



Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number		Report Filed B	y Candida	te	Committee	\mathbf{X}	Lobbyist
Name of Filing Committee, Car Lobbyist	ididate or	Comp	nittee	to Ele	ed l	Ballard	
Street Address		650	Caco				
city He	<u>rshey</u>		State	PA	Zip Code	17033	_
Type of Report (Place x under r	eport type)			* ************************************			-
1-6 th Tuesday 2-2 nd Friday Pre-Primary Pre-Primary		4-6 th Tuesday Pre-Election	5- 2 nd Friday Pre- Election	-6-30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
Date Of Election (MM/DD/YYYY)	05/19/15	Year	2015	Amendment Report		Termination Report	
Summary of Receipts and Expenditures	From Date	To Date			For	Office Use Only	
expenditures.	03/01/201	5 05/0	4/2015				
A. Amount Brought Forward Fi	rom last Report	\$	Ø			y.e.	Jan Con
B. Total Monetary Contribution	ns and Receipts	\$ 5	5/20			· · · · · · · · · · · · · · · · · · ·	
(From Schedule I) C. Total Funds Available		\$ 6	ri a	}			S & S
(Sum of Lines A and B) D. Total Expenditures		\$ 7	3 60			過数	
(From Schedule III)			16.75			- 125 552	
E. Ending Cash Balance (Subtract Line D from Line C)		\$ 7	003.25			ia:	
F. Value of In-Kind Contributio	ns Received	\$ 2	フヘドコ				
(From Schedule II) G. Unpaid Debts and Obligatio	ns	· S	<u>ec.ut</u>				ANIC ANIC
(From Schedule IV)		7 fg (-18	<u>D</u>				NSYLVANIA y Public on County
Part 1- if this is a Committee report	t, treasurer sign he	re. If this is a Car	Affidavit Se ndidate report, c			-	PENNS SEAL Bonary
I swear (or affirm) that this report,	_	hed schedules o	n paper, is to the	best of my knowle	dge and belief t	rue, correct and comple	ete. G. W.Z. a
Sworn to and subscribed before me	e this	1 .		Ha sa	5 8	M	TH C
day or Pint	20	- [Signature	of Person Sybr	nitting report	Wall Ba
Signature	~	·	_	Sevia	Printed Nam	rii ara	MMONW KRISTI
My Commission expires 9///	1/2017	. •	-	717 °	8	138-1084	
MO.	DAY YR.	_		Area Code	Da	ytime Telephone Numb	er 8 2
Part II- If this is a report of a Candid	fate's Authorized (Committee, cand	lidate shall sign h	ere.			E-15-City - Control - Cont
I swear (or affirm) that to the best amended.	of my knowledge a	nd belief this po	litical committee	has not violated ar	ny provisions of	the Act of June 3, 1937	(P.L. 1333, NO.320) as
Sworn to and subscribed before me	e this			0	, .	0 11	
8TH day of MAY	20 15	• •		XOIMI	ALL &	SAL WUU	<i>I</i> Y
Commanday of Total as	0 1	-	<u>=</u>	Sign	name of Cahal	date	
Simontum		. 1	•	<u>Janay</u>	Printed Name	WIG .	
COMMONWEALTH OF My Commission expires Notarial S		<u>"</u>	<u>معين</u> ز	717	2	32-753(ext +
Joyce A. Tapppolas, City of Harrisburg, D	Ngtary Public	-		Area Code	Day	time Telephone Numbe	er
My Commission Expir	es Oct. 5, 2016						

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SCHEDULE I **Contributions and Receipts**

Detailed Summary Page

Filer Identification Number

Filer Identification Number Committee to Elect	\mathcal{B}_{ℓ}	21	lard
1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor			
Total for the reporting period	(1)	\$	1,810
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)	7.55 J. V 30.7 J. J.	ver Est	
Contributions Received from Political Committees (Part A)		\$	Ø
All Other Contributions (Part B)		\$	4,250
Total for the reporting period	(2)	\$	4,250
3. Contributions Over \$250.00 (From Part C and Part D)			
Contributions Received from Political Committees (Part C)		\$	Ø
All Other Contributions (Part D)		\$	2,500
Total for the reporting period	(3)	\$	2,500
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)		1. 12.1 2.47.2 2.43.0 1.00.14	
Total for the reporting period	(4)	\$	Ø
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, Recover Page, Item B)	port	\$	ϕ

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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.

