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 2005 | 5226 | | | Rep File | | | CAND | IDATE | | СОМ | 4ITTEE | ✓ | LOB | BYIST | | |
|--|---------------------------------|-------------|--------------------------|------|-------------|------|----------------|--------------------|------------------------|--------|------------|--------------------|----------------|----------------------|-----------|-----------|-----|
| Name of Filing C | Committee, Candid | ate or L | obbyist: | Ī | OCA | AL C | 0032B | BJ PA AM | IERICAI | N DR | EAM FU | ND | | | | | _ |
| Street Address: | 28 WEST 18T | H ST | | | | | | | | | | | | | | | |
| City: | NEW YORK | | | | | | | State: | NY | | | Zip Cod | ie: 10 | 0011 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PI PRIMARY | RE- | 2 | | 30 DA PRIMA | | POST- | 3. | | AMENDM REPORT | | Yes | No | ~ | |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. X | 2ND FRIDAY PELECTION | RE | - 5 | | 30 DA ELECT | | POST- | 6. | | TERMINA REPORT | | Yes | No | ~ | |
| report type) | ANNUAL REPORT | 7. | Year 2014 | | | | | IG METH CHECK C | | | | PAPER | | / | DISKE | TTE | |
| Name of Office S | Sought by Candida | te: | • | | | | | DATE (| OF ELE | CTIC | N | District Number | Office Code | Par | ty Code | County | , |
| | , | | | | | | | МО | DAY | YI | EAR | Number | code | | | code | |
| | | | | | | | | 1: | L | 4 | 2014 | | (SEE IN | ISTRUCTI | ONS FOR C | CODES) | _ |
| • | Receipts and | МО | DAY YE | AR | | | | МО | DAY | Y | EAR | FO | R OFFI | CE USE | ONLY | | |
| Expenditures | 5 Trom: | | 6 10 | 20 |)14 | T | 0 | Ġ | 9 | 15 | 2014 | | | | | | |
| A. Amount Bro | ught Forward Froi | n Last R | eport | | | | \$ | | | 450, | 719.22 | | | | | | |
| B. Total Monet | ary Contributions | And Rec | eipts (From Sc | hec | lule 1 | I) | \$ | | | | 0.00 | | | | | | |
| C. Total Funds | Available (Sum O | f Lines A | and B) | | | | \$ | | | 450, | 719.22 | | | | | | |
| D. Total Expen | ditures (From Sch | edule II | I) | | | | \$ | | | 116,5 | 500.00 | | | | | | |
| E. Ending Cash | Balance (Subtrac | t Line D | From Line C) | | | | \$ | | : | 334,2 | 19.22 | | | | | | |
| F. Value Of In- | Kind Contributions | s Receiv | ed (From Sche | dul | e II) | | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Obligations | (From S | Schedule IV) | | | | \$ | | | | 0.00 | | | • | | | |
| | | | Al | F | [DA | VI | ΓSE | CTION | | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, trea | surer sign here | e. I | f this | s is | a Can | ndidate r | eport, | candi | date sig | ın here. | | | | | |
| I swear (or affirm) correct and comple |) that this report, inc ete. | luding the | e attached schedu | les | filed | on p | paper o | or by elec | tronic m | edium | , are to t | he best o | f my kno | wledge | and belie | ef , true | å, |
| Sworn to and subs | cribed before me this day of | 5 | 20 | | | | | | | S | Signature | of Perso | n Submit | ting Re _l | ort | | , |
| | Signatu | re | | | | | - | | | | | Prin | ted Name | e | | | - |
| My Commission Ex | cpires | | | | | | _ | | Email | | | | | | | | |
| | МО | D | AY Y | /R | | | | | Ar | ea Cod | le | Daytim | e Telepi | none Nu | mber | | |
| Part II- If this is | a report of a can | didate's | authorized Cor | nm | ittee | , Ca | andida | ate shall | sign h | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of r | ny knowl | edge and belief tl | his | politi | cal | commi | ittee has | not viola | ted ar | y provis | ions of th | e act of J | une 3,1 | 937 (P.L | . 1333, | ı |
| Sworn to and subso | ribed before me this | | | | | | | | Signature of Candidate | | | | | | | | ۱ |
| | day of | | | | | | - | | | | | Printe | d Name | | | | ا . |
| | Signature | | | | | | - | | | | | | | | | | . |
| My Commission Exp | pires | | | | | | | | | | | Ema | il | | | | |
| | МО | D | AY | YR | | | • | | Area | Code | | Da | aytime T | elephor | e Numb | er | |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | g Period | | |
|--|-----------|-----------------|--------------|-----------|
| LOCAL 0032BJ PA AMERICAN DREAM FUND | From: | <u>6/10/201</u> | <u>4</u> To: | 9/15/2014 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reporting | g Period | (1) | \$ | 0.00 |
| 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) | | | | |
| Contributions Received From Political Committees (Part A) | | | \$ | 0.00 |
| All Other Contributions (Part B) | | | \$ | 0.00 |
| TOTAL for the Reporting | g 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 |
| All Other Contributions (Part D) | | | \$ | 0.00 |
| TOTAL for the Reporting | g Period | (3) | \$ | 0.00 |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) | | | | |
| TOTAL for the Reporting | g Period | (4) | \$ | 0.00 |
| | | | | - |
| Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa | | | \$ | 0.00 |

