

Commonwealth of Pennsylvania
CAMPAIGN FINANCE REPORT

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(COVER PAGE)

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number: 		Report Filed By: 		CANDIDATE ☒ COMMITTEE ☐ LOBBYIST ☐	
Name of Filing Committee, Candidate or Lobbyist: <u>Pat Stringer</u>					
Street Address: <u>2134 Kensington Street</u>					
City: <u>Harrisburg</u>		State: <u>PA</u>		Zip Code: <u>17104</u>	

TYPE OF REPORT (place X to the right of report type)	1ST TUESDAY PRE-PRIMARY	2ND FRIDAY PRE-PRIMARY	30 DAY POST-PRIMARY	AMENDMENT REPORT	YES	NO
	1ST TUESDAY PRE-ELECTION	2ND FRIDAY PRE-ELECTION	30 DAY POST-ELECTION	TERMINATION REPORT	YES	NO
	ANNUAL REPORT			FILING METHOD (CHECK ONE)		
		YEAR <u>2015</u>		PAPER	DISKETTE	

Name of Office Sought by Candidate:			DATE OF ELECTION			District Number	Office Code	Party Code	County Code
			<u>11/03/2015</u> MO DAY YEAR <u>05 19 2015</u>				<u>0TH</u>	<u>DEM</u>	<u>22</u>
(SEE INSTRUCTIONS FOR CODES)									

Summary of Receipts and Expenditures from:		MO DAY YEAR			To	MO DAY YEAR			FOR OFFICE USE ONLY
		<u>01 01 2015</u>				<u>05 04 2015</u>			
Commonwealth of Pennsylvania									

A. Amount Brought Forward From Last Report	\$	-0-	NOTARIAL SEAL Avery J Webster, Notary Public Harrisburg City, Dauphin County My Commission Expires September 24, 2018
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	618.30	
C. Total Funds Available (Sum of Lines A and B)	\$	618.30	
D. Total Expenditures (From Schedule III)	\$	618.30	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	-0-	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	-0-	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	-0-	

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 <u>06th</u> day of <u>MAY</u> 20 <u>15</u> Signature My commission expires <u>SEPTEMBER 24</u> 20 <u>18</u> MO. DAY YR.	 Signature of Person Submitting Report <u>Pat Stringer</u> Printed Name <u>(717) 418-1702</u> Area Code Daytime Telephone Number

PART II. If this is a report of a Candidate's Authorized Committee, candidate 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 <u>06th</u> day of <u>MAY</u> 20 <u>15</u> Signature My commission expires <u>SEPTEMBER 24</u> 20 <u>18</u> MO. DAY YR.	 Signature of Candidate <u>Pat Stringer</u> Printed Name <u>(717) 418-1702</u> Area Code Daytime Telephone Number

RECEIVED

Dauphin County Election Bureau
2 S. 2nd St.
PO Box 1295
Harrisburg PA 17108

PART B
ALL OTHER CONTRIBUTIONS

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\$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 <u>Pat Steinger</u>	Reporting Period From <u>01-01-2015</u> To <u>05-04-2015</u>
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			DATE	AMOUNT
Full Name of Contributor			MO DAY YEAR	
<u>Pat Steinger</u>			<u>03 08 2015</u>	<u>\$ 250.00</u>
Mailing Address			MO DAY YEAR	
<u>2134 Kensington Street</u>				\$
City	State	Zip Code (Plus 4)	MO DAY YEAR	
<u>Harrisburg</u>	<u>PA</u>	<u>17104 -</u>		\$
Full Name of Contributor			MO DAY YEAR	
				\$
Mailing Address			MO DAY YEAR	
				\$
City	State	Zip Code (Plus 4)	MO DAY YEAR	
				\$
Full Name of Contributor			MO DAY YEAR	
				\$
Mailing Address			MO DAY YEAR	
				\$
City	State	Zip Code (Plus 4)	MO DAY YEAR	
				\$
Full Name of Contributor			MO DAY YEAR	
				\$
Mailing Address			MO DAY YEAR	
				\$
City	State	Zip Code (Plus 4)	MO DAY YEAR	
				\$
Full Name of Contributor			MO DAY YEAR	
				\$
Mailing Address			MO DAY YEAR	
				\$
City	State	Zip Code (Plus 4)	MO DAY YEAR	
				\$
Full Name of Contributor			MO DAY YEAR	
				\$
Mailing Address			MO DAY YEAR	
				\$
City	State	Zip Code (Plus 4)	MO DAY YEAR	
				\$
Full Name of Contributor			MO DAY YEAR	
				\$
Mailing Address			MO DAY YEAR	
				\$
City	State	Zip Code (Plus 4)	MO DAY YEAR	
				\$
Full Name of Contributor			MO DAY YEAR	
				\$
Mailing Address			MO DAY YEAR	
				\$
City	State	Zip Code (Plus 4)	MO DAY YEAR	
				\$

