Docat Larm	
Reset Form	

Print Form



### Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer Identification Number	Report Filed By ( Mark X)	Candida	ate	Committee	X	Lobby	ist
Name of Filing Committee, Candidate or Lobbyist	Commi	thee [	or a St	C- 05 05	- Swatera		
Street Address			Street	Briger	المرادا م		
City Bressler	ب مر	State	PA	.Zip Code	17113		
Type of Report (Place x under report type)			, ,		_ , , _		
1-6th Tuesday 2- 2nd Friday 3-30 Day Post	4- 6th Tuesday   5	5- 2 <sup>nd</sup> Friday	6-30 Day Post	7- Annual	Special 2 <sup>nd</sup> Friday	Specia	30 Day
		Pre- Election	Election		Pre-Election	Post-El	lection
X							Ti de
Date Of Election (MM/DD/YYYY) 5/19/15	Year	2015	Amendment		Termination		=
		2013	Report		Report		
Summary of Receipts and From Date Expenditures	To Date			For	Office Use Only		
5-5-201	1	2015					
A. Amount Brought Forward From Last Report		7.72	6	notu G	Dov	h <sub>i</sub> O	
B. Total Monetary Contributions and Receipts	\$ 6034	1.08	•	unty G			
(From Schedule I) C. Total Funds Available	ا سر مربر ا	. 50			enterior de la constante de la	-	
(Sum of Lines A and B)	16001	1.00				40 E.A	
D. Total Expenditures (From Schedule III)	\$ 6034	1.08					
E. Ending Cash Balance		72			$\begin{array}{cccccccccccccccccccccccccccccccccccc$		100
(Subtract Line D from Line C)	-				granden State	$\nabla$	Parks 1
F. Value of In-Kind Contributions Received (From Schedule II)	\$ -	<b>→</b>			10000 Januar 10000 10000 10000	PM 12: 01	7 NA. 1
G. Unpaid Debts and Obligations	\$ 316	0.30				##"	
(From Schedule IV)	510	Affidavit Sect	ion	<del>_</del>		<u>an</u>	
Part 1- If this is a Committee report, treasurer sign here		ate report, can	didate sign here.			C	** ****
I swear (or affirm) that this report, including the attach Sworn to and subscribed before me this	ed schedules on pay	per, is to the b	est of my knowledge	e and belief tru	e, correct and complete	1-200 1-200 1-200	ÜÜ
18 day of June 20/5				1///		co	ìrí
10			Signature of	Person Sybmit	ting report 5 2 3		
MULLI U MUM COMMONWEALTH Signature NOTARI	AL SEAL	ANIA	Jet	Printed Name	rec 경등망	- <del> </del>	
BICHIE A. MAR	TZ. Notary Public	<u> </u>	71-7	_	3-3210	N	
My Commission expires City of Harrisburg  MO My Commission Ex	g, Dauphin Coun kpires May 13, 20	019	a Code		me Telephone Number	_ 01	
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 of20	, 1					_	
	,		Signate	ure of Candidat	e		
Signature	. 1		Pri	nted Name			,
My Commission expiresMO. DAY YR.		Агеа	Code	Daytim	 Telephone Number	-	

#### SCHEDULE I

# **Contributions and Receipts**

Detailed Summary Page

Filer Identification Number Committee for a 54	, 100	nger Swatara
1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor		
Total for the reporting period (1	)   \$	-
.2. Contributions of \$50.01 to .\$250.00 (From Part A and Part B)		
. Contributions Received from Political Committees (Part A)	\$	
All Other Contributions (Part B)	\$	<del>-</del>
Total for the reporting period (2)	\$	-
3. Contributions Over \$250.00 (From Part C and Part D)		
Contributions Received from Political Committees (Part C)	\$	6034.08
All Other Contributions (Part D)	\$	-0
Total for the reporting period (3)	\$	6034.08
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)		4
Total for the reporting period $(4)$	\$	<del>-</del>
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)	\$	6034.08

#### 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 Nu	ımber:			
· 在 19 · · · · · · · · · · · · · · · · · ·	Commit	tee for a Stron	nger Dwatara	
EulliName;of			Date [MM/DD/YYYY] - 3	\$.
Contributing Comm	Better Go	vernment for PA	5/6/15	6034.08
:House#	Street/Address		《Date [MM/DD/YYYY) 4	\$
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City Sta	e Ton	PA Zip:Code 171	Date [MM/,DD/YYYY]	The state of the s
Full Name of	1.55 (1.56 (1	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		<del>4</del>
Contributing Comm	ittee		Date [MM/DD/YYYY]	) i
House#	Street/Address		Date [MM/DD/YYYY]	76 10
City	State	.Zip.Code	Date [MM/DD/YYYY]	20 17 20 20 20
(Full Name of	्र तम्मानः र प्रमृत्यः इतिहास्य नही	TWATE PERSONS DAY	Date[MM/DD/YYYY] 5\$	.ri
Contributing Commi	tteers			
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Full Name of			Date [MM/DD/YYYY] \$	200
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House#	Street Address		Date [MM/DD/YYYY] \$	,
City	State	Zip Code	/Date [MM/DD/YYYY] \$	
Full Name of		•	"Date [MM/DD/YYYY] \$	
Contributing Commit	tee		10 Tag 21 A	
House##	Street Address		Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
ull Name of	16/100 T		Date [MM/DD/YYYY] \$	
Contributing Committ	ee			
louse#	Street Address		Date [MM/DD/YYYY] \$	
ilty	State	Zip Code	Date [MM/DD/YYYY] ) \$	
1 45.4 (박) - 기급 기급			The section of the same of the	

# SCHEDULE III Statement of Expenditures

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City Ha	/ (€+n+n	PA Code 1210	8 Mailers
To Whom Paid			Date [MM/DD/YYYY] \$
'House#	Street Address		Description of Expenditure
City	State	Zip-	Second to to the second
		Code	
Jio\Whom\Raid	3.44 3.44 3.44 3.44 3.44		Date[MM/DD/YYYY] \$
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