Filer Identification Number:		
Committee to Elect B	allard	
Full Name of Contributor LiSa Wolff	Date [MM/DD/YYYY] 5	100
House # 1030 Street Address Appenzell	Date [MM/DD/YYYY]	
city Hummelstown State PA Zip Code 17036	Date [MM/DD/YYYY] \$	4
Full Name of Contributor Mary Lou Buchan	Date [MM/DD/YYYY] \$	100
House # 725 Street Address Linden	Date [MM/DD/YYYY] S	
city Hershey State PA Zip Code 17033	Date [MM/DD/YYYY] \$	
Full Name of Contributor Anne Searer	Date [MM/DD/YYYY] \$	100
House # 2125 Street Address Carey Way	Date [MM/DD/YYYY] \$	
Hummels bum State PA Zip Code 17036	Date [MM/DD/YYYY] \$	
Full Name of Contributor David Jenkins	03/15/15	100
House # 718 Street Address Appenzell	Date [MM/DD/YYYY] S	4
Hummelstown State PA Zip Code 17036	Date [MM/DD/YYYY] \$	
Full Name of Contributor Maria Hersey	Date [MM/DD/YYYY] \$	100
1911 Street Address Carriage House Ct	Date [MM/DD/YYYY] \$	
City Hershey State PA Zip Code 17033	Date [MM/DD/YYYY] \$	
Full Name of Contributor Anne Newman	Date [MM/DD/TYYY] \$	100
House # 531 Street Address Elm Ave	Date [MM/DD/YYYY] \$	
City Hershay State PA Zip Code 17033	Date [MM/DD/YYYY] \$	

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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.

Filer Identification Number: Committee to Elect B.	allard	
Full Name of Contributor Susan Reider	Date [MM/DD/YYYY] \$	100
House # 86 Street Address Cambridge Dr.	Date [MM/DD/YYYY] \$	
City Hershey State PA Zip Code 1703	Date [MM/DD/YYYY] S	
Full Name of Contributor RUSS Bisgica	Date [MM/DD/XXXY] \$	100
156 Street Address Cedar Ave	Date [MM/DD/YYYY] \$	
City Hershey State PA Zip Code 17033	Date [MM/DD/YYYY] \$	286767 286767
Full Name of Contributor Sue Mackay	Date [MM/DD/YYYY] \$	200
House # 16 Street Address Foxanna Dr	Date [MM/db/YYYY] \$	
city Hershey State PA Zip Code 17033	Date [MM/DD/YYYY] \$	
Full Name of Contributor Joann Wallace	Date [MM/DD/YYYY] 5	100
House # 311 Street Address Carlton Rd	Date [MM/DD/YYYY] \$	
City Hershey State PA Zip Code 17033	Date [MM/DD/YYYY] \$	
Full Name of Contributor House # Street Address 1 C Street Address 1 Street Addres	Date [MM/DD/YYYY] \$	100
733 Linden	Date [MM/Dtb/YYYY] \$	
City Hershey State PA Zip Code 17033	Date [MM/DD/YYYY] \$	
Full Name of Contributor Robert Becker	Date [MM/DD/YYYY] \$	100
House # 79 Street Address Almond Dr.	Date [MM/Db/YYYY] \$	
City Horshey State PA Zip Code 17033	Date [MM/DD/YYYY] \$	

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PART B

Filer Identification Number:

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.

COMMITTEE TO FIRST B	allara	
Full Name of Contributor	DW. Tibe View honors	
Jon Black	Date [MM/DD/YYYY] \$ /00	
TERRES 40 FREE CONTRACTOR	03/20/20/5 / / / O O Date [MM/DD/YYYY] \$	
649 Street Address Linden Rd		
City Hershey State PA Zip Code 17033	Date [MM/DD/YYYY] \$	
Full Name of Contributor Michael Mark	Date [MM/DD/YYYY] \$	
House # 1207 Street Address Galway Ct.	Date [MM/DD/YYYY] S	
CHY Hummelstown State PA Zip Code 17036	Date [MM/DD/YYYY] 5	
Full Name of Contributor	Date [MM/DD/YYYY] \$	
Michael Johnston	03/23/2015 100	
House # 311 Street Address BE, Glenn Rd	Date [MM/DD/YYYY] \$	
ltershey State PA ZID Gode 17033	Date [MM/DD/YYYY] \$	
Full Name of Contributor	Date [MM/DD/YYYY] \$	-
House # Street Address 1	03/21/20/5 / 00 Date (MM/DD/YYYY) \$	
1255 Harding Ave	Date [MM/DD/YYYY] \$	
City Hershey State PA Zip Code 17033	Date [MM/DD/YYYY] \$	
Full Name of Contributor Karen Lehman	Date [MM/DD/YYYY] \$	
House # Street Address	03/20/20/5 10 0 Date (MM/00/YYYY) \$	
City Hummelstown State PA Zip Code 17036	Date [MM/DD/YYYY] \$	
Full Name of Contributor JOHN Schnien	Date [MM/DD/YYYY] \$	
House # 122 Street Address 8/100 A 10	Date [MM/DD/YYYY] \$	
City State O Zip Code -		
City Hershey State PA Zip Code 17033	Date [MM/DD/YYYY] \$	

