

CAMPAIGN FINANCE REPORT

PAGE 1 OF

(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: 		1. CANDIDATE ☐		2. COMMITTEE ☒		3. LOBBYIST ☐		
Name of Filing Committee, Candidate or Lobbyist: <u>Citizens for Ausha N. Green</u>										
Street Address: <u>1149 Rolleston St</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)	1. ☐ 1ST TUESDAY PRE-PRIMARY		2. ☒ 2ND FRIDAY PRE-PRIMARY		3. ☐ 30 DAY POST-PRIMARY		AMENDMENT REPORT		YES ☐ NO ☐	
	4. ☐ 1ST TUESDAY PRE-ELECTION		5. ☐ 2ND FRIDAY PRE-ELECTION		6. ☐ 30 DAY POST-ELECTION		TERMINATION REPORT		YES ☐ NO ☐	
	7. ☐ ANNUAL REPORT		YEAR: 		FILING METHOD: 		PAPER ☐ DISKETTE ☐			
Name of Office Sought by Candidate: <u>Magisterial District Judge</u>					DATE OF ELECTION		District Number: <u>12-2-05</u>		Office Code: 	
12-2-05					MO: <u>5</u> DAY: <u>19</u> YEAR: <u>2015</u>		Party Code: <u>Dem</u>		County Code: <u>22</u>	
							(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from: 					MO: <u>1</u> DAY: <u>1</u> YEAR: <u>15</u>		MO: <u>5</u> DAY: <u>8</u> YEAR: <u>2015</u>		RECEIVED 2015 MAY -8 PM 4:11 ELECTIONS DAUPHIN COUNTY ELECTIONS AND ELECTIONS	
					To					
A. Amount Brought Forward From Last Report					\$		<u>0</u>			
B. Total Monetary Contributions and Receipts (From Schedule I)					\$		<u>995.00</u>			
C. Total Funds Available (Sum of Lines A and B)					\$		<u>995.00</u>			
D. Total Expenditures (From Schedule III)					\$		<u>994.66</u>			
E. Ending Cash Balance (Subtract Line D from Line C)					\$		<u>\$0.34</u>			
F. Value of In-Kind Contributions Received (From Schedule III)					\$		<u>0</u>			
G. Unpaid Debts and Obligations (From Schedule IV)					\$		<u>0</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 <u>8th</u> day of <u>May</u> 20 <u>15</u>					<u>HELEN GREEN</u> Signature of Person Submitting Report <u>HELEN GREEN</u> Printed Name <u>717</u> Area Code <u>608-8009</u> Daytime Telephone Number					
<u>Gab Viet Tran</u> Signature My commission expires <u>March 12</u> 20 <u>19</u> MO. DAY YR.										
Commonwealth of Pennsylvania County of Dauphin										
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 <u>8th</u> day of <u>May</u> 20 <u>15</u>					<u>Ausha N. Green</u> Signature of Candidate <u>Ausha N. Green</u> Printed Name <u>717</u> Area Code <u>612-8412</u> Daytime Telephone Number					
<u>Gab Viet Tran</u> Signature My commission expires <u>March 12</u> 20 <u>19</u> MO. DAY YR.										
Commonwealth of Pennsylvania County of Dauphin										

Dauphin County Election Bureau

2 S. 2nd St.

PO Box 1295

Harrisburg PA 17108

CONTRIBUTIONS AND RECEIPTS**Detailed Summary Page**

Name of Filing Committee or Candidate <i>Citizens for Aisha N. Green</i>	Reporting Period From _____ To <i>5/8/15</i>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ <i>150.00</i>

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ <i>0</i>
All Other Contributions (Part B)	\$ <i>505</i>
TOTAL for the Reporting Period (2)	\$ <i>505</i>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ <i>0</i>
All Other Contributions (Part D)	\$ <i>340</i>
TOTAL for the Reporting Period (3)	\$ <i>340</i>

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period (4)	\$ <i>0</i>

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, Report Cover Page, Item B.)	\$ <i>995.00</i>
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PART B
ALL OTHER CONTRIBUTIONS

PAGE _____ OF _____

\$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>Citizens for Aisha N. Green</u>	Reporting Period From _____ To <u>5/8/15</u>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Katherine Duncan Thompson	4	28	2015	\$ 100.00
Mailing Address				\$
2425 E. Bayberry Drive				\$
City				\$
Hbz				\$
State				\$
PA				\$
Zip Code (Plus 4)				\$
17112-				\$
F. John Barry	4	24	2015	\$ 250.00
Mailing Address				\$
274 Bottom Rd				\$
City				\$
Orrtanna				\$
State				\$
PA				\$
Zip Code (Plus 4)				\$
17353-				\$
Helen Green	4	1	2015	\$ 155.00
Mailing Address				\$
1149 Rolleston St				\$
City				\$
Hbz				\$
State				\$
PA				\$
Zip Code (Plus 4)				\$
17104 -				\$
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$

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

PAGE TOTAL
\$ 505.00

PART D

PAGE _____ OF _____

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 <i>Citizens for Aasha N. Green</i>	Reporting Period From _____ To <i>5/8/15</i>
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Full Name of Contributor				DATE			AMOUNT
Ausha N. Green				MO.	DAY	YEAR	\$
1149 Rolleston St.				3	18	15	\$ 40.00
City				MO.	DAY	YEAR	\$
Hbg				4	27	15	\$ 300.00
State		Zip Code (Plus 4)		MO.	DAY	YEAR	\$
PA		17104 -					
Employer Name				Occupation			
Valley Community Services				Program Assistant			
Employer Mailing Address/Principal Place of Business							
298 Mt. Rock Rd., Carlisle, PA							

