

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: <input type="checkbox"/>		Report Filed By: <input type="checkbox"/>		CANDIDATE ^{1.}		COMMITTEE ^{2.}		LOBBYIST ^{3.}			
Name of Filing Committee, Candidate or Lobbyist: <u>Friends of Slobhan "Sam" Bennett</u>											
Street Address: <u>25 South 15th Street</u>											
City: <u>Allentown</u>					State: <u>PA</u>		Zip Code: <u>18102</u>				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY ^{1.}	2ND FRIDAY PRE-PRIMARY ^{2.}	30 DAY POST PRIMARY ^{3.}		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>						
	6TH TUESDAY PRE-ELECTION ^{4.}	2ND FRIDAY PRE-ELECTION ^{5.}	30 DAY POST ELECTION ^{6.}		TERMINATION REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>						
	ANNUAL REPORT ^{7.}	YEAR <input type="checkbox"/>		FILING METHOD <input type="checkbox"/> CHECK ONE		PAPER <input type="checkbox"/>		DISKETTE <input type="checkbox"/>			
Name of Office Sought by Candidate:					DATE OF ELECTION		District Number	Office Code	Party Code	County Code	
					MO.	DAY	YEAR				
					<u>11</u>	<u>8</u>	<u>2017</u>				
					(SEE INSTRUCTIONS FOR CODES)						
Summary of Receipts and Expenditures from:					MO.	DAY	YEAR	FOR OFFICE USE ONLY			
					<u>1</u>	<u>1</u>	<u>2016</u>				
					To	MO.	DAY	YEAR			
						<u>4</u>	<u>11</u>	<u>2016</u>			
A. Amount Brought Forward From Last Report					\$						
B. Total Monetary Contributions and Receipts (From Schedule I)					\$						
C. Total Funds Available (Sum of Lines A and B)					\$						
D. Total Expenditures (From Schedule II)					\$						
E. Ending Cash Balance (Subtract Line D from Line C)					\$						
F. Value of In-Kind Contributions Received (From Schedule II)					\$						
G. Unpaid Debts and Obligations (From Schedule IV)					\$		<u>86,803.92</u>				

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

My commission expires _____ MO. _____ DAY _____ YR.

Signature of Person Submitting Report
Richard V. Leonzi
Printed Name
610 390 4524
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

My commission expires _____ MO. _____ DAY _____ YR.

Signature of Candidate
Slobhan "Sam" Bennett
Printed Name
484 560-2810
Area Code Daytime Telephone Number

Department of State • Bureau of Commissions, Elections and Legislation
 210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Name of Filing Committee or Candidate <i>Friends of Siobhan "Sam" Bennett</i>	Reporting Period From <i>1/1/16</i> To <i>4/1/16</i>
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Name of Creditor <i>Siobhan L. Bennett + Martin Estrada</i>		Outstanding Balance of Debt \$ 10,000.00		
Mailing Address <i>25 S. 15th Street</i>	DATE DEBT INCURRED	MO.	DAY	YEAR
City <i>ALLentown, PA</i>		<i>12</i>	<i>1</i>	<i>2015</i>
Description of Debt <i>CAMPAIGN LOAN</i>		State <i>PA</i>	Zip Code (Plus 4) <i>18102</i>	

Name of Creditor <i>Siobhan L. Bennett + Martin Estrada</i>		Outstanding Balance of Debt \$ 10,000.00		
Mailing Address <i>25 S. 15th Street</i>	DATE DEBT INCURRED	MO.	DAY	YEAR
City <i>ALLentown</i>		<i>12</i>	<i>1</i>	<i>2015</i>
Description of Debt <i>CAMPAIGN LOAN</i>		State <i>PA</i>	Zip Code (Plus 4) <i>18102</i>	