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL

\$ 250.00

PART D
ALL OTHER CONTRIBUTIONS

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OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of
over \$250.00 in the reporting period.

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

Name of Filing Committee or Candidate <u>Pat Stringer</u>	Reporting Period From <u>01-01-2015</u> To <u>05-04-2015</u>
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				DATE			AMOUNT
Full Name of Contributor <u>Pat Stringer</u>				MO <u>04</u>	DAY <u>15</u>	YEAR <u>2015</u>	\$ <u>368.30</u>
Mailing Address <u>2134 Kensington Street</u>				MO	DAY	YEAR	\$
City <u>Harrisburg</u>	State <u>PA</u>	Zip Code (Plus 4) <u>17104 -</u>		MO	DAY	YEAR	\$
Employer Name <u>RETIRED</u>				Occupation <u>N/A</u>			
Employer Mailing Address/Principal Place of Business <u>N/A</u>							
Full Name of Contributor				MO	DAY	YEAR	\$
Mailing Address				MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor				MO	DAY	YEAR	\$
Mailing Address				MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor				MO	DAY	YEAR	\$
Mailing Address				MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor				MO	DAY	YEAR	\$
Mailing Address				MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							

Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$

SCHEDULE III
STATEMENT OF EXPENDITURES

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Name of Filing Committee or Candidate <u>Pat Stringer</u>	Reporting Period From <u>01-01-2015</u> To <u>05-04-2015</u>
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To Whom Paid <u>Dauphin Co. Election Bureau</u>			MO <u>03</u>	DAY <u>08</u>	YEAR <u>2015</u>	Amount <u>\$25.00</u>
Mailing Address <u>2 South Second Street</u>			Description of Expenditure <u>FILING FEE</u>			
City <u>Harrisburg</u>	State <u>PA</u>	Zip Code (Plus 4) <u>17101-</u>				
To Whom Paid <u>PEACH TREE RESTAURANT</u>			MO <u>03</u>	DAY <u>26</u>	YEAR <u>2015</u>	Amount <u>\$12.93</u>
Mailing Address <u>251 North Progress Avenue</u>			Description of Expenditure <u>CAMPAIGN LUNCH</u>			
City <u>HARRISBURG</u>	State <u>PA</u>	Zip Code (Plus 4) <u>17109-</u>				
To Whom Paid <u>PROMENADE RESTAURANT</u>			MO <u>03</u>	DAY <u>30</u>	YEAR <u>2015</u>	Amount <u>\$15.52</u>
Mailing Address <u>5290 Derry Street</u>			Description of Expenditure <u>Campaign MEAL</u>			
City <u>HARRISBURG</u>	State <u>PA</u>	Zip Code (Plus 4) <u>17111-</u>				
To Whom Paid <u>U. S. Postal Service</u>			MO <u>03</u>	DAY <u>31</u>	YEAR <u>2015</u>	Amount <u>\$49.00</u>
Mailing Address <u>Federal Square Station</u>			Description of Expenditure <u>POSTAGE</u>			
City <u>Harrisburg</u>	State <u>PA</u>	Zip Code (Plus 4) <u>17108-</u>				
To Whom Paid <u>OFFICE DEPOT/OFFICE MAX</u>			MO <u>04</u>	DAY <u>03</u>	YEAR <u>2015</u>	Amount <u>\$243.10</u>
Mailing Address <u>5098 JONESTOWN ROAD</u>			Description of Expenditure <u>PRINTING</u>			
City <u>HARRISBURG</u>	State <u>PA</u>	Zip Code (Plus 4) <u>17112-</u>				
To Whom Paid <u>PEACH TREE RESTAURANT</u>			MO <u>04</u>	DAY <u>10</u>	YEAR <u>2015</u>	Amount <u>\$6.57</u>
Mailing Address <u>251 NORTH PROGRESS AVENUE</u>			Description of Expenditure <u>campaign meal</u>			
City <u>HARRISBURG</u>	State <u>PA</u>	Zip Code (Plus 4) <u>17109-</u>				
To Whom Paid <u>PARSE</u>			MO <u>04</u>	DAY <u>13</u>	YEAR <u>2015</u>	Amount <u>\$17.00</u>
Mailing Address <u>621 Mallard Road</u>			Description of Expenditure <u>CAMPAIGN MEAL</u>			
City <u>CAMP HILL, PA</u>	State <u>PA</u>	Zip Code (Plus 4) <u>17011-</u>				
To Whom Paid <u>DAUPHIN CO. DEMOCRATIC COMMITTEE</u>			MO <u>04</u>	DAY <u>15</u>	YEAR <u>2015</u>	Amount <u>\$50.00</u>
Mailing Address <u>P.O. BOX 60789</u>			Description of Expenditure <u>CHAIRMAN'S CLUB LUNCHEON</u>			
City <u>HARRISBURG</u>	State <u>PA</u>	Zip Code (Plus 4) <u>17106-</u>				

