Campaign Finance Report

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

Filer Identificati Number :	on 2013	0096			Repo Filed		C	ANDI	DATE		СОМ	MITTEE	✓	LOB	BYIS	r	
Name of Filing C	Committee, Candid	ate or L	obbyist:		ALLIAN	ICE F	OR A	BETT	ER PE	NNS	YLVANI	A				_	
Street Address:	500 NORTH 1	2TH ST	REET														
City:	LEMOYNE						Stat	te:	PA			Zip Co	de: 17	043			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE-	- 2. X		DAY 1ARY	F	POST- 3.			AMENDMENT REPORT?		Yes	\checkmark	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION							POST-	6.		TERMIN/ REPORT		Yes		No	\checkmark	
report type)	ANNUAL REPORT	7.	Year 2014				(NG M) CHE					PAPER		\checkmark	DIS	KETTE	•
Name of Office S	L Sought by Candidat	te:					DA	τε ο	F ELE	СТІС	N	District Number	Office Code	Pai	ty Co	le Cou Coo	
	,						мо		DAY	Y	EAR	Number	code				
				11		4	2014	j	(SEE INS	TRUCTI	ONS FO	R CODE	S)				
	Receipts and	мо	DAY	YEAR			мо		DAY	Y	EAR	FC	OR OFFIC	e use	ONL	Y	
Expenditures	from:		4 1	20	014	ГО		5		5	2014						
A. Amount Bro	ught Forward Fron	n Last R	eport		·	9	\$			3,8	859.92	1					
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)		\$			45,	250.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			49,	109.92						
D. Total Expen	ditures (From Scho	edule II	I)				\$			45,3	300.00						
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)			\$			3,8	809.92						
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	Schedu	le II)		\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule I\	/)			\$				0.00						
				AFF	IDAV	IT S	ECTI	ON									
PART I - If this is	s a Committee rep	ort, trea	surer sign	here. 1	(f this i	s a Ca	andida	ate re	eport, o	candi	date sig	gn here.					
I swear (or affirm correct and comple) that this report, incl ete.	uding the	e attached so	hedules	filed or	n pape	r or by	elect	ronic m	edium	, are to i	the best o	f my know	ledge	and b	elief , t	true
Sworn to and subs	cribed before me this day of	5	20							9	Signature	e of Perso	n Submitt	ing Re	oort		_
	Signatu	re				_						Prin	ted Name				
My Commission Ex	-											Ema	il				
	мо	D	AY	YR					Ar	ea Co	le	Daytin	ne Telepho	one Nu	mber		_
Part II- If this is	a report of a cand	lidate's	authorized	l Comm	nittee, (Candi	date s	shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of n ed.	ny knowl	edge and bel	ief this	politica	l com	nittee	has n	ot viola	ted ar	ıy provis	ions of th	e act of Ju	ne 3,1	937 (I	P.L. 13	33,
Sworn to and subso	ribed before me this										s	ignature	of Candida	te			_
	day of 					_						Printe	ed Name				—
	Signature					_											
My Commission Exp	vires											Ema	il				
	мо	D	AY	YR		_			Area	Code		D	aytime Te	lephor	ne Nur	nber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** ALLIANCE FOR A BETTER PENNSYLVANIA From: <u>4/1/2014</u> **To:** <u>5/5/2014</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 0.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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				porting	Period			
Fre				om:				
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

0.00

\$

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 Candidat	e			orting P	eriod			
			Fro	m:		Тс):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	0.00

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 Ca	ndidate		Reporting) Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Com	mittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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			Report	ing Perio	od						
From				From: To:							
				D	ATE			AMOUNT	1		
Full Name				мо	DAY	YEAR					
Mailing Address							\$	5	0.00		
City	State	Zip Code (Plus 4)								
Receipt Description						•					
Enter Grand Total of Part E on Schedu	le T. Detailed Sumn	nary Page	Section	4				PAGE TO	TAL		
		iaiy raye,	Section				\$		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 Perio	d	
ALLIANCE FOR A BETTER PENNSYLVANIA	From:	<u>4/1/2014</u> To:	<u>5/5/2014</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)		•	
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 3		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate R						
	From:		То:				
				DATE		AMOU	INT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	,				
Description of Contribution:							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detail Section 2.				mary Pag	je,	PAGE 1	TOTAL
					4		0.00

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

Name of Filing Committee or Candidate					Rep	porting P	eriod				
						From: To:					
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(I	Plus 4)							
Employer of Contributor						Occupat	tion				
Employer Mailing Address/Principal Place of City State Business					Zip 4)	Code(Plus	Descri	ption o	of Contribution		

