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 20	13009	96			Rep File	port		CANDI	ANDIDATE COMMITTEE V LOBBYIST							
Name of Filing C	Committee, Can	didate	or Lo	bbyist:		ALL]	IAN	CE FO	R A BETT	ER PE	NNSY	LVANI	<u></u> - Д				
Street Address:	500 NORT	H 12TH	H STR	EET													
City:	LEMOYNE								State:	PA			Zip Cod	le: 17	7043		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		2ND FRIDAY PRIMARY	/ PRE	- [2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		2ND FRIDAY ELECTION	/ PRE	- !	5.	30 DA ELECT		POST-	6. X		TERMINA REPORT?		Yes	No	~
report type)	ANNUAL REPO	RT 7.		Year 2014					IG METHO				PAPER		/	DISKE	TTE
Name of Office S	ought by Cand	idate:							DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County
									мо	DAY	YE	AR		10000			
									11		4	2014		(SEE IN	STRUCTI	ONS FOR (CODES)
Summary of Expenditures		М	10	DAY	YEAR	l		_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
			1	0 21	2	014	Т	<u> </u>	11	-	24	2014					
A. Amount Bro	ught Forward F	rom La	ast Re	port				\$			4,5	39.92					
B. Total Monetary Contributions And Receipts (From Schedule I)						\$			91,4	105.00							
C. Total Funds Available (Sum Of Lines A and B)						\$			95,9	944.92							
D. Total Expenditures (From Schedule III)						\$			92,1	35.00							
E. Ending Cash	Balance (Subt	act Lir	ne D F	rom Line C	:)			\$			3,8	09.92					
F. Value Of In-	Kind Contributi	ons Re	eceive	d (From Sc	hedu	le II	:)	\$				0.00					
G. Unpaid Debt	s And Obligation	ns (Fr	om So	chedule IV)			\$				0.00			'		
					AFF	IDA	\VI	T SE	CTION								
PART I - If this is				_								_					
I swear (or affirm) correct and comple		includir	ng the	attached sch	edules	filed	d on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , true
Sworn to and subs	cribed before me day of	this		20							S	ignature	of Perso	n Submit	ting Rep	oort	
								-					Prin	ted Name	e		
My Commission Ex	-	ature											Emai	il			
	мо		DA	Y	YR			-		Are	a Cod	e		e Teleph	none Nu	mber	
Part II- If this is	a report of a c	andida	ate's a	uthorized	Comn	nitte	e, C	andida	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende		of my k	nowled	dge and belie	ef this	polit	tical	commi	ittee has n	ot viola	ted an	y provisi	ions of the	e act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me t	his								-		Si	ignature o	of Candid	ate		
	day of			20				_					Duint-	d Name			
	Signatu	re						-					Printe	d Name			
My Commission Exp	-												Ema	il			
	МО		DA	Υ	YR			-		Area	Code		Da	aytime T	elephor	ie Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
ALLIANCE FOR A BETTER PENNSYLVANIA	From:	10/21/201	<u>4</u> То	: <u>11/24/2014</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) 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	(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)			\$	91,405.00
TOTAL for the Reporting) Period	(3)	\$	91,405.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	91,405.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use	this Part to itemize onl with an aggregate valu									
Name of Filing Comm	nittee or Candidate		Re	porting	Period					
			From: To:					:		
		'			DATE			AMOUNT		
Full Name of Contribut	ing Committee			МО	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4))							
	'	· · · · · · · · · · · · · · · · · · ·						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 Filling Committee of Canadate			Reporting Period From: To:					
					DATE			AMOUNT
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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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 Candidate		Reporting Period					
ALLIANCE FOR A BETTER PENNSYLVAN	IIA		Fror	m:	10/21/2	<u>014</u> To	: <u>11/24/2014</u>
				D/	ATE		AMOUNT
Full Name of Contributor NATIONAL ASSOCIATION OF REALTORS	5			мо	DAY	YEAR	
Mailing 430 N. MICHIGAN AV	ENUE						\$ 60,000.00
City CHICAGO	State IL	Zip Code (Plus	s 4)	10	23	2014	
Employer Name NATIONAL ASSOCIATION OF REALTORS Employer Mailing Address/Principal Place of City				Occupation TRADE ASSOCIA			SSOCIATION
Employer Mailing Address/Principal Plac Business	e of	City		•	State		Zip Code (Plus 4)
430 N. MICHIGAN AVE. CHICAGO)		IL		60611
Full Name of Contributor NATIONAL ASSOCIATION OF REALTORS	5			мо	DAY	YEAR	
							\$ 31,405.00
NATIONAL ASSOCIATION OF REALTOR:		Zip Code (Plus 60611	s 4)	мо 10	DAY 28	YEAR 2014	\$ 31,405.00
Mailing 430 N. MICHIGAN AV	ENUE State IL		s 4)		28	2014	\$ 31,405.00 SSOCIATION
Mailing 430 N. MICHIGAN AV City CHICAGO	State IL ION OF REALTORS		s 4)	10	28	2014	
Mailing 430 N. MICHIGAN AV City CHICAGO Employer Name NATIONAL ASSOCIAT Employer Mailing Address/Principal Place	State IL ION OF REALTORS	60611		10	28	2014	SSOCIATION

