

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		20130096		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> ALLIANCE FOR A BETTER PENNSYLVANIA												
<b>Street Address:</b> 500 NORTH 12TH STREET												
<b>City:</b> LEMOYNE						<b>State:</b> PA			<b>Zip Code:</b> 17043			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2014		<b>FILING METHOD ( ) CHECK ONE</b>		<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>				
						11	4	2014				
									(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		9	16	2014		10	20	2014				
<b>A. Amount Brought Forward From Last Report</b>						\$ 3,809.92						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 143,170.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 146,979.92						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 142,440.00						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 4,539.92						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 92,135.00						

## 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
ALLIANCE FOR A BETTER PENNSYLVANIA	From: <u>9/16/2014</u> To: <u>10/20/2014</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 143,170.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 143,170.00

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

<b>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.)</b>	\$ 143,170.00
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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	Reporting Period
	From: To:

DATE			AMOUNT
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Full Name of Contributor			MO	DAY	YEAR	\$0.00
Mailing Address						
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 Candidate	Reporting Period	
	From:	To:

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

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

<b>PAGE TOTAL</b>
\$ 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.)**

<b>Name of Filing Committee or Candidate</b>  ALLIANCE FOR A BETTER PENNSYLVANIA	<b>Reporting Period</b>  <b>From:</b> <u>9/16/2014</u> <b>To:</b> <u>10/20/2014</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
NATIONAL ASSOCIATION OF REALTORS							
Mailing Address 430 N. MICHIGAN AVE.				5	20	2014	\$ 17,000.00
City CHICAGO	State IL	Zip Code (Plus 4) 60611					
Employer Name SAME				Occupation MEMBERSHIP ASSOCIATION			
Employer Mailing Address/Principal Place of Business SAME			City		State	Zip Code (Plus 4)	

Full Name of Contributor				MO	DAY	YEAR	
NATIONAL ASSOCIATION OF REALTORS							
Mailing Address 430 N. MICHIGAN AVE.				5	27	2014	\$ 4,375.00
City CHICAGO	State IL	Zip Code (Plus 4) 60611					
Employer Name SAME				Occupation MEMBERSHIP ASSOCIATION			
Employer Mailing Address/Principal Place of Business SAME			City		State	Zip Code (Plus 4)	

Full Name of Contributor				MO	DAY	YEAR	
NATIONAL ASSOCIATION OF REALTORS							
Mailing Address 430 N. MICHIGAN AVE.				10	18	2014	\$ 121,795.00
City CHICAGO	State IL	Zip Code (Plus 4) 60611					
Employer Name SAME				Occupation MEMBERSHIP ASSOCIATION			
Employer Mailing Address/Principal Place of Business SAME			City		State	Zip Code (Plus 4)	

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

**PAGE TOTAL**

\$ 143,170.00

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	
	From:	To:

			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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
ALLIANCE FOR A BETTER PENNSYLVANIA		From: <u>9/16/2014</u> To: <u>10/20/2014</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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 F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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			DATE	AMOUNT		
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

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# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
ALLIANCE FOR A BETTER PENNSYLVANIA	From <u>9/16/2014</u> To: <u>10/20/2014</u>

DATE				AMOUNT		
To Whom Paid MCLAUGHLIN & ASSOCIATES			MO	DAY	YEAR	\$ 18,000.00
Mailing Address 566 SOUTH ROUTE 303			10	9	2014	
City BLAUVELT	State NY	Zip Code (Plus 4) 10913	Description of Expenditure PA HD 81-FLECKCABLE INDEPENDENT EXPENDITURE			
To Whom Paid MCLAUGHLIN & ASSOCIATES			MO	DAY	YEAR	\$ 36,000.00
Mailing Address 566 SOUTH ROUTE 303			10	16	2014	
City BLAUVELT	State NY	Zip Code (Plus 4) 10913	Description of Expenditure PAHD 81-FLECKCABLE INDEPENDENT EXPENDITURE			
To Whom Paid KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 3,375.00
Mailing Address 500 N. 12TH STREET SUITE 100			5	29	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAHD194-SAYLORDIRECTMAIL			
To Whom Paid KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 3,375.00
Mailing Address 500 N. 12TH STREET SUITE 100			5	29	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAHD94-SAYLORDIRECTMAIL			
To Whom Paid KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 3,850.00
Mailing Address 500 N. 12TH STREET SUITE 100			5	29	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAHD103-KIMDIRECTMAIL			

