Commonwealth of Pennsylvania - Campaign Finance Report (Note: This report must be clear and legible, it should be typed)

Filer Identification	(Note: 11	Repo	rt Filed B	Sy Candida	_	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Committee	-	Lob	byist
Number Name of Filing Committee, Car	adidata ar	(Mar	k X)							3,485
Lobbyist	ididate or	Steven	Todd							
Street Address		629 Bu	llfrog Vall	ey Road						
City Hummelst	own			State	PA		Zip Code	17036-9743	•	MATE AND
Type of Report (Place x under r	eport type)									
1-6 th Tuesday 2- 2 nd Friday	3- 30 Day Post	4- 6 th 1	uesday	5- 2 nd Friday	6- 30 D	ay Post	7- Annual	Special 2 nd Frid	day Spe	cial 30 Day
Pre-Primary Pre-Primary	Primary	Pre- El	ection	Pre- Election	Election	1		Pre-Election	Pos	t-Election
				X						
Date Of Election (MM/DD/YYYY)	11/03/2015	Year		2015	Amend Report	ment		Termination Report		
Summary of Receipts and	From Date	Kijiigiša. Lija	To Date					Office Use Only		
Expenditures								Office Ose Office		
	June 9, 2015		Oc	t 19, 2015						
A. Amount Brought Forward F			:	1,952.11				: · .		
B, Total Monetary Contributio (From Schedule I)	ns and Receipts	s \$ 1,285		1,285						
C. Total Funds Available (Sum of Lines A and B) D. Total Expenditures		\$:	3,237.11					13 C)	
		111-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1								
(From Schedule III)		3,257.99		3,257.99					TO IN	
E. Ending Cash Balance (Subtract Line D from Line C)		\$		-20.88				5 - 1 D-11	və Və	Tarinet.
F. Value of In-Kind Contributio (From Schedule II)	ns Received	\$		93.5					υĭ	
G. Unpaid Debts and Obligatio (From Schedule IV)	ns	\$		0						S
				Affidavit Se						ANI.
Part 1- If this is a Committee report swear (or affirm) that this report,							dge and helieft	rue correct and co	mnlete	2 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
Sworn to and subscribed before m			,	ii papai, ia ca dia	0	7	sge und benen .			OF PENNSYLVANI ial Seal n, Notary Public o, Dauphin County pires Nov. 16, 2016 ssociation of Notars
20th day of October	20 <i>. 15</i>	_	٠,	يسرو		le-	1	-124	J.	OF PENIN ial Seal n., Notary o, Dauphires Nov.
Quita Jesephson	g ~ mark	_	<u> </u> -	St	S even Todd	ignature	of Person Subr	nitting report ([
S ignature			٠, ١				Printed Nan	ne		COMMONWEALTH Notar Erika Josephso Hummelstown Bo My Commission E
My Commission expires //	10 2016	<u></u>		71	.7		534	-0695		John Trika
M0.	DAY YR.			,	Area Code		Da	ytime Telephone N	lumber	MH Hur My C
Part II- If this is a report of a Candid									**	Ž
I swear (or affirm) that to the best amended.	of my knowledge	and beli	ef this po	litical committee	has not vio	olated an	y provisions of	the Act of June 3, 1	1937 (P.L. 1	333, NO.320) as
Sworn to and subscribed before m	e this									
day of	20									
,				<u> </u>		Sig	nature of Cand	idate		
Signature			_			Printed Name				
My Commission expires		-		_						
MO,	DAY YR.				Area Code		Day	time Telephone Nu	umber	
1										

SCHEDULE I

Contributions and Receipts

Detailed Summary Page

Filer Identification Number Steven Tod	d		

4114		
1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor		
Total for the reporting period	(1)	\$ 135
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)		
Contributions Received from Political Committees (Part A)		\$ o
All Other Contributions (Part B)		\$ 550
Total for the reporting period	(2)	\$ 685
3. Contributions Over \$250.00 (From Part C and Part D)		
Contributions Received from Political Committees (Part C)		\$ 600
All Other Contributions (Part D)		\$ o
Total for the reporting period	(3)	\$ 600
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)		
Total for the reporting period	(4)	\$ o
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, Rep Cover Page, Item B)	ort	\$ 1,285