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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		A	MOUNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	·						
Enter Grand Total of Part E on	Schedule T. Detailed	d Summary Page	Section	4			P	AGE TOTAL
	2, 200 0000		22300				\$	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 Per	iod	
ALLIANCE FOR A BETTER PENNSYLVANIA	From:	<u>10/21/2014</u> To:	11/24/2014
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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				Re	porting P	Period			
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (Contributions De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period				
ALLIANCE FOR A BETTER PE	NNSYLVANIA		From	10/2	1/2014	То:	11/24/2014	
				DATE			AMOUNT	
To Whom Paid KEYSTONE ANALYTICS			МО	DAY	YEAR			
Mailing Address 500 N. 12	TH STREET STE 100		10	24	2014	\$	6,000.00	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	INDEPE	otion of Exp ENDENT EX RIGLEDIR	(PENDITU		26-	
To Whom Paid KEYSTONE ANALYTICS			МО	DAY	YEAR			
Mailing Address 500 N. 12	TH STREET STE 100		11	3	2014	\$	2,500.00	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	INDEPE	Description of Expenditure INDEPENDENT EXPENDITURE, PASD26 MCGARRIGLELIVECALLS				
To Whom Paid KEYSTONE ANALYTICS			МО	DAY	YEAR			
Mailing Address 500 N. 12	TH STREET STE 100		11	3	2014	\$	6,000.00	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	INDEPE	otion of Exp ENDENT EX IRECTMAI	(PENDITU		0104-	
To Whom Paid KEYSTONE ANALYTICS			МО	DAY	YEAR			
Mailing Address 500 N. 12	TH STREET STE 100		10	24	2014	\$	6,000.00	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	INDEPE	otion of Exp ENDENT EX IRECTMAI	(PENDITU)104-	
To Whom Paid KEYSTONE ANALYTICS			МО	DAY	YEAR			
Mailing Address 500 N. 12	TH STREET STE 100		11	3	2014	\$	2,500.00	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	INDEPE	otion of Exp ENDENT EX			0104-	

