

Campaign Finance Report

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

Filer Identification Number : 2004127		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: COMMITTEE TO ELECT TOM QUIGLEY											
Street Address: 560 PINE STREET											
City: ROYERSFORD				State: PA		Zip Code: 19468					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY PRIMARY	POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2014	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
				MO	DAY	YEAR					
				11	4	2014	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		MO	DAY	YEAR	FOR OFFICE USE ONLY	
		4	1	2014			5	5	2014		
A. Amount Brought Forward From Last Report				\$		3,770.81					
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		6,775.00					
C. Total Funds Available (Sum Of Lines A and B)				\$		10,545.81					
D. Total Expenditures (From Schedule III)				\$		2,827.15					
E. Ending Cash Balance (Subtract Line D From Line C)				\$		7,718.66					
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00					
G. Unpaid Debts And Obligations (From Schedule IV)				\$		30,250.00					

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 filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

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 of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
COMMITTEE TO ELECT TOM QUIGLEY	From: <u>4/1/2014</u> To: <u>5/5/2014</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 75.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 250.00
All Other Contributions (Part B)	\$ 950.00
TOTAL for the Reporting Period (2)	\$ 1,200.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 5,000.00
All Other Contributions (Part D)	\$ 500.00
TOTAL for the Reporting Period (3)	\$ 5,500.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.00

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 Page1, Report Cover Page, Item B.)	\$ 6,775.00
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PART A
CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES
\$50.01 TO \$250.00

**Use this Part to itemize only contributions received from political committees
with an aggregate value from \$50.01 to \$250.00 in the reporting period.**

Name of Filing Committee or Candidate COMMITTEE TO ELECT TOM QUIGLEY	Reporting Period From: <u>4/1/2014</u> To: <u>5/5/2014</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee FRIENDS OF MONTGOMERY COUNTY			MO	DAY	YEAR	\$ 250.00
Mailing Address 1350 RUPPERT ROAD			4	14	2014	
City POTTSTOWN	State PA	Zip Code (Plus 4) 19464				

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

PAGE TOTAL
\$ 250.00

PART B
ALL OTHER CONTRIBUTIONS

\$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 COMMITTEE TO ELECT TOM QUIGLEY	Reporting Period From: <u>4/1/2014</u> To: <u>5/5/2014</u>
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DATE	AMOUNT
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Full Name of Contributor ALEXANDER CHARYNA			MO	DAY	YEAR	\$ 200.00
Mailing Address 204 EISENHOWER LANE			3	18	2014	
City COLLEGEVILLE	State PA	Zip Code (Plus 4) 19426				

Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
DAVID MARSTELLER							
Mailing Address 1015 KEPLER ROAD				4	14	2014	
City	POTTSTOWN	State	Zip Code (Plus 4)				
		PA	19464				

Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
GREGORY J. CHAPIS							
Mailing Address 127 BUCKWALTER ROAD				4	24	2014	
City ROYERSFORD	State PA	Zip Code (Plus 4) 19468					

Full Name of Contributor HELEN QUIGLEY				MO	DAY	YEAR	\$ 250.00
Mailing Address 409 MARKLE STREET				5	3	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19128					

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

PAGE TOTAL
\$ 950.00

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 from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate	Reporting Period
COMMITTEE TO ELECT TOM QUIGLEY	From: <u>4/1/2014</u> To: <u>5/5/2014</u>

				DATE		AMOUNT	
Full Name of Contributing Committee PPHAA PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 1300 MARKET STREET SUITE 303				4	21	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043					
Full Name of Contributing Committee PARENTS AND TEACHERS FOR PUTTING STUDENTS FIRST				MO	DAY	YEAR	\$ 1,000.00
Mailing Address P.O. BOX 153				4	28	2014	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108					
Full Name of Contributing Committee FRIENDS OF MIKE VEREB				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 117 MEADOWLAND DR				5	3	2014	
City COLLEGEVILLE	State PA	Zip Code (Plus 4) 19426					
Full Name of Contributing Committee PEG PAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 116 PINE STREET SUITE 201				5	5	2014	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee I'M FOR KNOWLES				MO	DAY	YEAR	\$ 500.00
Mailing Address 16 OXFORD STREET				5	5	2014	
City TAMAQUA	State PA	Zip Code (Plus 4) 18252					

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 1,000.00
FRIENDS OF JEFF PYLE						
Mailing Address P.O. BOX 347			5	5	2014	
City FORD CITY	State PA	Zip Code (Plus 4) 16226				

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

PAGE TOTAL	
\$	5,000.00

PART D
ALL OTHER CONTRIBUTIONS
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 COMMITTEE TO ELECT TOM QUIGLEY	Reporting Period From: <u>4/1/2014</u> To: <u>5/5/2014</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
MARY ANN R. DAILEY							
Mailing Address 397 NESTER DRIVE				2	22	2014	\$ 500.00
City POTTSTOWN	State PA	Zip Code (Plus 4) 19464					
Employer Name SHIPPENSBURG UNIVERSITY				Occupation PROFESSOR			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 500.00