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period					
ALLIANCE FOR A BETTER PENNSYLVA	NIA		From	<u>4/</u>	<u>1/2014</u>	То:	<u>5/5/2014</u>		
				DATE			AMOUNT		
To Whom Paid KEYSTONE ANALYTICS, INC.			мо	DAY	YEAR				
Mailing Address 500 NORTH 12TH S	Т.		5	5	2014	\$	3,850.00		
City LEMOYNE	State	Zip Code (Plus 4)	Description of Expenditure						
	РА	17043	PA HD	-			NDEPENDENT		
To Whom Paid KEYSTONE ANALYTICS, INC.			мо	DAY	YEAR				
Mailing Address 500 NORTH 12TH S	TREET		5	5	2014	\$	3,850.00		
City LEMOYNE	State	Zip Code (Plus 4)	Descrip	otion of Exp	Denditure				
PA 17043				103 14P KI DITURE	M - MAIL	ING INDE	PENDENT		
To Whom Paid KEYSTONE ANALYTICS, INC.			мо	DAY	YEAR				
Mailing Address 500 NORTH 12TH S	Т.		5	5	2014	\$	3,850.00		
City LEMOYNE	State	Zip Code (Plus 4)	Descrip	tion of Ex	, Denditure	•			
	РА	17043		103 14 KII DITURE	M - MAILI	ING INDEF	PENDENT		
To Whom Paid KEYSTONE ANALYTICS, INC.			мо	DAY	YEAR				
Mailing Address 500 NORTH 12TH S	т.		5	5	2014	\$	3,850.00		
City LEMOYNE	State	Zip Code (Plus 4)	Descrip	otion of Exp	Denditure				
	РА	17043		103 14P KI ENDENT EX			LING		
To Whom Paid KEYSTONE ANALYTICS, INC.		мо	DAY	YEAR					
Mailing Address 500 NORTH 12TH S	Mailing Address 500 NORTH 12TH ST.			5	2014	\$	3,375.00		
City LEMOYNE	State	Zip Code (Plus 4)	Descrip	tion of Ex	oenditure				
	РА	17043	PA HD9		LOR - H	OUSE BILL	. 76 MAILING		

					PAG	iE 12			
To Whom Paid KEYSTONE ANALYTICS, INC.			DAY	YEAR					
Mailing Address 500 NORTH 12TH STREET			5	2014	\$	3,375.00			
State PA	Zip Code (Plus 4) 17043	Description of Expenditure PA HD94 14P - SAYLOR BIO MAILING INDEPENDENT EXPENDITURE							
To Whom Paid KEYSTONE ANALYTICS, INC.			DAY	YEAR					
Mailing Address 500 NORTH 12TH STREET			5	2014	\$	3,375.00			
State PA	Zip Code (Plus 4) 17043	Description of Expenditure PA HD94 14P SAYLOR - MAILING INDEPENDENT EXPENDITURE							
		мо	DAY	YEAR					
Mailing Address 500 NORTH 12TH ST.			5	2014	\$	2,550.00			
State PA	Zip Code (Plus 4) 17043	Description of Expenditure PA HD183 14P HARHART - BIO MAILING INDEPENDENT EXPENDITURE							
To Whom Paid KEYSTONE ANALYTICS, INC.			DAY	YEAR					
Mailing Address 500 NORTH 12TH ST.			5	2014	\$	2,550.00			
State	Zip Code (Plus 4)	Descrip	Description of Expenditure						
PA	17043	PA HD183 14P HARTHART - MAILING INDEPEND EXPENDITURE				INDEPENDEN			
		мо	DAY	YEAR					
Mailing Address 500 NORTH 12TH STREET			5	2014	\$	2,550.00			
State	Zip Code (Plus 4)	Descrip	Description of Expenditure						
PA	17043	PA HD183 14P HARHART - JOBS MAILING INDEPENDENT EXPENDITURE							
		мо	DAY	YEAR					
Mailing Address 500 NORTH 12TH ST.			5	2014	\$	3,375.00			
State	Zip Code (Plus 4)	Description of Expenditure							
PA 17043					PA HD94 14 SAYLOR - JOBS MAILING INDEPENDENT EXPENDITURE				
	State PA + 12TH STREET State PA + 12TH ST. State PA	State Zip Code (Plus 4) PA 17043 H 12TH STREET State Zip Code (Plus 4) PA 17043 H 12TH ST. State Zip Code (Plus 4) H 12TH STREET State Zip Code (Plus 4) H 12TH STREET State Zip Code (Plus 4) H 12TH ST. State Zip Code (Plus 4) H 12TH ST. State Zip Code (Plus 4)	State Zip Code (Plus 4) Descrip PA HDS INDEPE 4 12TH STREET MO 4 12TH STREET 5 State Zip Code (Plus 4) PA 17043 PA Descrip PA HDS State Zip Code (Plus 4) PA 17043 H 12TH ST. 5 State Zip Code (Plus 4) PA 17043 PA Descrip PA HDS H 12TH ST. 5 State Zip Code (Plus 4) PA 17043 PA Descrip PA HDS H 12TH ST. 5 State Zip Code (Plus 4) PA 17043 PA 17043 PA 17043 PA 17043 H 12TH STREET 5 State Zip Code (Plus 4) PA 17043 PA 17043 PA 17043 PA 17043 PA 17043 PA	H 12TH STREET 5 State Zip Code (Plus 4) Description of Exp PA 17043 Description of Exp PA 17043 Description of Exp H 12TH STREET 5 5 State Zip Code (Plus 4) Description of Exp PA 17043 Description of Exp PA Zip Code (Plus 4) Description of Exp PA 17043 Description of Exp	NO NO NO NO 1 12TH STREET 5 5 2014 PA 17043 Description of Expenditure PA H094 14P - SAYLOR BI INDEPENDENT EXPENDIT H0 DAY YEAR H12TH STREET 5 5 2014 State Zip Code (Plus 4) PA Description of Expenditure PA H094 14P SAYLOR - M EXPENDITURE Description of Expenditure PA H094 14P SAYLOR - M EXPENDITURE H12TH ST. 5 5 2014 State Zip Code (Plus 4) PA Description of Expenditure PA H0183 14P HARHART INDEPENDENT EXPENDIT H12TH ST. 5 5 2014 State Zip Code (Plus 4) PA Description of Expenditure PA H0183 14P HARHART INDEPENT EXPENDIT H 12TH ST. 5 5 2014 PA Zip Code (Plus 4) 17043 Description of Expenditure PA H0183 14P HARHART INDEPENTEXENT State H 12TH ST. 5 5 2014 PA Zip Code (Plus 4) 17043 Description of Expenditure PA H0183 14P HARHART INDEPENDENT EXPENDIT H 12TH ST. 5 5 2014 PA Zip	MO DAY YEAR 1 12TH STREET 5 5 2014 \$ State Zip Code (Plus 4) PA Description of Expenditure PA HD94 14P - SAYLOR BID MAILING MO DAY YEAR 412TH STREET MO DAY YEAR \$ 412TH STREET 5 5 2014 \$ 412TH STREET 5 5 2014 \$ 412TH STREET 5 5 2014 \$ 412TH STREET Zip Code (Plus 4) PA Description of Expenditure PA HD94 14P SATLOR - MAILING IND EXPENDITURE 17043 Description of Expenditure PA HD183 14P HARHART - BIO MAILING INDEPENDENT EXPENDITURE 112TH ST. 5 5 2014 \$ 112TH STREET 17043 Description of Expenditure PA HD183 14P HARTHART - MAILING EXPENDITURE \$ 112TH STREET 17043 Description of Expenditure PA HD183 14P			