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

| | this Part to itemize onl with an aggregate value | | \$2 | 250.00 |) in the | | | |
|------------------------|--|-----------------------------|-----|--------|----------|------|----|------------|
| Nume of Fining Comm | intec of cumulate | Reporting Period From: To: | | | | : | | |
| | | | | | DATE | | | AMOUNT |
| Full Name of Contribut | ing Committee | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) |) | | | | | |
| | ! | I | ! | | <u> </u> | | | DAGE TOTAL |

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

| PAGE TOTAL |
|------------|
| \$ 0.00 |

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 | | Rep | oorting P | eriod | | | |
|-----------------------------|-----------|-------------------|-----|-----------|-------|------|----------|-------|
| | | | Fro | m: | | To | : | |
| | | | | | DATE | | А | MOUNT |
| Full Name of Contributor | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ \$ | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | | |

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

PAGE TOTAL \$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 Candi | lame of Filing Committee or Candidate | | | Reporting Period | | | | | | |
|-----------------------------------|---------------------------------------|---------------|-------------|------------------|-----|------|----|------------|--|--|
| | | | From: | | | То: | | | | |
| | | | | DA | TE | | Α | MOUNT | | |
| Full Name of Contributing Commit | tee | | | мо | DAY | YEAR | | | | |
| Mailing Address | | | | | | | \$ | 0.00 | | |
| City | State | Zip Cod | e (Plus 4) | | | | | | | |
| | | | | | | | | PAGE TOTAL | | |
| Enter Grand Total of Part C on S | Schedule I, Detail | ed Summary Pa | age, Sectio | n 3. | | | \$ | 0.00 | | |

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 Candida | me of Filing Committee or Candidate | | | Rep | orting Pe | riod | | | | |
|---|-------------------------------------|-----------|--------------|--------------|-----------|-------|------|----------|------------|--|
| | | | | Froi | n: | | То | То: | | |
| | | | | | D | ATE | | AN | MOUNT | |
| Full Name of Contributor | | | | | МО | DAY | YEAR | | | |
| Mailing Address | | | | | | | | \$ | 0.00 | |
| City | State | Zi | p Code (Plus | i 4) | | | | | | |
| Employer Name | • | • | | | Occupa | tion | • | • | | |
| Employer Mailing Address/Principal Business | Place of | | City | | | State | | Zip Code | e (Plus 4) | |
| Enter Grand Total of Part C on So | chedule I, Deta | iled Sumr | mary Page, | Section | on 3. | | | P | AGE TOTAL | |
| | | | | | | | | • | 0.00 | |

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 C | Candidate | | Report | ing Perio | bd | | | |
|-------------------------------|------------------------|---|---------|-----------|-----|------|-----------|------|
| | | | From: | | | To: | | |
| | | | | D | ATE | | AMOUNT | |
| Full Name | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (| Plus 4) | | | | | |
| Receipt Description | | | | | | | | |
| Enter Grand Total of Part E o | n Schedule T. Detailed | l Summary Page | Section | 4. | | | PAGE TOTA | AL |
| | | · • • • • • • • • • • • • • • • • • • • | | | | | \$ | 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 | İ | |
|--|------------------|-----------------------------|-----------|
| LOCAL 0032BJ PA AMERICAN DREAM FUND | From: | <u>6/10/2014</u> To: | 9/15/2014 |
| 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 | T F) | | |
| 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, | | \$ | 0.00 |

