

Commonwealth of Pennsylvania

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 : 2003196		Report Filed By :		CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST				
Name of Filing Committee, Candidate or Lobbyist: Killion Victory Committee										
Street Address: 50 S. Providence Road										
City: Media			State: PA		Zip Code: 19063					
TYPE OF REPORT (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.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7. X	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	
		11	25	2014	TO	12	31	2014		
A. Amount Brought Forward From Last Report				\$		20,307.05				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		0.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		20,307.05				
D. Total Expenditures (From Schedule III)				\$		10,521.03				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		9,786.02				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		946.50				
G. Unpaid Debts And Obligations (From Schedule IV)				\$		0.00				

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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
Killion Victory Committee	From: <u>11/25/2014</u> To: <u>12/31/2014</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 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 Period (3)	\$ 0.00

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.)	\$ 0.00
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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	Reporting Period
	From: To:
DATE AMOUNT	

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

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

PAGE TOTAL
\$ 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: _____ To: _____

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

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		
Mailing Address				\$	0.00
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 Killion Victory Committee	Reporting Period From: <u>11/25/2014</u> To: <u>12/31/2014</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)	\$ 250.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$ 696.50
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.)	\$ 946.50

**SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate Killion Victory Committee	Reporting Period From: <u>11/25/2014</u> To: <u>12/31/2014</u>
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Drexelbrook Associates					
Mailing Address 4812 Drexelbrook Drive	11	25	2014	\$	250.00
City Drexel Hill	State PA	Zip Code (Plus 4) 19026			
Description of Contribution: Event Expenses					
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.					PAGE TOTAL \$ 250.00

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

Name of Filing Committee or Candidate Killion Victory Committee	Reporting Period From: <u>11/25/2014</u> To: <u>12/31/2014</u>
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Louis Schiazza					
Mailing Address 50 South Providence Road				\$	696.50
City Media	12	31	2014		
State PA					
Zip Code(Plus 4) 19063					
Employer of Contributor Merves Amon & Barsz LLC	Occupation CPA				
Employer Mailing Address/Principal Place of Business 50 S. Providence Road	City Media	State PA	Zip Code(Plus 4) 19063	Description of Contribution Accounting Services	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					PAGE TOTAL 696.50

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Killion Victory Committee	From <u>11/25/2014</u> To: <u>12/31/2014</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
Impact Strategies LLC	11	26	2014	\$ 2,000.00
Mailing Address 431 Doe Run Lane				
City Springfield	State PA	Zip Code (Plus 4) 19064	Description of Expenditure Campaign Consulting	
To Whom Paid Kari J. Mackley	11	28	2014	\$ 401.10
Mailing Address 645 Old School House Drive				
City Springfield	State PA	Zip Code (Plus 4) 19064	Description of Expenditure Payroll - Net	
To Whom Paid TD Card Services	12	11	2014	\$ 713.19
Mailing Address P.O. Box 2580				
City Cherry Hill	State PA	Zip Code (Plus 4) 080340372	Description of Expenditure Fundraising Expense	
To Whom Paid TD Card Services	12	11	2014	\$ 2,293.63
Mailing Address P.O. Box 2580				
City Cherry Hill	State PA	Zip Code (Plus 4) 080340372	Description of Expenditure Election Day Expenses	
To Whom Paid TD Card Services	12	11	2014	\$ 16.00
Mailing Address P.O. Box 2580				
City Cherry Hill	State PA	Zip Code (Plus 4) 080340372	Description of Expenditure Parking	

To Whom Paid TD Card Services			MO	DAY	YEAR	
Mailing Address P.O. Box 2580			12	11	2014	
City Cherry Hill	State PA	Zip Code (Plus 4) 080340372	Description of Expenditure Conference Expenses			
To Whom Paid TD Card Services			MO	DAY	YEAR	
Mailing Address P.O. Box 2580			12	11	2014	
City Cherry Hill	State PA	Zip Code (Plus 4) 080340372	Description of Expenditure Lodging			
To Whom Paid Verizon Wireless			MO	DAY	YEAR	
Mailing Address P.O. Box 25505			12	11	2014	
City Lehigh Valley	State PA	Zip Code (Plus 4) 180025505	Description of Expenditure Telephone			
To Whom Paid Verizon			MO	DAY	YEAR	
Mailing Address P.O. Box 28000			12	11	2014	
City Lehigh Valley	State PA	Zip Code (Plus 4) 180028000	Description of Expenditure Telephone			
To Whom Paid Verizon			MO	DAY	YEAR	
Mailing Address P.O. Box 28000			12	11	2014	
City Lehigh Valley	State PA	Zip Code (Plus 4) 180028000	Description of Expenditure Telephone			
To Whom Paid Cardinal O'Hara Home & School Association			MO	DAY	YEAR	
Mailing Address P.O. Box 317			12	11	2014	
City Prospect Park	State PA	Zip Code (Plus 4) 19076	Description of Expenditure Contribution			

To Whom Paid Linda Filipone			MO	DAY	YEAR	\$	1,000.00
Mailing Address 223 Mildred Road			12	17	2014		
City Springfield	State PA	Zip Code (Plus 4) 19064	Description of Expenditure Payroll - Net				
To Whom Paid Teresa Schmidt			MO	DAY	YEAR	\$	500.00
Mailing Address 4641 West Chester Pike			12	17	2014		
City Newtown Square	State PA	Zip Code (Plus 4) 19073	Description of Expenditure Payroll - Net				
To Whom Paid Alison Hagler			MO	DAY	YEAR	\$	500.00
Mailing Address P.O. Box 202168			12	17	2014		
City Harrisburg	State PA	Zip Code (Plus 4) 17120	Description of Expenditure Payroll - Net				
To Whom Paid Kari J. Mackley			MO	DAY	YEAR	\$	500.00
Mailing Address 645 Old School House Drive			12	17	2014		
City Springfield	State PA	Zip Code (Plus 4) 19064	Description of Expenditure Campaign Worker				
To Whom Paid Kari J. Mackley			MO	DAY	YEAR	\$	401.10
Mailing Address 645 Old School House Drive			12	17	2014		
City Springfield	State PA	Zip Code (Plus 4) 19064	Description of Expenditure Payroll - Net				
To Whom Paid Kathy A. Mruk			MO	DAY	YEAR	\$	500.00
Mailing Address 551 10th Avenue			12	18	2014		
City Prospect Park	State PA	Zip Code (Plus 4) 19076	Description of Expenditure Campaign Worker				

To Whom Paid Denise Harris			MO	DAY	YEAR	
Mailing Address 205 Stanbridge Road			12	18	2014	
City Holmes	State PA	Zip Code (Plus 4) 19043	Description of Expenditure Campaign Worker			
To Whom Paid Margaret M. Sanders			MO	DAY	YEAR	
Mailing Address 144 N. Main Street			12	18	2014	
City Elmer	State NJ	Zip Code (Plus 4) 08318	Description of Expenditure Campaign Worker			
To Whom Paid Natalie Schuelie			MO	DAY	YEAR	
Mailing Address 50 S. Providence Road			12	18	2014	
City Media	State PA	Zip Code (Plus 4) 19063	Description of Expenditure Campaign Worker			
To Whom Paid Irish Immigration Center			MO	DAY	YEAR	
Mailing Address 7 South Cedar Lane			12	22	2014	
City Upper Darby	State PA	Zip Code (Plus 4) 19082	Description of Expenditure Contribution			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 10,521.03