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

PAGE TOTAL
\$419.12

SCHEDULE III
STATEMENT OF EXPENDITURES

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Name of Filing Committee or Candidate PAT STRINGER	Reporting Period From 01-01-2015 To 05-04-2015
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To Whom Paid LEE BROWN (DREAMS) MINORITY NETWORK	MO 04	DAY 18	YEAR 2015	Amount \$ 20.00
Mailing Address	Description of Expenditure MINORITY AWARDS DINNER			
City LANCASTER	State PA	Zip Code (Plus 4) -		
To Whom Paid DELTA SIGMA THETA ALUMNAE	MO 04	DAY 19	YEAR 2015	Amount \$ 25.00
Mailing Address P.O. BOX 60733	Description of Expenditure KING WHO COOK			
City HARRISBURG	State PA	Zip Code (Plus 4) 17106-		
To Whom Paid JUMBO BUFFET AND GRILL	MO 04	DAY 20	YEAR 2015	Amount \$ 7.20
Mailing Address 2810 PAXTON STREET	Description of Expenditure CAMPAIGN MEAL			
City HARRISBURG	State PA	Zip Code (Plus 4) 17111-		
To Whom Paid CRAWDADDY'S	MO 04	DAY 23	YEAR 2015	Amount \$ 10.48
Mailing Address 1500 NORTH SIXTH STREET	Description of Expenditure CAMPAIGN MEAL			
City HARRISBURG	State PA	Zip Code (Plus 4) 17102		
To Whom Paid GO DADDY GO	MO 04	DAY 24	YEAR 2015	Amount \$ 102.05
Mailing Address	Description of Expenditure WEBSITE/HOSTING			
City SCOTTSDALE, ARIZONA	State	Zip Code (Plus 4) -		
To Whom Paid CAPITAL PRESBYTERIAN CHURCH	MO 04	DAY 28	YEAR 2015	Amount \$ 5.00
Mailing Address 14TH AND CUMBERLAND	Description of Expenditure CENTRAL PA YOUTH JAZZ			
City HARRISBURG	State PA	Zip Code (Plus 4) 17103-		
To Whom Paid CRACKER BARRELL	MO 04	DAY 29	YEAR 2015	Amount \$ 14.00
Mailing Address 2525 Brindle Drive	Description of Expenditure CAMPAIGN MEAL			
City HARRISBURG	State PA	Zip Code (Plus 4) 17110-		
To Whom Paid RUBY TUESDAY	MO 04	DAY 30	YEAR 2015	Amount \$ 15.45
Mailing Address PAXTON STREET	Description of Expenditure CAMPAIGN MEAL			
City HARRISBURG	State PA	Zip Code (Plus 4) 17111-		

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

PAGE TOTAL

\$ 199.18