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Frier identification number:				
Full Name of Contributor	Victor Pi	eracchia	Date [MM/DD/YYYY] \$	
House # 359 Street A	Agura .	Road	Date [MM/DD/YYYY] \$	100-00
Hershen	State PA	77033-	Date [MM/DD/YYYY] \$	
Full Name of Contributor	Richard+	Mary Syminski	Date [MM/DD/YYYY] \$	250.00
House # 764 Street A	Address Pine	Tree Road	Date MM/0D/YYYY] \$	
chy Hunnels	town state PA	219 Code)7036	Date [MM/DD/YYYY] \$	
Full Name of Contributor	nward + Mar	y ann Gregory	Date [MM/DD/YYYY] \$	100.00
House # 320 Street A	2500/2500000000000000000000000000000000	Hill Rd	Date [MM/0D/YYYY] \$	
Hunnels	ton State PA	Zip Code 17-036	Date [MM/DD/YYYY] \$	
Full Name of Contributor		verill	Date [MM/DD/YYYY] \$	100.00
House # 134 Street A	iddress	Ave	Date [MM/Db/YYYY] \$	
my Hershe	y State PA	2ip Codé 17033	Date [WM/DD/YYYY] 5	
Full Name of Contributor			Date [MM/DD/YYYY] \$	
House # Street A	ddress		Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Contributor			Date [MM/DD/YYYY] \$	
House # Street A	ddress		Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	

PART C

Contributions Received From Political Committees

Over \$250.00

Use this Part to itemize only contributions received from Political Committees with an aggregate value over \$250.00 in the reporting period.

Filer Identification Number:

Full Name of Contributing Com	mittae			Date [MM/DD/YYYY]	S	
contributing com	Derry Townshi	p vemocratic Com	mittee (Chair's Address listed)	Sept 20, 2015		600
House #	Street Address			Date [MM/DD/YYYY]	S	
629	Bı	ulifrog Valley Road				
City	Control Cont	State	Zip Code	Date [MM/DD/YYYY]	S	
Hummelsto	wn	PA	17036-9743		٦	
Full Name of		- COURT OF THE PROPERTY OF THE		Date [MM/DD/YYYY]	\$	
Contributing Com	mittee					
House#	Street Address			Date [MM/DD/YYYY]	\$	

City		State	Zip Code	Date [MM/DD/YYYY]	\$	
			•			
Full Name of	72			Date [MM/DD/YYYY]	\$	
Contributing Com	mittee					
House #	Street Address			Date [MM/DD/YYYY]	5	
	33,551,744,65					
City		State	Zip Code	Date [MM/DD/YYYY]	Silvato Vingata	
		State	ZID CODE	Date [MM/DD/1111]	\$	
Full Name of				Date [MM/DD/YYYY]	S	
Contributing Com	mittee				1	
House#	Street Address			Date [MM/DD/YYYY]	5	
110036 11	Street Address			Spare (MIM/SD/15188)	1	
		I San				
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of				Date [MM/DD/YYYY)	S	- Alexander
Contributing Com	mittee			Date (MM) DD/ 1111		
House #		M ************************************				
House #	Street Address			Date [MM/DD/YYYY]	\$	
			10000-0000-000000000000000000000000000			
City		State	Zip Code	Date [MM/DD/YYYY]	5	
Full Name of Contributing Com	mittee			Date [MM/DD/YYYY]	\$	

House #	Street Address			Date [MM/DD/YYYY]	S	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECIEVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD DETAILED SUMMARY PAGE