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PART B

Filer Identification Number:

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.

Committee to Flect Ba	A 1 1 PM 1 PM	
	From the Conference with the selection of the selection	×I v
Jan Way bright	Date [MM/DD/YYYY] \$	150
House # Street Address	Date [MM/DD/YYYY] \$	
656 Hotel Rd City State Co Zip Code 1 = 200	Date [MM/DD/YYYY] \$	38 30 30
Hershey PA 17038) <u>2</u> 13.4	
Full Name of Contributor SUR Kreider	Date [MM/DD/YYYY] \$	125
	Date [MM/DD/YYYY] \$	/: 1
1405 Street Address Woodland Dr.		
City Hummelstown State PA Zip Code 17036	Date [MM/DD/YYYY] \$	
Full Name of Contributor Ann Grossman	Daté [MM/DD/YYYY] \$	100
House #	03/10/15 Date [MM/DD/YYYY] \$	
1134 Maple Ave		
City Hershey State PA Zip Code 17033	Date [MM/DD/YYYY] \$	
Full Name of Contributor Paul Wessell	Date [MM/DD/YYYY] \$	150
Managara Malana	Date [MM/DD/YYYY] \$	
376 York town Rd		#
City Hershey State PA Zip Code 17033	Date [MM/DD/YYYY] \$	
Full Name of Contributor Mary Ann Gregory	Date [MM/DD/YYYY] \$	125
House # Street Address ()	03/13/15 Date [MM/DD/YYYY] \$	
1320 Sand Hill Kd		
City Hummelstown State PA Zip Code 17036	Date [MM/DD/YYYY] \$	
Full Name of Contributor	Date [MM/DD/YYYY] \$	DEN
House # Street Address	03/21/205 Date [MM/DD/YYYY] \$	250
1625 Bradley Ave:		
City Hommelstown BPA The Code 17036	Date [MM/DD/YYYY] \$	

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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.

Filer Identification Number: Committee to Elect Ba	allard	
Full Name of Contributor Chuck Kovacs	Date [MM/DD/YYYY] \$	100
House # 747 Street Address Olde Trail Rd	Date [MM/DD/YYYY] \$	
City Hummelstown PA Zip Code 17036	Date [MM/DD/YYYY] \$	
Full Name of Contributor Gloria Sassani	Date [MM/DD/YYYY] \$	100
House # 304 Street Address Candle wyck	Date [MM/DD/YYYY] \$	
City Hershey State PA Zip Code 17033	Date [MM/DD/YYYY] \$	
Full Name of Contributor Sandy Cappelli	Date [MM/DD/XYYY] \$	100
House # 117 Street Address W. Granada	Date [MM/db/YYYY] \$	7. 7. 7.
City Hershey State PA Zip Code 17033	Date [MM/DD/YYYY] \$	
Full Name of Contributor Cathy Rung	Date [MM/DD/YYYY] \$	100
House # 222 Street Address E. Granada	Date [MM/DD/YYYY] \$	8 7 8 <u></u>
City Hershey State PA Zip Code 17033	Date [MM/DD/YYYY] \$	
Full Name of Contributor Christina Mihalik	03/5/15	100
House# 622 Street Address Linden Rd	Date [MM/DD/YYYY] \$	
city Hershey State PA Zip Cools 17033	Date [MM/DD/YYYY] \$	
Full Name of Contributor David Bronstein	Date [MM/DD/YYYY] \$	100
House # 1106 Street Address Draymore Ct	Date [MM/DD/YYYY] \$	
City HUMMOSTAWA PA Zip Code 17038	Date [MM/DD/YYYY] \$	9 5 6

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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.