To Whom Paid KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 3,850.00
Mailing Address 500 N. 12TH STREET SUITE 100			5	29	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAHD103-KIMDIRECTMAIL			

To Whom Paid KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 2,550.00
Mailing Address 500 N. 12TH STREET SUITE 100			5	29	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAHD183-HARHARTDIRECTMAIL			

To Whom Paid KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 1,875.00
Mailing Address 500 N. 12TH STREET SUITE 100			5	29	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAHD103-KIMLIVECALLS			

To Whom Paid KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 1,250.00
Mailing Address 500 N. 12TH STREET SUITE 100			5	29	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAHD94-SAYLORLIVECALLS			

To Whom Paid KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 1,250.00
Mailing Address 500 N. 12TH STREET SUITE 100			5	29	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAHD183-HARHARTLIVECALLS			

To Whom Paid KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 4,355.00
Mailing Address 500 N. 12TH STREET SUITE 100			10	17	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAHD81-FLECKDIRECTMAIL			

To Whom Paid KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 4,355.00
Mailing Address 500 N. 12TH STREET SUITE 100			10	17	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAHD81-FLECKDIRECTMAIL			

To Whom Paid KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 4,355.00
Mailing Address 500 N. 12TH STREET SUITE 100			10	17	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAHD81-FLECKDIRECTMAIL			

To Whom Paid KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 6,000.00
Mailing Address 500 N. 12TH STREET SUITE 100			10	17	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAS26-MCGARRIGLEDIRECTMAIL			

To Whom Paid KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 6,000.00
Mailing Address 500 N. 12TH STREET STE 100			10	17	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAS26-MCGARRIGLEDIRECTMAIL			

To Whom Paid KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 6,000.00
Mailing Address 500 N. 12TH STREET STE 100			10	17	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAS26-MCGARRIGLEDIRECTMAIL			

To Whom Paid KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 6,000.00
Mailing Address 500 N. 12TH STREET SUITE 100			10	17	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAHD104-HELMDIRECTMAIL			

<b>To Whom Paid</b> KEYSTONE ANALYTICS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 500 N. 12TH STREET SUITE 100			10	17	2014	
<b>City</b> LEMOYNE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17043	<b>Description of Expenditure</b> INDEPENDENT EXPENDITURE, PAHD104- HELMDIRECTMAIL			

  

<b>To Whom Paid</b> KEYSTONE ANALYTICS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 500 N. 12TH STREET SUITE 100			10	17	2014	
<b>City</b> LEMOYNE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17043	<b>Description of Expenditure</b> INDEPENDENT EXPENDITURE, PAHD163- SANTORADIRECTMAIL			

  

<b>To Whom Paid</b> KEYSTONE ANALYTICS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 500 N. 12TH STREET SUITE 100			10	17	2014	
<b>City</b> LEMOYNE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17043	<b>Description of Expenditure</b> INDEPENDENT EXPENDITURE, PAHD163- SANTORADIRECTMAIL			

  

<b>To Whom Paid</b> KEYSTONE ANALYTICS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 500 N. 12TH STREET SUITE 100			10	17	2014	
<b>City</b> LEMOYNE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17043	<b>Description of Expenditure</b> INDEPENDENT EXPENDITURE, PAHD163- SANTORADIRECTMAIL			

  

<b>To Whom Paid</b> KEYSTONE ANALYTICS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 500 N. 12TH STREET SUITE 100			10	17	2014	
<b>City</b> LEMOYNE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17043	<b>Description of Expenditure</b> INDEPENDENT EXPENDITURE, PAHD163- SANTORADIRECTMAIL			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 142,440.00

# 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**

<b>Name of Filing Committee or Candidate</b> ALLIANCE FOR A BETTER PENNSYLVANIA				<b>Reporting Period</b> From: <u>9/16/2014</u> To: <u>10/20/2014</u>			
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<b>DATE</b>						<b>Outstanding Balance of Debt</b>		
<b>Name of Creditor</b> KEYSTONE ANALYTICS					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 4,800.00
<b>Mailing Address</b> 500 N. 12TH STREET STE 100					10	20	2014	
<b>City</b> LEMOYNE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17043		<b>Description of Debt</b> INDEPENDENT EXPENDITURE, PAHD81-FLECKWEBADVERTISING&PRODUCTION				

  

<b>DATE</b>						<b>Outstanding Balance of Debt</b>		
<b>Name of Creditor</b> KEYSTONE ANALYTICS					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 4,355.00
<b>Mailing Address</b> 500 N. 12TH STREET STE 100					10	20	2014	
<b>City</b> LEMOYNE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17043		<b>Description of Debt</b> INDEPENDENT EXPENDITURE, PAHD81-FLECKDIRECTMAIL				

