI.7709**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 500.00

Memo Item  
Donation

**C.** Full Name (Last, First, Middle Initial)  
**Fonash, Stephen, , ,**

Mailing Address 1207 N Inverary Pl

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: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 02 2018

**Transaction ID : SA11AI.7706**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

Memo Item  
Donation

**SUBTOTAL** of Receipts This Page (optional)..... ▶ \_\_\_\_\_ 1700.00

**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 6 OF 14  
(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)  
Greenberg, Amy, , ,  
Mailing Address 318 Hill Dr  
City State College State PA Zip Code 16801  
FEC ID number of contributing federal political committee. C  
Name of Employer Penn State Univ Occupation Professor  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 03 / 2018  
Transaction ID : SA11AI.7713  
Amount of Each Receipt this Period  
250.00  
 Memo Item  
Donation

**B.** Full Name (Last, First, Middle Initial)  
Leong, Elizabeth, , ,  
Mailing Address 782 Walnut Spring Ln  
City State College State PA Zip Code 16801  
FEC ID number of contributing federal political committee. C  
Name of Employer Robinson & Cole LLP Occupation Attorney  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 420.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 05 / 2018  
Transaction ID : SA11AI.7712  
Amount of Each Receipt this Period  
420.00  
 Memo Item  
Donation

**C.** Full Name (Last, First, Middle Initial)  
Moore, Linda, , ,  
Mailing Address 1332 Spruce Hill Rd.  
City Rockton State PA Zip Code 15856  
FEC ID number of contributing federal political committee. C  
Name of Employer Self Occupation Self  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 02 / 2018  
Transaction ID : SA11AI.7705  
Amount of Each Receipt this Period  
1000.00  
 Memo Item  
Donation

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 1500.00  
**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 14  
(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)  
**Rossiter, Georgia, , ,**

Mailing Address PO Box 527

City Winchester State VA Zip Code 22604

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 06 / 2018

Transaction ID : SA11AI.7711

Amount of Each Receipt this Period  
250.00

Memo Item  
Donation

**B.** Full Name (Last, First, Middle Initial)  
**Tabachnick, Ritchie, , ,**

Mailing Address 111 Grandview Ave.

City Pittsburgh State PA Zip Code 15211

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

Name of Employer Equipment & Controls Africa Occupation President

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 02 / 2018

Transaction ID : SA11AI.7708

Amount of Each Receipt this Period  
1000.00

Memo Item  
Donation

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4450.00

**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 8 OF 14	
	<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) <b>A. Fisher, Erin, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2018	
Mailing Address 340 Main St			FEC Identification Number C	
City Brookville	State PA	Zip Code 15825	Amount of Each Disbursement this Period 250.00	
Purpose of Disbursement Staff		Category/ Type 001	Transaction ID : SB17.7694	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Fisher, Erin, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018	
Mailing Address 340 Main St			FEC Identification Number C	
City Brookville	State PA	Zip Code 15825	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Staff		Category/ Type 001	Transaction ID : SB17.7703	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Gregg, Dianne, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018	
Mailing Address 148 Rock Hill Rd.			FEC Identification Number C	
City Centre Hall	State PA	Zip Code 16828	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Staff - consultant		Category/ Type 001	Transaction ID : SB17.7702	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2250.00
<b>TOTAL</b> 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 9 OF 14			
	<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) <b>A. Lembeck, David, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018		
Mailing Address 825 S Sparks St			FEC Identification Number C		
City State College	State PA	Zip Code 16801	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Staff - consultant		Category/ Type 001	Transaction ID : SB17.7701		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Nationbuilder</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2018		
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 Website		Category/ Type 001	Transaction ID : SB17.7686		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Nationbuilder</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2018		
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 Website		Category/ Type 001	Transaction ID : SB17.7687		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1118.00
<b>TOTAL</b> 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 10 OF 14			
	<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) <b>A. Nationbuilder</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2018		
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 Website		Category/ Type 001	Transaction ID : SB17.7688		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Pennsylvania Democratic Party</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 12 / 2018		
Mailing Address POBox 22356			FEC Identification Number C		
City Philadelphia	State PA	Zip Code 19110	Amount of Each Disbursement this Period 2800.00		
Purpose of Disbursement GOTV Contact list		Category/ Type 003	Transaction ID : SB17.7689		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Pressley, Jenna, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2018		
Mailing Address 340 Main St			FEC Identification Number C		
City Brookville	State PA	Zip Code 15825	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement Staff assistance		Category/ Type 001	Transaction ID : SB17.7691		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3109.00
<b>TOTAL</b> 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 11 OF 14			
	<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) <b>A. Pressley, Jenna, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 02 / 23 / 2018		
Mailing Address 340 Main St			FEC Identification Number C		
City Brookville	State PA	Zip Code 15825	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Staff		Category/ Type 001	Transaction ID : SB17.7704		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Radone, Edit, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2018		
Mailing Address 130 Patrick Circle			FEC Identification Number C		
City State College	State PA	Zip Code 16801	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement Staff		Category/ Type 001	Transaction ID : SB17.7693		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C.</b>			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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	7227.00

**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 <b>Agovino, Joseph, , ,</b>			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 : <b>SD10.7125</b>	
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 <b>Agovino, Joseph, , ,</b>			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 : <b>SD10.7126</b>	
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 <b>Agovino, Joseph, , ,</b>			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 : <b>SD10.7127</b>	
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"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="4800.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> 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 <b>Agovino, Joseph, , ,</b>			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 : <b>SD10.7128</b>	
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 <b>Agovino, Joseph, , ,</b>			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 : <b>SD10.7129</b>	
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 <b>Agovino, Joseph, , ,</b>			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 : <b>SD10.7149</b>	
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) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="- 4800.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> 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 <b>Moser, Michael, , ,</b>			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 <b>Moser, Michael, , ,</b>			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 <b>Moser, Michael, , ,</b>			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) <b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	0.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	