File Identification Number: Committee to Elect	Ballard
Full Name of Contributor	Date [MM/DD/YYYY] \$
Jack Bishop	4/16/15 100
House # 415 Street Address Lexing for Court	Date [MM/DD/YYYY] \$
City Hershey State PA Zip Code 17033	Date [MM/DD/YYYY] \$
Full Name of Contributor Anita Mentzer	Date [MM/DD/YYYY] \$ 100
House # 1181 Street Address Wicklow (+	Date (MM/DD/YYYY) \$
City Hummelstown State PA Zip Gode 17036	Date [MM/DD/YYYY] \$
Full Name of Contributor Region H. Ohley	Date [MM/DD/YYYY] \$ 100
House # 2483 Street Address Zell Court	Date MM/DD/YYYY] \$
Hummelstown State PA Zip Code 17036	Date [MM/DD/YYYY] \$
Full Name of Contributor Sue Kellner	Date [MM/DD/YYM] \$ /00
House # 58 Street Address LOWST AVE	Date [MM/DD/YYY] \$
City Hershey State PA Zip Code 17033	Date [MM/DD/YYYY] \$
Full Name of Contributor Philip Jurus	Date [MM/DD/XYYY] \$ /00
House # 58 Street Address LOCU St AUR	Date [MM/DD/YYY] \$
City Hersbey State PA Zip Code 17033	Date [MM/DD/YYYY] 5
Full Name of Contributor Richard Bello	Date [MM/DD/YYYY] \$ 100
House # 736 Street Address Appenzell Dr.	Date [MM/Db/YYYY] \$
City HUMMUSTOWN State PAZIP Code 17036	Date [MM/bb/YYYY] \$

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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.)

Filer Identification Number:

Filer Identificatio	n Number:	nmitt	ee to 8	lect	Ballard	
Full Name of Co	ntributor TES	isica	Demof	20 <i>0 10</i> 5	Date [MM/DD/YYY] 4/24/2015	
House # 20	Street Address	W.Ac	Demof eba Av	'e	Date [MM/0D/YYYY]	\$
Nove the street was	ershey	State P/	Zip Code /	7033	Date [MM/DD/YYYY]	
Full Name of Co	atributor				Date [MM/DD/YYYY]	S
House #	Street Address	·······			Date [MM/DD/YYYY]	\$
City	The land Plantage of the end	State	Zip Code		Date [MM/DD/YYYY]	8
Full Name of Co	ntributor				Date [MM/DD/YYYY]	\$
House #	Street Address				Date [MM/DD/YYYY]	\$
City	[STREET VERNERAL CO.]	State	Zip Code		Date [MM/DD/YYYY]	\$35 \$ 5 \$5
Full Name of Co	ntributor	13567 199 <u> </u>	150 o Carterio signario en		Date [MM/DD/YYYY]	
House #	Street Address				Date [MM/DD/YYYY]	\$4 \$4 \$5
City		State	Zip Code		Date [MM/DD/YYYY]	8
Full Name of Co	itributor				Date [MM/DD/YYYY]	5
House#	Street Address				Date [MM/DD/YYYY]	\$
City	<u> </u>	State	Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Cor	itributor	- , - <u></u>			Date [MM/DD/YYYY]	•
House #	Street Address			i i	Date [MM/DD/YYYY]	\$
City	Proceedings of the Control of the Co	State	Zip Code	0.	Date [MM/DD/YYYY]	\$

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PART D All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part C)