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Candidat | :e | | Reporting | g Period | | | |
|--------------------------------------|--------------------|-----------------------|-------------|-------------|-------|-----------|------------|
| | | | From: | | | То: | |
| | | | | DATE | | | AMOUNT |
| 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 Sch | andula II. In-Kir | nd Contributions Data | ilad Sum | mary Pag | | | DACE TOTAL |
| Section 2. | iedule II, III-KII | ia contributions Deta | iiieu Suiii | iliai y Pag | , je, | | PAGE TOTAL |
| | | | | | | \$ | 0.00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | е | | | | Re | porting | Period | | | | |
|---|--------------|---------|------------|---------|--------|-----------|-----------|--------|-------|------------------------|--|
| | | | | | Fro | From: | | | То: | | |
| | | | | | • | | DATE | | | AMOUNT | |
| Full Name of Contributor | | | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | | | | \$ | 0.00 | |
| City | State | | Zip Code(I | Plus 4) | | | | | | | |
| Employer of Contributor | -1 | | • | | | Occupa | ation | | | | |
| Employer Mailing Address/Principal Pla Business | ace of | City | | State | | Zip 4) | Code(Plus | Descri | ption | of Contribution | |
| Enter Grand Total of Part G on Sc Summary Page, Section 3. | hedule II, I | in-Kind | Contributi | ons De | etaile | ed | | | | PAGE TOTAL 0.00 | |

STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting |) Period | | |
|---------------------------------------|-----------|-----------|-----|-----------|
| LOCAL 0032BJ PA AMERICAN DREAM FUND | From | 6/10/2014 | То: | 9/15/2014 |
| | | DATE | | AMOUNT |

| | | | DATE | | | | AMOUNT | | |
|--|--|-----------------------------------|--|---------------------------|--|----|-----------|--|--|
| To Whom Paid Friends of Blondell Reynolds Brown | | | мо | DAY | YEAR | | | | |
| Mailing Address PO Box 22556 | | | 6 | 13 | 2014 | \$ | 500.00 | | |
| City Philadelphia State Zip Code (Plus 4) PA 19101 | | | Description of Expenditure Political Contributions | | | | | | |
| To Whom Paid Moving Frankford Forward PAC | | | МО | DAY | YEAR | | | | |
| Mailing Address 4922 Duffield Street | | | 6 | 13 | 2014 | \$ | 1,000.00 | | |
| City Philadelphia | hiladelphia State PA Zip Code (Plus 4) 19124 | | | | Description of Expenditure Political Contributions | | | | |
| To Whom Paid Friends of Stephen Kinsey | | | МО | DAY | YEAR | | | | |
| Mailing Address P.O. Box 27331 | | | 6 | 20 | 2014 | \$ | 500.00 | | |
| City Philadelphia | State PA | Zip Code (Plus 4) 19118 | Description of Expenditure Political Contributions | | | | | | |
| To Whom Paid Friends of Theresa Kail-Smith | | | МО | DAY | YEAR | | | | |
| Mailing Address P.O. Box 25346 | | | 6 | 20 | 2014 | \$ | 300.00 | | |
| City Pittsburgh | State PA | Zip Code (Plus 4) 15220 | 1 | otion of Exp | | | | | |
| To Whom Paid SEIU Local 32BJ | | | МО | DAY | YEAR | | | | |
| Mailing Address 25 W 18th St., 5th | floor | | 6 | 20 | 2014 | \$ | 50,000.00 | | |
| City New York State Zip Code (Plus 4) NY 10011 | | | | otion of Export for staff | | | costs. | | |