				1	•				
To Whom Paid ACCES			мо	DAY	YEAR				
Mailing Address 2711 CENTERVILLE ROAD, #7567			5	5	2014	\$	1,750.00		
City WILMINGTON	State	Zip Code (Plus 4)	Descrir	tion of Exr	enditure				
	DE	19808	Description of Expenditure PA HD193 TALLMAN - MAILING INDEPENDENT EXPENDITURE						
To Whom Paid ACCES			мо	DAY	YEAR				
Mailing Address 2711 CENTERVILLE ROAD, #7567			5	5	2014	\$	1,750.00		
City WILMINGTON	State	Zip Code (Plus 4)	Description of Expenditure						
	DE	19808	PA HD117 BOBACK - MAILING INDEPENDENT EXPENDITURE						
To Whom Paid ACCES			мо	DAY	YEAR				
Mailing Address 2711 CENTERVILLE ROAD, #7567			5	5	2014	\$	1,750.00		
City WILMINGTON	State	Zip Code (Plus 4)	Description of Expenditure						
	DE	19808	PA HD87 14P GRELL - MAILING INDEPENDENT EXPENDITURE						
To Whom Paid ACCES			мо	DAY	YEAR				
Mailing Address 2711 CENTERVILLE ROAD, #7567			5	5	2014	\$	1,750.00		
City WILMINGTON	State	Zip Code (Plus 4)	Description of Expenditure						
	DE	19808	PA HD58 HARHAI - MAILING INDEPENDENT EXPENDITURE						
To Whom Paid ACCES			мо	DAY	YEAR				
Mailing Address 2711 CENTERVILLE ROAD, #7567			5	5	2014	\$	1,750.00		
City WILMINGTON State Zip Code (Plus 4)				Description of Expenditure					
	DE	19808	PA HD86 KELLER - MAILING INDEPENDENT EXPENDITURE						
						F	PAGE TOTAL		
Enter Grand Total of Expenditures of	on Page 1, Report C	over Page, Item D.				\$	45,300.00		