Melanie Comito 13/18/15 1500 House # 850 Street Address Verden Dr. City Hummelstown State PA Zip. Code Employer Name Penn State Medical Ctr. Employer Mailing Address / Principal Place of Business Full Name of Contributor Linda 9 Milt Purcul D3/247215 Date [MM/DD/1774] Street Address Date [MM/DD/1774] Date [MM/DD/1774] Street Address	Filer Identification Number: Committee to Elect F	Ballard
House 8 764 Street Address Pine Tree Rd Date IMM/DD/YYYI \$ Employer Name TE Occupation 1aw year Principal Place of Business 280 Fulling Mill Rd Harrisburg PA 17057 Employer Name TE Occupation 1aw year PA 17057 Employer Mailing Address 280 Fulling Mill Rd Harrisburg PA 17057 Full Name of Contributor Sandy Boullard Date IMM/DD/YYYI \$ State PA Zip Code 17033 Employer Name Dayhin County Bar Assoc Decupation Worker (coordinate Employer Name Dayhin County Bar Assoc Decupation Worker (coordinate Employer Name Dayhin County Bar Assoc Decupation Worker (coordinate Employer Name Dayhin County Bar Assoc Decupation Worker (coordinate Employer Name Dayhin County Bar Assoc Decupation Worker (coordinate Employer Name Dayhin County Bar Assoc Decupation Worker (coordinate Employer Name Dayhin County Bar Assoc Decupation Worker (coordinate Employer Name Dayhin County Bar Assoc Date IMM/DD/YYYI \$ Employer Name Of Contributor Welanie Comito Date IMM/DD/YYYI \$ House 8 850 Street Address Verden Dr. Date IMM/DD/YYYI \$ Employer Name Pann State Medical Ct. Cecupation Doctor Employer Mailing Address Food University Dr. Hershey PA 17033 Employer Mailing Address Food University Dr. Hershey PA 17033 Employer Mailing Address Food University Dr. Hershey PA 17033 Employer Mailing Address Food University Dr. Hershey PA 17033 Employer Mailing Address Food University Dr. Hershey PA 17033 Employer Mailing Address Food University Dr. Hershey PA 17033 Employer Mailing Address Food University Dr. Hershey PA 17033 Employer Mailing Address Food University Dr. Hershey PA 17033 Employer Mailing Address Food University Dr. Hershey PA 17033 Employer Mailing Address Food University Dr. Hershey PA 17033 Employer Mailing Address Food University Dr. Hershey PA 17033 Employer Mailing Address Food University Dr. Hershey PA 17033 Employer Mailing Address Food University Dr. Hershey PA 17033 Employer Mailin		
City Hummelstown State PA Zip Code 17036 Date [MM/DD/YYY] \$ Employer Name TE Decupation law year Employer Mailing Address / PA 17057 Full Name of Contributor Sandy Boulland Date [MM/DD/YYY] \$ Employer Name Date [MM/DD/YYY] \$ Employer Name Dayhin County Bar Assoc Decupation Willower Coordinato Contributor Melanie Comit Date [MM/DD/YYY] \$ Employer Mailing Address / PA 17101 Full Name of Contributor Melanie Comit Date [MM/DD/YYY] \$ Employer Mailing Address / PA 17101 Full Name of Contributor Melanie Comit Date [MM/DD/YYY] \$ Employer Mailing Address / PA 17101 Full Name of Contributor Melanie Comit Date [MM/DD/YYY] \$ Employer Mailing Address / PA 17001 Full Name of Contributor Melanie Comit Date [MM/DD/YYY] \$ Employer Name Fenn State Medical Ctr. Date [MM/DD/YYYY] \$ Employer Mailing Address / PA 17033 Full Name of Contributor Date [MM/DD/YYYY] \$ Employer Mailing Address / PA 17033 Full Name of Contributor Date [MM/DD/YYYY] \$ Employer Mailing Address / PA 17033 Full Name of Contributor Date [MM/DD/YYYY] \$ Employer Mailing Address / PA 17033 Full Name of Contributor Date [MM/DD/YYYY] \$ Employer Mailing Address / PA 17033 Full Name of Contributor Date [MM/DD/YYYY] \$ Employer Mailing Address / PA 17033 Full Name of Contributor Date [MM/DD/YYYY] \$ Employer Mailing Address / PA 17033 Full Name of Contributor Date [MM/DD/YYYY] \$ Employer Mailing Address / PA 17033 Full Name of Contributor Date [MM/DD/YYYY] \$ Employer Mailing Address / PA 17033 Full Name of Contributor Date [MM/DD/YYYY] \$ Employer Mailing Address / PA 17033	Rich Suminski	