| | | | | | | PAC | GE 12 | |
|---|--|--|--|--|------------------|-----|----------|--|
| To Whom Paid Allegheny County Democrartic Commit | мо | DAY | YEAR | | | | | |
| Mailing Address 429 Forbes Avenue, | Suite 1301 | | 7 | 11 | 2014 | \$ | 200.00 | |
| City Pittsburgh | State PA | Zip Code (Plus 4) 15219 | | otion of Exp | | | | |
| To Whom Paid Friends of Steve McCarter | | | мо | DAY | YEAR | | | |
| Mailing Address P.O. Box 467 | | | 7 | 11 | 2014 | \$ | 250.00 | |
| City Glenside | State Zip Code (Plus 4) PA 19038 | | | Description of Expenditure Political Contributions | | | | |
| To Whom Paid Friends of Deb Gross | | | МО | DAY | YEAR | | | |
| Mailing Address P.O. Box 40359 | | | 7 | 11 | 2014 | \$ | 500.00 | |
| City Pittsburgh | State PA | Zip Code (Plus 4) 15210 | Description of Expenditure Political Contributions | | | | | |
| To Whom Paid Democratic County Executive Committee | ee | | МО | DAY | YEAR | | | |
| Mailing Address 219 Spring Garden | Street | | 7 | 21 | 2014 | \$ | 1,000.00 | |
| City Philadelphia | State PA | Zip Code (Plus 4) 19123 | Descrip Politica | | | | | |
| To Whom Paid RE-ELECT COUNCILMAN GOODE | | | МО | DAY | YEAR | | | |
| Mailing Address 4402 SHERWOOD R | OAD | | 7 | 21 | 2014 | \$ | 2,000.00 | |
| City Philadelphia | State PA | Zip Code (Plus 4) 19131-1526 | Description of Expenditure Political Contributions | | | | | |
| | | | | | | | | |
| To Whom Paid Friends of Gene DiGirolamo | | | МО | DAY | YEAR | | | |
| | 3 | | MO 8 | 4 | YEAR 2014 | \$ | 1,000.00 | |

| | | | | | | | PAGE | 13 |
|---|---------------------------|--------------------|-----------------------------------|--|---|------|---------------|----------|
| To Whom Paid Friends of Bruce Kraus | | | | | DAY | YEAR | | |
| Mailing Address PO Box 42316 | | | 8 | 11 | 2014 | \$ | 1,000.00 | |
| City Pittsburgh | | State PA | Zip Code (Plus 4) 15203 | | otion of Exp | | | |
| To Whom Paid Friends of Ed Gainey | | | | МО | DAY | YEAR | | |
| Mailing Address P. | ing Address P.O. Box 5208 | | | 8 | 11 | 2014 | \$ | 1,000.00 |
| City Pittsburgh | | State PA | Zip Code (Plus 4) 15206 | | otion of Exp | | | |
| To Whom Paid People for Deberah K | ula | | | МО | DAY | YEAR | | |
| Mailing Address 71 North Mt. Vernon Avenue | | | 8 | 11 | 2014 | \$ | 1,000.00 | |
| City Uniontown | | State PA | Zip Code (Plus 4) 15401 | Description of Expenditure Political Contributions | | | | |
| To Whom Paid Committee to Elect P | am Snyder | | | МО | DAY | YEAR | | |
| Mailing Address P. | O. Box 545 | | | 8 | 19 | 2014 | \$ | 1,000.00 |
| City Harrisburg | | State PA | Zip Code (Plus 4) 17108 | Description of Expenditure Political Contributions | | | | |
| To Whom Paid Friends of Brandon N | euman | | | МО | DAY | YEAR | | |
| Mailing Address 97 | 7 Green Valley Roa | d | | 8 | 19 | 2014 | \$ | 500.00 |
| City Eighty Four | | State PA | Zip Code (Plus 4) 15330 | | Description of Expenditure Political Contributions | | | |
| To Whom Paid SEIU Local 32BJ | | | | МО | DAY | YEAR | | |
| Mailing Address 25 | 5 W 18th St., 5th fl | oor | | 8 | 22 | 2014 | \$ | 500.00 |
| City New York | | State NY | Zip Code (Plus 4) 10011 | | otion of Exp nt for staff | | r in-kind cos | s. |
| | | | 1 | | | | | |