Name of Creditor <i>Martin Estrada + Siobhan L. Bennett</i>		Outstanding Balance of Debt \$ 10,000.00		
Mailing Address <i>25 S. 15th Street</i>	DATE DEBT INCURRED	MO.	DAY	YEAR
City <i>ALLentown.</i>		<i>11</i>	<i>6</i>	<i>2013</i>
Description of Debt <i>CAMPAIGN LOAN</i>		State <i>PA</i>	Zip Code (Plus 4) <i>18102</i>	

Name of Creditor <i>Martin Estrada + Siobhan L. Bennett</i>		Outstanding Balance of Debt \$ 24,524.00		
Mailing Address <i>25 S. 15th Street</i>	DATE DEBT INCURRED	MO.	DAY	YEAR
City <i>ALLentown</i>		<i>4</i>	<i>30</i>	<i>2000</i>
Description of Debt <i>CAMPAIGN LOAN</i>		State <i>PA</i>	Zip Code (Plus 4) <i>18102</i>	

Name of Creditor <i>Siobhan L. Bennett</i>		Outstanding Balance of Debt \$ 13,253.92		
Mailing Address <i>25 S. 15th Street</i>	DATE DEBT INCURRED	MO.	DAY	YEAR
City <i>ALLentown</i>		<i>4</i>	<i>30</i>	<i>2000</i>
Description of Debt <i>CAMPAIGN LOAN</i>		State <i>PA</i>	Zip Code (Plus 4) <i>18102</i>	

Name of Creditor <i>Siobhan Bennett</i>		Outstanding Balance of Debt \$ 3,200.00		
Mailing Address <i>25 S. 15th Street</i>	DATE DEBT INCURRED	MO.	DAY	YEAR
City <i>ALLintown, PA</i>		<i>6</i>	<i>9</i>	<i>2005</i>
Description of Debt <i>CAMPAIGN LOAN</i>		State <i>PA</i>	Zip Code (Plus 4) <i>18102</i>	

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

PAGE TOTAL
\$ 70,977.92

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Name of Filing Committee or Candidate <i>Friends of Siobhan "Sam" Bennett</i>	Reporting Period From <i>1/1/16</i> To <i>4/1/16</i>
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Name of Creditor <i>Siobhan Bennett</i>		Outstanding Balance of Debt <i>\$ 3,000.00</i>		
Mailing Address <i>25 S. 15th Street</i>	DATE DEBT INCURRED	MO.	DAY	YEAR
City <i>Allentown</i>		<i>12</i>	<i>11</i>	<i>2000</i>
Description of Debt <i>Campaign Loan</i>		State <i>PA</i>	Zip Code (Plus 4) <i>18102</i>	

Name of Creditor <i>Siobhan Bennett</i>		Outstanding Balance of Debt <i>\$ 326.00</i>		
Mailing Address <i>25 S. 15th Street</i>	DATE DEBT INCURRED	MO.	DAY	YEAR
City <i>Allentown</i>		<i>7</i>	<i>11</i>	<i>2005</i>
Description of Debt <i>Campaign Loan</i>		State <i>PA</i>	Zip Code (Plus 4) <i>18102</i>	

Name of Creditor <i>Siobhan Bennett</i>		Outstanding Balance of Debt <i>\$ 12,500.00</i>		
Mailing Address <i>25 S. 15th Street</i>	DATE DEBT INCURRED	MO.	DAY	YEAR
City <i>Allentown, PA</i>		<i>12</i>	<i>30</i>	<i>2007</i>
Description of Debt <i>Campaign Loan</i>		State <i>PA</i>	Zip Code (Plus 4) <i>18102</i>	

Name of Creditor		Outstanding Balance of Debt <i>\$</i>		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR
City				
Description of Debt		State	Zip Code (Plus 4)	

Name of Creditor		Outstanding Balance of Debt <i>\$</i>		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR
City				
Description of Debt		State	Zip Code (Plus 4)	

Name of Creditor		Outstanding Balance of Debt <i>\$</i>		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR
City				
Description of Debt		State	Zip Code (Plus 4)	

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.	PAGE TOTAL <i>\$ 15,826.00</i>
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