Employer Mailing Address / Principal Place of Business PA 17056 Employer Mailing Address / Principal Place of Business PA 17057 Fall Name of Contributor Sandy Ballard Date [MM/DD/YYYY] \$ Employer Mailing Address / PA Zip Code 17033 Employer Mailing Address / PA 17101 Full Name of Contributor Date [MM/DD/YYYY] \$ Employer Mailing Address / PA Zip Code 17036 Employer Mailing Address /	House # 764 Street Address Pine Tree Rd	Date [MM/DD/YYYY] \$
Employer Mailing Address / Principal Place of Business 280 Fulling Mill Rd Harrisburg PA 17057 Full Name of Contributor Sandy Boullard Date MM/DD/YYYY S Full Name of Contributor Sandy Boullard Date MM/DD/YYYY S Full Name of Contributor State PA Zip Code 17033 Employer Name Daychin County Bir Assoc Doccupation Wolontyer (Condinato County Bir Assoc Date MM/DD/YYYY S Employer Mailing Address / Principal Place of Business 213 N. Front St. Harrisburg PA 17101 Full Name of Contributor Melanie Comito Date MM/DD/YYYY S Full Name of Contributor Street Address Verden Dr. Date MM/DD/YYYY S Employer Mailing Address Verden Dr. Date MM/DD/YYYY S Employer Name Pann State PA Zip Code 17036 Employer Mailing Address / Full State PA Zip Code 17036 Employer Mailing Address / Full Name of Contributor Pann State Medical Ctr. Goccupation Doctor Employer Mailing Address / Full Name of Contributor Date MM/DD/YYYY S Employer Mailing Address / Full Name of Contributor Date MM/DD/YYYY S Employer Mailing Address / Full Name of Contributor Date MM/DD/YYYY S Employer Mailing Address / Full Name of Contributor Date MM/DD/YYYY S Employer Mailing Address / Full Name of Contributor Date MM/DD/YYYY S Employer Mailing Address / Full Name of Contributor Date MM/DD/YYYY S Employer Mailing Address / Full Name of Contributor Date MM/DD/YYYY S Employer Mailing Address / Full Name of Contributor Date MM/DD/YYYY S Employer Mailing Address / Full Name of Contributor Date MM/DD/YYYY S Employer Mailing Address / Full Name of Contributor Date MM/DD/YYYY S Employer Mailing Address / Full Name of Contributor Date MM/DD/YYYY S Employer Mailing Address / Full Name of Contributor Date MM/DD/YYYY S Employer Name Date MM/DD/Y	City Hummelstown State PA Zip. Code 17036	Date [MM/DD/YYYY] \$
Full Name of Contributor Sandy Boulland Date [MM/DD/YYY] \$ From State PA Zip Code 17033 Date [MM/DD/YYY] \$ Date [MM/DD/YY	1E	occupation law yer
Sandy Boullard O3/03/15 500 House # 650 Street Address Cocoa Aue City Hershey State PA Zip code 17033 Date [MM/DD/YYYY] \$ Employer Name Dayhin County Bar Assoc Decupation Volunteer Coordine to Pencipal Place of Business 213 N. Front St. Harris burg PA 17101 Full Name of Contributor Melanie Comito Date [MM/DD/YYYY] \$ City Hummelstown State PA Zip Code 17036 Date [MM/DD/YYYY] \$ Employer Name. Penn State Medical Ctr. Employer Name. Penn State Medical Ctr. Employer Name. Penn State Medical Ctr. Employer Mailing Address PA 17033 Full Name of Contributor Date [MM/DD/YYYY] \$ Linda 2 Milt Purcell D3 2 4 205 500 House # 1471 Street Address Wood Naven Dr	Principal Place of Business 2801 Fulling Mill Kd	tarrisburg PA 17057
City Hershey State PA Zip Code 17033 Date [MM/DD/YYYY] \$ Employer Name Daych, in County Bar Assoc Occupation Wolon teer Coordinates Employer Mailing Address / Principal Place of Business Full Name of Contributor Melanie. Comito Date [MM/DD/YYY] \$ House # 850 Street Address Verden Dr. City Hummelstown State PA Zip Code 17036 Employer Mailing Address / Penn State Medical Ctr. Employer Mailing Address / Pool University Dr. Hershey PA 17033 Full Name of Contributor Date [MM/DD/YYY] \$ Linda & Milther Purch Date [MM/DD/YYY] \$ Linda & Milther Purch Date [MM/DD/YYY] \$ Date [MM/DD/YYY] \$ Date [MM/DD/YYY] \$ Date [MM/DD/YYY] \$ Street Address / Dood Naven Dr. House # 1471 Street Address Wood Naven Dr.		