PART E OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Reporting Period
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

				DATE	AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS
DURING THE REPORTING PERIOD.**

Detailed Summary Page

Name of Filing Committee or Candidate		Reporting Period	
COMMITTEE TO ELECT TOM QUIGLEY		From: <u>4/1/2014</u> To: <u>5/5/2014</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
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, Reports Cover Page, Item F.)		\$	0.00

SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
COMMITTEE TO ELECT TOM QUIGLEY	From <u>4/1/2014</u> To: <u>5/5/2014</u>

DATE				AMOUNT
To Whom Paid CHERYL H. CORSA	MO	DAY	YEAR	
Mailing Address 1290 STARK ROAD	1	4	2014	\$ 128.25
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure POSTCARDS	
To Whom Paid CHERYL H. CORSA	MO	DAY	YEAR	
Mailing Address 1290 STARK ROAD	1	8	2014	\$ 117.42
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure POSTCARDS	
To Whom Paid MINUTEMAN PRESS	MO	DAY	YEAR	
Mailing Address 331 TENTH AVE	3	5	2014	\$ 195.89
City ROYERSFORD	State PA	Zip Code (Plus 4) 19468	Description of Expenditure STATIONARY	
To Whom Paid CHERYL H. CORSA	MO	DAY	YEAR	
Mailing Address 1290 STARK ROAD	3	19	2014	\$ 326.61
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure POSTCARDS	
To Whom Paid CHERYL H. CORSA	MO	DAY	YEAR	
Mailing Address 1290 STARK ROAD	3	26	2014	\$ 139.65
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure POSTCARDS	

To Whom Paid CHERYL H. CORSA			MO	DAY	YEAR	
Mailing Address 1290 STARK ROAD			4	7	2014	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure POSTCARDS			

To Whom Paid CAPITOL PROMOTIONS INC			MO	DAY	YEAR	
Mailing Address P.O. BOX 231			4	14	2014	
City GLENSIDE	State PA	Zip Code (Plus 4) 19038	Description of Expenditure YARD SIGNS			

To Whom Paid CHERYL H. CORSA			MO	DAY	YEAR	
Mailing Address 1290 STARK ROAD			4	15	2014	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure POSTCARDS			

To Whom Paid CHERYL H. CORSA			MO	DAY	YEAR	
Mailing Address 1290 STARK ROAD			4	21	2014	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure POSTCARDS			

To Whom Paid MINUTEMAN PRESS			MO	DAY	YEAR	
Mailing Address 331 TENTH AVE			4	25	2014	
City ROYERSFORD	State PA	Zip Code (Plus 4) 19468	Description of Expenditure BUSINESS CARDS			

To Whom Paid CHERYL H. CORSA			MO	DAY	YEAR	
Mailing Address 1290 STARK ROAD			5	1	2014	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure POSTCARDS			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 2,827.15

SCHEDULE IV
STATEMENT OF UNPAID DEBTS
 Use this Section to itemize all unpaid debts and obligations
 which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate COMMITTEE TO ELECT TOM QUIGLEY				Reporting Period From: <u>4/1/2014</u> To: <u>5/5/2014</u>			
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DATE						Outstanding Balance of Debt		
Name of Creditor THOMAS J. QUIGLEY					MO	DAY	YEAR	\$ 50.00
Mailing Address 560 PINE STREET					3	17	2004	
City ROYERSFORD	State PA		Zip Code (Plus 4) 19468		Description of Debt LOAN			

DATE						Outstanding Balance of Debt		
Name of Creditor THOMAS J. QUIGLEY					MO	DAY	YEAR	\$ 2,000.00
Mailing Address 560 PINE STREET					3	19	2004	
City ROYERSFORD	State PA		Zip Code (Plus 4) 19468		Description of Debt LOAN			

DATE						Outstanding Balance of Debt		
Name of Creditor THOMAS J. QUIGLEY					MO	DAY	YEAR	\$ 4,000.00
Mailing Address 560 PINE STREET					4	23	2004	
City ROYERSFORD	State PA		Zip Code (Plus 4) 19468		Description of Debt LOAN			

DATE						Outstanding Balance of Debt		
Name of Creditor THOMAS J. QUIGLEY					MO	DAY	YEAR	\$ 4,200.00
Mailing Address 560 PINE STREET					5	20	2004	
City ROYERSFORD	State PA		Zip Code (Plus 4) 19468		Description of Debt LOAN			

				DATE			Outstanding Balance of Debt
Name of Creditor THOMAS J. QUIGLEY				MO	DAY	YEAR	\$ 20,000.00
Mailing Address 560 PINE STREET				10	7	2010	
City ROYERSFORD	State PA	Zip Code (Plus 4) 19468	Description of Debt				
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 30,250.00