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

\$ 340.00

SCHEDULE III
STATEMENT OF EXPENDITURES

PAGE _____ OF _____

Name of Filing Committee or Candidate <i>Citizens For Ausha N. Green</i>	Reporting Period From _____ To <i>5/8/15</i>
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To Whom Paid <i>Victory store .com</i>			MO <i>4</i>	DAY <i>20</i>	YEAR <i>15</i>	Amount <i>\$ 436.11</i>
Mailing Address <i>5200 30th st. SW</i>			Description of Expenditure <i>Yard Signs, frames, & Shipping</i>			
City <i>Davenport</i>	State <i>IA</i>	Zip Code (Plus 4) <i>52802 -</i>				
To Whom Paid <i>mt. olive baptist church</i>			MO <i>5</i>	DAY <i>3</i>	YEAR <i>15</i>	Amount <i>\$ 50.00</i>
Mailing Address <i>1331 S. 14th street</i>			Description of Expenditure <i>Hall Rental</i>			
City <i>Hwy</i>	State <i>PA</i>	Zip Code (Plus 4) <i>17104 -</i>				
To Whom Paid			MO	DAY	YEAR	Amount
Mailing Address			Description of Expenditure			
City	State	Zip Code (Plus 4)				
To Whom Paid			MO	DAY	YEAR	Amount
Mailing Address			Description of Expenditure			
City	State	Zip Code (Plus 4)				
To Whom Paid			MO	DAY	YEAR	Amount
Mailing Address			Description of Expenditure			
City	State	Zip Code (Plus 4)				
To Whom Paid			MO	DAY	YEAR	Amount
Mailing Address			Description of Expenditure			
City	State	Zip Code (Plus 4)				
To Whom Paid			MO	DAY	YEAR	Amount
Mailing Address			Description of Expenditure			
City	State	Zip Code (Plus 4)				
To Whom Paid			MO	DAY	YEAR	Amount
Mailing Address			Description of Expenditure			
City	State	Zip Code (Plus 4)				

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

PAGE TOTAL

\$ 486.11

*Continued from
Previous page total: 994.66*

SCHEDULE III
STATEMENT OF EXPENDITURES

PAGE _____ OF _____

Name of Filing Committee or Candidate <i>Citizens for Aasha N. Green</i>	Reporting Period From _____ To <i>5/8/15</i>
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To Whom Paid <i>Get it Now Print</i>	MO <i>4</i>	DAY <i>10</i>	YEAR <i>2015</i>	Amount <i>\$ 193.37</i>
Mailing Address <i>4790 Derry St.</i>	Description of Expenditure <i>Palm card printing</i>			
City <i>Hbg</i>	State <i>PA</i>	Zip Code (Plus 4) <i>17111 -</i>		
To Whom Paid <i>Get it Now Print</i>	MO <i>5</i>	DAY <i>4</i>	YEAR <i>15</i>	Amount <i>\$ 63.60</i>
Mailing Address <i>4790 Derry St</i>	Description of Expenditure <i>Posters (English/Spanish)</i>			
City <i>Hbg</i>	State <i>PA</i>	Zip Code (Plus 4) <i>17111 -</i>		
To Whom Paid <i>Get it Now Print</i>	MO <i>5</i>	DAY <i>1</i>	YEAR <i>15</i>	Amount <i>\$ 38.16</i>
Mailing Address <i>4790 Derry St.</i>	Description of Expenditure <i>Posters</i>			
City <i>Hbg</i>	State <i>PA</i>	Zip Code (Plus 4) <i>17111 -</i>		
To Whom Paid <i>Button it up</i>	MO <i>4</i>	DAY <i>10</i>	YEAR <i>15</i>	Amount <i>\$ 86.92</i>
Mailing Address <i>3210 Cloverfield Rd</i>	Description of Expenditure <i>Buttons</i>			
City <i>Hbg</i>	State <i>PA</i>	Zip Code (Plus 4) <i>17109 -</i>		
To Whom Paid <i>LLD Agency & Service</i>	MO <i>3</i>	DAY <i>10</i>	YEAR <i>15</i>	Amount <i>\$ 55.00</i>
Mailing Address <i>2501 Paxton St Suite 1</i>	Description of Expenditure <i>Notary Services</i>			
City <i>Hbg</i>	State <i>PA</i>	Zip Code (Plus 4) <i>17109 -</i>		
To Whom Paid <i>Dauphin County (Election & Voter Registration) Board of Elections</i>	MO <i>3</i>	DAY <i>10</i>	YEAR <i>15</i>	Amount <i>\$ 50.00</i>
Mailing Address <i>2 South 2nd Street (1st Floor)</i>	Description of Expenditure <i>Filing fee</i>			
City <i>Hbg</i>	State <i>PA</i>	Zip Code (Plus 4) <i>17101 -</i>		
To Whom Paid <i>Dauphin County Board of Election & Voter Registration</i>	MO <i>2</i>	DAY <i>26</i>	YEAR <i>15</i>	Amount <i>\$ 1.50</i>
Mailing Address <i>2 South 2nd Street</i>	Description of Expenditure <i>Copies</i>			
City <i>Hbg</i>	State <i>PA</i>	Zip Code (Plus 4) <i>17101 -</i>		
To Whom Paid <i>Dauphin County Board of Election & Voter</i>	MO <i>4</i>	DAY <i>26</i>	YEAR <i>15</i>	Amount <i>\$ 20.00</i>
Mailing Address <i>2 South 2nd Street</i>	Description of Expenditure <i>Copies/disc</i>			
City <i>Hbg</i>	State <i>PA</i>	Zip Code (Plus 4) <i>17101 -</i>		

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

PAGE TOTAL

\$ 508.55