| To Whom Paid PA SEIU COPE | | | | DAY | YEAR | | | | |
|--|-----------------|-----------------------------------|---|--|--|----|------------------|--|--|
| Mailing Address 1500 N. 2nd St., Suite 11 | | | 9 | 2 | 2014 | \$ | 50,000.00 | | |
| City Harrisburg | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| names and | PA | 17102 | | l Contribut | | | | | |
| To Whom Paid Campaign for Compassion | | | мо | DAY | YEAR | | | | |
| Mailing Address 6800 Stenton Avenue | | | 9 | 5 | 2014 | \$ | 500.00 | | |
| City Philadelphia | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| PA 19150 | | | Political Contributions | | | | | | |
| To Whom Paid Citizens for Boyle | | | МО | DAY | YEAR | | | | |
| Mailing Address P.O. Box 11545 | | | 9 | 5 | 2014 | \$ | 750.00 | | |
| City Philadelphia | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| , | PA | 19116 | Description of Expenditure Political Contributions | | | | | | |
| | | | | | | | | | |
| To Whom Paid Friends of Matt Bradford | | | МО | DAY | YEAR | | | | |
| | | | мо | DAY 5 | YEAR 2014 | \$ | 750.00 | | |
| Friends of Matt Bradford Mailing Address P.O. Box 349 | State | Zip Code (Plus 4) | 9 | | 2014 | \$ | 750.00 | | |
| Friends of Matt Bradford Mailing Address P.O. Box 349 | State PA | Zip Code (Plus 4) 19404 | 9 Descrip | 5 | 2014 penditure | \$ | 750.00 | | |
| Friends of Matt Bradford Mailing Address P.O. Box 349 | | | 9 Descrip | 5 otion of Exp | 2014 penditure | \$ | 750.00 | | |
| Friends of Matt Bradford Mailing Address P.O. Box 349 City Norristown To Whom Paid | | | 9 Descrip Political | 5 Stion of Exp I Contribut | 2014 Denditure | \$ | 750.00 750.00 | | |
| Friends of Matt Bradford Mailing Address P.O. Box 349 City Norristown To Whom Paid Friends of Maria P. Donatucci Mailing Address 1526 Wolf Street | | | 9 Descrip Political MO | 5 Ition of Exp | 2014 cenditure cions YEAR 2014 | | | | |
| Friends of Matt Bradford Mailing Address P.O. Box 349 City Norristown To Whom Paid Friends of Maria P. Donatucci Mailing Address 1526 Wolf Street | PA | 19404 | 9 Descrip Political MO 9 Descrip | 5 Day Day | 2014 cenditure cions YEAR 2014 cenditure | | | | |
| Friends of Matt Bradford Mailing Address P.O. Box 349 City Norristown To Whom Paid Friends of Maria P. Donatucci Mailing Address 1526 Wolf Street | PA State | 19404 Zip Code (Plus 4) | 9 Descrip Political MO 9 Descrip | DAY Stion of Exp | 2014 cenditure cions YEAR 2014 cenditure | | | | |
| Friends of Matt Bradford Mailing Address P.O. Box 349 City Norristown To Whom Paid Friends of Maria P. Donatucci Mailing Address 1526 Wolf Street City Philadelphia | PA State | 19404 Zip Code (Plus 4) | 9 Descrip Political MO 9 Descrip Political | DAY 5 Stion of Exp Contribut 5 Contribut | 2014 penditure ions YEAR 2014 penditure ions | | | | |
| Friends of Matt Bradford Mailing Address P.O. Box 349 City Norristown To Whom Paid Friends of Maria P. Donatucci Mailing Address 1526 Wolf Street City Philadelphia To Whom Paid Kenney 2015 | PA State | 19404 Zip Code (Plus 4) | 9 Descrip Political MO 9 Descrip Political MO | DAY 5 Stion of Exp Contribut DAY | 2014 Denditure ions YEAR 2014 Denditure ions YEAR 2014 | \$ | 750.00 | | |

| To Whom Paid Steve Santarsiero for State Representative | | | МО | DAY | YEAR | |
|--|--------------------------|--|----|--------------|------|------------------------------------|
| Mailing Address P.O. Box 352 | | | 9 | 5 | 2014 | \$ 750.00 |
| City Yardley | State PA | Zip Code (Plus 4) 19067-8352 | 1 | otion of Exp | | |
| Enter Grand Total of Exp | penditures on Page 1, Re | port Cover Page, Item D | | | | \$ PAGE TOTAL 116,500.00 |
| | | | | | | |
| | | | | | | |