Employer Name Dauphin County Bar Assoc Occupation Volunteer Coordinato Employer Mailing Address! Principal Place of Business Principal Place of Business Melanie Comito Date [MM/DD/MYY] \$ Principal Place of Business Full Name of Contributor Employer Mailing Address / Principal Place of Business Full Name of Contributor Linday Milt Purcui Day 24 20 5 500 House # 1471 Street Address Wood haven Dr. Street Address Date [MM/DD/MYY] \$	POSTERVENE SERVICE CONTROL CON	Date [MM/DD/YYYY] \$
Employer Mailing Address/ Principal Place of Business 213 N. Front St. Harrisburg PA 17101 Full Name of Contributor Melanie Comito Date [MM/DD/YYYI] \$ 500 House # 850 Street Address Verden Dr. City Hummelstown State PA Zip. Code 17036 Employer Name Fenn State Medical Ctr. Employer Mailing Address / Frincipal Place of Business Full Name of Contributor Linda & Milt Purcell Date [MM/DD/YYYI] \$ Date [MM/DD/YYYI] \$ Date [MM/DD/YYYI] \$ Linda & Milt Purcell Date [MM/DD/YYYI] \$	Hershey PA 17033	Date [MM/DD/YYYY] \$
Employer Mailing Address / Principal Place of Business 213 N. Front St. Harris burg PA 17101 Full Name of Contributor Melanie Comito Date [MM/DD/YYYY] \$ 500 House # 850 Street Address Verden Dr. Date [MM/DD/YYYY] \$ \$ City Hummels town State PA Zip. Code 17036 Employer Name Penn State Medical Ctr. Occupation Doctor Employer Mailing Address / Principal Place of Business 500 University Dr. Hersbury PA 17033 Full Name of Contributor Linda & Milh Purcell D3 247015 500 House # 1471 Street Address Wood haven Dr Date [MM/DD/YYYY] \$ \$ \$ \$ \$ \$ \$ \$ \$	Employer Name Dauchin County Bar Assoc	Occupation Volunteer Consider
Melanie Comito Melanie Comito Melanie Comito Date [MM/DD/YYYY] Street Address Verden Dr. Date [MM/DD/YYYY] Street Address Verden Dr. Date [MM/DD/YYYY] Street Address Penn State Medical Ctr. Employer Mailing Address / Principal Place of Business Full Name of Contributor Lindow Milt Purcul Date [MM/DD/YYYY] STREET Address	Employer Mailing Address /	
House # 850 Street Address Verden Dr. City Hymmelstown State PA Zip Code 17036 Employer Name Penn State Medical Ctr. Employer Mailing Address / Principal Place of Business Full Name of Contributor House # 1471 Street Address Wood haven Dr. Date [MM/DD/YYYY] \$ 500	Full Name of Contributor no i	
City Hymmelstown State PA Zip Code 17036 Employer Name Penn State Medical Ctr. Occupation Doctor Employer Mailing Address / Food University Dr. Hersbuy PA 17033 Full Name of Contributor Lindus Milt Purcul D3 247015 Street Address Wood haven Dr Date [MM/DD/YYYY] \$		03/18/15 500
Employer Name Penn State Medical Ctr. Employer Mailing Address / Principal Place of Business Full Name of Contributor Linda & Milt Purcell D3 247015 Date [MIM/DD/YYYY] Street Address Wood haven D+ Date [MIM/DD/YYYY] S	Verden Dr.	Date [MM/DD/YYYY] S
Employer Name Penn State Medical Ctr. Occupation Doctor Employer Mailing Address / Principal Place of Business 500 University Dr. Hersbey PA 17033 Full Name of Contributor Linda 9Milt Purcell D3 247015 500 House # 1471 Street Address Wood haven Dr. Date [MIM/DD/YYYY] \$	HUMMEISTOWN PH 17036	Date [MM/DD/YYYY] \$
Principal Place of Business 500 University Dr. Hersney PH 1/033 Full Name of Contributor Linda 9Milt Purcell 03 242015 500 House # 1471 Street Address Wood haven Dr Date [MM/DD/YYYY] \$	Penn State Medical Ctr.	Occupation Doctor
Lindagmilt Purcell 03/24/2015 500 House # 1471 Street Address Wood haven Dr Date MM/DD/YYYY \$	Employer Mailing Address / 500 University Dr.	Hershey PA 17033
House # 1471 Street Address Wood haven Dr Date [MM/DD/YYYY] \$	Full Name of Contributor Linda & Milt Purcell	Date [MM/DD/YYY)
City State Zin Code Date (MM/DD/VVVV)		Date [MM/DD/YYYY] \$
Hummelstown PA 17036	city Hummelstown PA Zip Code 17036	Date [MM/DD/YYYY] \$
TURCEN MACHINE CO 1 1/10/11/11/11/11/11/11/11/11/11/11/11/11	Employer Name Purce Machine Co	1 ON VIEW