Filer Identification Number: Steven Todd					
UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$5	50,00 O	R LESS PER CONTRIBUTOR			
TOTAL for the reporting period (1)	\$ 0				
2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250).00 (FF	OM PART F)			
TOTAL for the reporting period (2)	\$	93.5			
3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FRO	M PAR	T-G)			
TOTAL for the reporting period (3)	\$	0			
TOTAL VALUE OF IN WAID CONTRIBUTIONS DURING THE REPORTING	. 1.5.				
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from boxes 1, 2, and 3; also enter	\$				
on Page 1, Report Cover Page, Item F)	1 1	93.5			

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

Filer Identification Number:						
Full Name of Contributor	ann	Conc	Date [MM/DD/YYYY] \$	9750		
neveral		7644	9/27/2015	93.50		
House # 2125 Stre	eet Address a State	Searer Ley Way	Date [MM/bD/YYYY] \$			
City Human	State	PA Zip Code 1703	Date [MM/DD/YYYY] \$	PHYSIAN		
Description of Contribution	TOTAL MARKA MARKANING AND		<i>Z</i> '			
		neet + Greet	Vx bevier			
Full Name of Contributor			Date [MM/DD/YYYY] \$	· · · · · · · · · · · · · · · · · · ·		
House # Stre	eet Address		Date [MM/DD/YYYY] \$			
City	State	Zip Code	Date [MM/DD/YYYY] \$	WHA 4.		
Description of Contributio	in j					
Full Name of Contributor			Date [MM/DD/YYYY] \$			
House # Stre	eet Address	- Washington - Was	Date [MM/DD/YYYY] \$			
City	State	Zip Code	Date [MM/DD/YYYY] \$			
Description of Contributio	in [
Full Name of Contributor			Date [MM/DD/YYYY] \$			
House # Stre	eet Address		Date [MM/DD/YYYY] \$			
City	State	Zip Code	Date [MM/DD/YYYY] \$			
			Date Imm Dat 1131			
Description of Contribution						
Full Name of Contributor			Date [MM/DD/YYYY] \$			
House # Stre	eet Address		Date [MM/DD/YYYY] \$			
City	State	Zip Code	Date [MM/DD/YYYY] \$			
Description of Contribution	n I					

(For October Rpt)

Statement of Expenditures

Filer Identification Number:					

To Whom Paid	Date [MM/DD/YYYY] \$
Staples Store 1240	(e/11/15 27.33)
House # 710 Street Address West Chocolate Ave	Description of Expenditure
City State O Zip 3 - 72	Paper & Internal
To Whom Paid / - / / Code / 7033	Date IMM/DD/YYYYI S _
Staples	7/6/15 55.11
House # Street Address / SGGP	Description of Expenditure
City State Zip Code	Printer Int
To Whom Paid	Date [MM/DD/YYYY] \$
House # Street Address On O C C 7 40	Description of Expenditure
[70 Bet 60 x81	Description of Expenditure #110,00
City Herrushury State PA Zip Code 1716	Fall Dinner adxtidatet
To Whom Pald Face BOOK, Inc ATM: Pept	Date [MM/DD/YYYY] \$ 14.00
House # N/A Street Address (Online) PO Box 10005	Description of Expenditure
City Palo Alto State CA Zip 94303	meet + GART Ad
To Whom Paid	Date [MM/DD/YYYY] \$ (\(\Omega_0 \) \(\Omega_0 \)
House # 1 Street Address 5 4 0	10/9/15 600.00
18 tast Man ST	Description of expenditure
City Hushnelston State PA Zip Code 17076	Newspaper adx 4 weeks
To Whom Paid US Postal Service	Date [MM/DD/YYYY] \$ 1,750.00
House # Company Street Address	Description of Expenditure
778 Wallon AVP	
HURAEISTON PM code 1 +0 S(Postage Stamps
To Whom Paid The UPS Store	Date [MM/DD/YYYY] \$ 644.80
House # 1152 Street Address Mae Street	Description of Expenditure 36.75
City State OO Zip	Post cards=681.55. Tota
To Whom Paid Code 17036	Date [MM/DD/YYYY] \$ 0.000
Lace 50 ml	10/16/15 20.00
House # Street Address On Sand	Description of Expenditure
City State Zip Code	Same Met + Grept all
	extended.