  

<b>DATE</b>						<b>Outstanding Balance of Debt</b>		
<b>Name of Creditor</b> KEYSTONE ANALYTICS					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 5,000.00
<b>Mailing Address</b> 500 N. 12TH STREET STE 100					10	20	2014	
<b>City</b> LEMOYNE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17043		<b>Description of Debt</b> INDEPENDENT EXPENDITURE, PAHD81-FLECKTVPRODUCTION				

  

<b>DATE</b>						<b>Outstanding Balance of Debt</b>		
<b>Name of Creditor</b> KEYSTONE ANALYTICS					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 4,355.00
<b>Mailing Address</b> 500 N. 12TH STREET STE 100					10	20	2014	
<b>City</b> LEMOYNE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17043		<b>Description of Debt</b> INDEPENDENT EXPENDITURE, PAHD81-FLECKDIRECTMAIL				



				DATE			Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 4,355.00	
Mailing Address 500 N. 12TH STREET STE 100			10	20	2014		
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PAHD81-FLECKDIRECTMAIL				
				DATE			Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 1,250.00	
Mailing Address 500 N. 12TH STREET STE 100			10	20	2014		
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PAHD81-FLECKLIVECALLS				
				DATE			Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 6,000.00	
Mailing Address 500 N. 12TH STREET STE 100			10	20	2014		
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PASD26-MCGARRIGLEDIRECTMAIL				
				DATE			Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 2,500.00	
Mailing Address 500 N. 12TH STREET STE 100			10	20	2014		
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PASD26-MCGARRIGLELIVECALLS				
				DATE			Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS			MO	DAY	YEAR	\$ 6,000.00	
Mailing Address 500 N. 12TH STREET STE 100			10	20	2014		
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PAHD104-HELMDIRECTMAIL				

DATE							Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS				MO	DAY	YEAR	\$ 6,000.00
Mailing Address 500 N. 12TH STREET STE 100				10	20	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PAHD104- HELMDIRECTMAIL				
DATE							Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS				MO	DAY	YEAR	\$ 2,500.00
Mailing Address 500 N. 12TH STREET STE 100				10	20	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PAHD104- HEMLLIVECALLS				
DATE							Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS				MO	DAY	YEAR	\$ 6,000.00
Mailing Address 500 N. 12TH STREET STE 100				10	20	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PAHD163- SANTORADIRECTMAIL				
DATE							Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS				MO	DAY	YEAR	\$ 2,500.00
Mailing Address 500 N. 12TH STREET STE 100				10	20	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PAHD163- SANTORALIVECALLS				
DATE							Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS				MO	DAY	YEAR	\$ 5,670.00
Mailing Address 500 N. 12TH STREET STE 100				10	20	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PASD40- SCAVELLODIRECTMAIL				

DATE							Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS				MO	DAY	YEAR	\$ 5,670.00
Mailing Address 500 N. 12TH STREET STE 100				10	20	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PASD40-SCAVELLODIRECTMAIL				
DATE							Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS				MO	DAY	YEAR	\$ 5,670.00
Mailing Address 500 N. 12TH STREET STE 100				10	20	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PASD40-SCAVELLODIRECTMAIL				
DATE							Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS				MO	DAY	YEAR	\$ 5,670.00
Mailing Address 500 N. 12TH STREET STE 100				10	20	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PASD40-SCAVELLODIRECTMAIL				
DATE							Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS				MO	DAY	YEAR	\$ 5,670.00
Mailing Address 500 N. 12TH STREET STE 100				10	20	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PASD40-SCAVELLODIRECTMAIL				
DATE							Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS				MO	DAY	YEAR	\$ 5,670.00
Mailing Address 500 N. 12TH STREET STE 100				10	20	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PASD40-SCAVELLODIRECTMAIL				
DATE							Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS				MO	DAY	YEAR	\$ 5,670.00
Mailing Address 500 N. 12TH STREET STE 100				10	20	2014	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PASD40-SCAVELLODIRECTMAIL				

				DATE			Outstanding Balance of Debt
Name of Creditor KEYSTONE ANALYTICS				MO	DAY	YEAR	\$ 2,500.00
Mailing Address 500 N. 12TH STREET STE 100				10	20	2014	
City LEMOYNE		State PA	Zip Code (Plus 4) 17043	Description of Debt INDEPENDENT EXPENDITURE, PASD40-SCAVELLOLIVEPHONES			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 92,135.00