HELMLIVECALLS

						PAGE	12	
To Whom Paid KEYSTONE ANALYTICS			МО	DAY	YEAR			
Mailing Address 500 N. 12TH S	STREET STE 100		10	24	2014	\$	6,000.00	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	INDEPE	otion of Exp ENDENT EX RADIRECT	(PENDITU	JRE, PAHD16	3-	
To Whom Paid KEYSTONE ANALYTICS			МО	DAY	YEAR			
Mailing Address 500 N. 12TH S	STREET STE 100		11	3	2014	\$	2,500.00	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	INDEPE	otion of Exp ENDENT EX RALIVECAL	(PENDITU	JRE, PAHD16	3-	
To Whom Paid KEYSTONE ANALYTICS			МО	DAY	YEAR			
Mailing Address 500 N. 12TH S	STREET STE 100		10	24	2014	\$	5,670.00	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	INDEPE	otion of Exp ENDENT EX LLODIRECT	(PENDITU	JRE, PASD40-	-	
To Whom Paid KEYSTONE ANALYTICS			мо	DAY	YEAR			
Mailing Address 500 N. 12TH S	STREET STE 100		10	24	2014	\$	5,670.00	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	INDEPE	otion of Exp ENDENT EX LLODIRECT	(PENDITU	JRE, PASD40-	-	
To Whom Paid KEYSTONE ANALYTICS			МО	DAY	YEAR			
Mailing Address 500 N. 12TH S	STREET STE 100		10	24	2014	\$	5,670.00	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	INDEPE	otion of Exp ENDENT EX LLODIREC	(PENDITU	JRE, PASD40-	-	
To Whom Paid KEYSTONE ANALYTICS			МО	DAY	YEAR			
Mailing Address 500 N. 12TH STREET STE 100			10	24	2014	\$	5,670.00	
City LEMOYNE	LEMOYNE State Zip Code (Plus 4) PA 17043			Description of Expenditure INDEPENDENT EXPENDITURE, PASD40- SCAVELLODIRECTMAIL				

							PAGE	13
To Whom Paid KEYSTONE ANALYTICS					DAY	YEAR		
Mailing Address 500 N. 12TH STREET STE 100					24	2014	\$	5,670.00
City LEMOYNE	Ē	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PASD40- SCAVELLODIRECTMAIL				
To Whom Paid KEYSTONE ANALYTICS					DAY	YEAR		
Mailing Address 500 N. 12TH STREET STE 100			11	3	2014	\$	4,800.00	
City LEMOYNE	Ē	State PA	Zip Code (Plus 4) 17043	INDEPE	escription of Expenditure DEPENDENT EXPENDITURE, PAHD81- ECKWEBADVERTISING&			
To Whom Paid KEYSTONE ANALYTICS					DAY	YEAR		
Mailing Address	500 N. 12TH STREE	T STE 100		10	24	2014	\$	4,355.00
City LEMOYNE	=	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAHD81- FLECKDIRECTMAIL				
To Whom Paid KEYSTONE ANALYTICS					DAY	YEAR		
Mailing Address 500 N. 12TH STREET STE 100				11	3	2014	\$	5,000.00
City LEMOYNE	Ē	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAHD81- FLECKTVPRODUCTION				
To Whom Paid KEYSTONE ANALYTICS				МО	DAY	YEAR		
Mailing Address 500 N. 12TH STREET STE 100			10	24	2014	\$	4,355.00	
City LEMOYNE	Ē	State PA	Zip Code (Plus 4) 17043	Description of Expenditure INDEPENDENT EXPENDITURE, PAHD81- FLECKDIRECTMAIL				
To Whom Paid KEYSTONE ANALYTICS					DAY	YEAR		
Mailing Address 500 N. 12TH STREET STE 100			11	3	2014	\$	4,355.00	

To Whom Paid KEYSTONE ANALYTICS	мо	DAY	YEAR				
Mailing Address 500 N. 12TH STREET STE 100				3	2014	\$	1,250.00
City LEMOYNE	State	Zip Code (Plus 4)	Descri	tion of Exp	enditure		
	PA	17043	INDEPENDENT EXPENDITURE, PAHD81- FLECKLIVECALLS				081-
To Whom Paid KEYSTONE ANALYTICS			МО	DAY	YEAR		
Mailing Address 500 N. 12TH STREET STE 100			10	24	2014	\$	5,670.00
City LEMOYNE	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17043	INDEPENDENT EXPENDITURE, PASD40- SCAVELLODIRECTMAIL				40-
To Whom Paid KEYSTONE ANALYTICS				DAY	YEAR		
Mailing Address 500 N. 12TH STREET STE 100			11	3	2014	\$	2,500.00
City LEMOYNE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17043	INDEPENDENT EXPENDITURE, PASD40- SCAVELLOLIVEPHONES				
							PAGE TOTAL
Enter Grand Total of Expenditure	es on Page 1, Re	eport Cover Page, Item D	•			\$	92,135.00