P.11915

All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part C)

Filer Identification Number:

		10 = 1001	
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			Occupation
Employer Mailing Address / Principal Place of Business			[\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

P.12 g/5

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: CD1	nmittee	to Elect Ballard
INITERATION IN LUIND CONTR	DEITIONCEDE ASIVEDE VA	VALUE OF \$50.00 OR LESS PER CONTRIBUTOR
1. GNITEINIZED IN-KIND CONTA	IBUTIONS RECEIVED. V	VALUE OF 330.00 OF ELSS FER CONTRIBUTION
TOTAL for the reporting period	(1)	\$ Ø
2. IN-KIND CONTRIBUTIONS REC	EIVED-VALUE OF \$50.0	1:01 To \$250:00 (FROM PART F)
TOTAL for the reporting period	(2)	\$ 970.53
3. IN-KIND CONTRIBUTION RECE	IVED-VALUE OVER \$25	250:00 (FROM PART G)
TOTAL for the reporting period	(3)	\$
TOTAL VALUE OF IN-KIND CONTRIBUTION PERIOD (Add and enter amount totals for Page 1, Report Cover Page, Item F)		1 · i • •

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SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

Filer identification Numbers					
	Committee to Elect Ballard				

John BN Dunn		<u> 2008 - Andrew Grand, and an announced a single and an announced an announced and an announced and an announced and an announced an announced and an announced an announced an announced and an announced and an announced and an announced and an announced an announced and an announced an announced an announced and an announced an announced and an announced and an announced and an announced an announ</u>	transfer and the second of the second	and the second of the second
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Part 17033 17034 17034 17034 17035			Date [MM//DD/YYYY]	\$
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	Description of Contribution	oii Domain registration	<u> </u>	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
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Title		John BN Dunn	03/07/2015	156.75
Hershey			Date WW/DD/W/Y/	\$
Full Name of Contributor John BN Dunn John BN			Date [WIM/DD/YYYY]	8
House Hous	Description of Contribution	oft . Web site rental	in the second se	
Date MM/DD/YYYY S 49	Full-Name of Contabutor			49
City Hershey State PA Zip Code 17033 Date MM/DD/YYYYY \$ 49			Date [MM/DD/YYYY]	\$ 49
Postage	City Hershey	State PA Zip/Code 17033	Date [MM/DD/YYYY]	
	Pescription of Contributi	Ori Postage	05/12/2015	
Tile	Full Name of Contributor			19.86
Hershey PA 17033 Description of Contribution Stationery supplies and ink cartridges full*Name of Contributor John BN Dunn 3/26/2015 House # 712 Street Address Linden Road City Hershey PA Zip Code 17033		eet Address Linden Road	The second secon	
Full-Name of Contributor John BN Dunn John	Hershey	PA 17033	Date [MM/DD/MYM]	\$\frac{1}{5}\$
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Page 14 of 15

SCHEDULE I PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

	Committee to Elect ballatu	alender med Menekelij op militær vil de balletilet. Hæket
Full Name of Contributor	Richard Suminski	Date [MM/DD/YYYY] \$ 124.32
House# Stre	et Address	Date [MM/DD/WWY] \$
764	Pine Tree Road	
Gity Hummelstown	State Zip Code 17036	Date [MM/DD/YYYY] \$
Description of Contributio		
	Refreshments for a "Meet & Greet" gathering	andre and the second
Full Name of Contributor	Philip Friedrich	Date [MM/DD/YYYY] \$ 45,52
*House # Stre	ee-Address;	03/12/2015 45:52 Date [MM//DD//YYYY] \$
440	West Chocolate Avenue	
City	State ZIp Code	Date[VIM/DD/MM]] \$
Hershey	PA 17033	
Description of Contributio	software for campaign meeting managem,ent	
Full Name of Contributor	Philip Friedrich	Date [MM/DD/AYAM] \$ 81.52
House # Stre		04/17/2015 81.52 Date [MM/DD/Y/Y/Y] \$
440 Stre	et Address West Chocolate Avenue	Spare (MINIA) pp/sward 2
City	State Zip/Code	Date [MM/DD/YYYY] \$
Hershey	PA 17033	
Description of Contribution	Printing & paper supplies from Staples	
Full Name of Contributor	Philip Friedrich	Date [MM/DD/YYXX] \$ 54.95
House#		04/12/2015
House # Stre	eet Address West Chocolate Avenue	Date:[MIM/DD//Y/Y///] \$
Citý	State Zip/Code	Date [MM/DD/YYYY] \$
Hershey	PA 17033	
Description of Contributio	Refreshments for "Meet & Greet" gathering	and the state of the
Full Name of Contributor		Date [MM/DD/YYYY] \$
House # Stre		Date [MM//DD/YYYY] \$
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Description of Contribution	n.	

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Statement of Expenditures

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