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	20120	363				Repor Filed		CA	NDII	DATE		COMN	1ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Ca	andida	te or Lo	bbyis	t:	C	RIS D	USH (CAMP	AIGN	и сом	MIT	TEE		·				
Street Address:																			
City:	BROOKV	ILLE							Stat	e:	PA			Zip Cod	le: 15	825			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND F PRIMA	RIDAY ARY	PRE-	2.	30 D. PRIM		Р				AMENDMENT REPORT?		Yes	√ No)	
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND F ELECT		PRE-	5. X	30 D.	AY TION	Р	OST-	6.		TERMINA REPORT?		Yes	No)	√
report type)	ANNUAL REF	PORT	7.	Year	2014				NG MI					PAPER		√	DISKI	TTE	
Name of Office S	ought by Car	ndidate	e:				•		DAT	ΈO	F ELE	CTI	ON	District Number	Office Code	Par	ty Code	Cour	
									МО		DAY	Y	EAR			REP	•		
										11		4	2014		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of Expenditures		nd	МО	DA	Y	YEAR			МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
				9	16	20	14 7	О		10		20	2014						
A. Amount Bro	ught Forward	l From	Last R	eport				\$				3,	936.16						
B. Total Moneta	ary Contribut	ions A	nd Rec	eipts (From	Sched	ule I)	\$	5			14,	825.00						
C. Total Funds	Available (Su	ım Of I	Lines A	and B)			\$	5			18,	761.16						
D. Total Expend	ditures (From	1 Sche	dule II	[)				\$	5			4,	595.34						
E. Ending Cash	Balance (Sul	btract	Line D	From I	Line C)		\$	<u> </u>			14,	165.82						
F. Value Of In-	Kind Contribu	utions	Receive	ed (Fr	om Sc	hedule	e II)	\$	5			2,	629.18						
G. Unpaid Debt	s And Obliga	tions (From S	chedu	le IV)			\$	5				230.00		,				
						AFFI	DAV:	T SE	CTI	NC									
PART I - If this is	a Committee	e repo	rt, trea	surer	sign h	ere. If	this i	s a Ca	ndida	te re	port, o	cand	idate sig	ın here.					
I swear (or affirm) correct and comple		rt, inclu	ding the	attach	ed sch	edules 1	filed on	paper	or by	electr	ronic m	ediun	n, are to t	he best o	f my knov	/ledge	and bel	ief , tr	ue
Sworn to and subs	cribed before n day of	ne this		20									Signature	of Perso	1 Submitt	ing Rep	ort		
		gnature	•	-				_						Prin	ted Name				_
My Commission Ex	rpires							_		•				Emai	I				
	МО		D/	Υ		YR					Ar	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candi	date's	autho	rized (Commi	ittee, (Candid	late s	halls	sign h	ere.							
I swear (or affirm) No 320) as amende		st of my	/ knowle	dge an	d belie	f this p	olitical	comm	nittee l	nas no	ot viola	ted a	ny provisi	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before mo	e this		20									Si	ignature o	of Candida	te			_
	— — —			20 -				_						Printe	d Name				-
	Signa	ature						_											_
My Commission Exp	ires													Emai	II.				
	M	0	DA	λY		YR		_			Area	Code		Da	ytime Te	lephor	e Numi	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
CRIS DUSH CAMPAIGN COMMITTEE	From:	9/16/2014	<u>4</u> То:	10/20/2014
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	J 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	J 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

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 Candidat	e	'	Reporting	Period			
		'	From:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Committee			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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						
Fr			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	e of Filing Committee or Candidate		Reporting	Period					
			From:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	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			Rep	orting Pe	riod			
			Fror	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	on 3.		:	\$	PAGE 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 Candidate		Report	ing Peri	od			
			From:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<u>'</u>	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	4.			\$	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	
CRIS DUSH CAMPAIGN COMMITTEE	From:	<u>9/16/2014</u> To:	10/20/2014
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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)	\$	326.44
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	2,302.74
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,		\$	2,629.18

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	Period			
CRIS DUSH CAMPAIGN COMMITTEE			From:	<u>9</u> /	<u>/16/2014</u>	To:	10/20/2014
		•		DATE			AMOUNT
Full Name of Contributor				DAY	VEAD		
JOHN WAGNER	МО	DAY	YEAR	\$	200.00		
Mailing Address	10	1	2014	┐	200.00		
City BROOKVILLE	State	Zip Code (Plus 4)					
	PA	15825					
Description of Contribution: CAMPAI	I GN HEADQUARTER	S UTILITIES	•	•	•		
Full Name of Contributor				DAY	YEAR		
HOUSE REPUBLICAN CAMPAIGN COMM			МО	DAY	YEAK		126.44
Mailing Address			10	10	2014	- \$	126.44
City HARRISBURG	State	Zip Code (Plus 4)			2014		
	PA	17108					
Description of Contribution: POSTCA	RDS & LISTS	•				•	
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind	Contributions Deta	iled Sum	mary Pag	je,		PAGE TOTAL
555.5.1 21						\$	326.44

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or 0	Candidate			Re	portir	ng P	eriod			
CRIS DUSH CAMPAIGN COMM	MITTEE			Fro	From: 9/16/201				<u>10/20/2014</u>	
							DATE	AMOUNT		
Full Name of Contributor					мо		DAY	YEAR		
JOHN WAGNER									_	2 000 00
Mailing Address					:	10	1	2014	\$	2,000.00
City BROOKVILLE	State		Zip Code(Plus 4)							
	15825									
Employer of Contributor S	ELF				Осс	upa	tion D	OCTOR		
Employer Mailing Address/Pri	ncipal Place of Business	Ci	ty	Stat	e Z	Zip (Code(Plus 4)	Descri	otion	of Contribution
		BF	ROOKVILLE					CAMPA	IGN	HEADQUARTERS
Full Name of Contributor					МО		DAY	YEAR		
HOUSE REPUBLICAN CAMPAI	GN COMM.						2			202 74
Mailing Address						9	26	2014	\$	302.74
City HARRISBURG	State		Zip Code(Plus 4)		1					
	PA		17108							
Employer of Contributor	!				Осс	upa	tion			
Employer Mailing Address/Pri	Ci	ty	Stat	:e 2	Zip (Code(Plus 4)	Descri	otion	of Contribution	
								POSTC	ARD	S & LISTS
Enter Grand Total of Part	Inter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed					PAGE TOTAL				
Summary Page, Section 3					2,302.74					

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
CRIS DUSH CAMPAIGN COMMITTEE	From	9/16/2014	То:	10/20/2014			

					DATE			AMOUNT		
To Wi	nom Paid			МО	DAY	YEAR				
BATT	AGLIA PRINTING									
Mailin	g Address			9	19	2014	\$	928.83		
City	BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	15825	BROCHURES						
To W	nom Paid			МО	DAY	YEAR				
S&am	p;T BANK			М	JA.	ILAK				
Mailin	g Address			9	22	2014	\$	25.00		
City	BROOKVILLE	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	15825	BANK F	EE					
To Wi	nom Paid			МО	DAY	YEAR				
BATT	AGLIA PRINTING			МО	DAI	ILAK				
Mailing Address					27	2014	\$	63.60		
City BROOKVILLE State Zip Code (Plus 4)				Descrip	tion of Exp	enditure	l			
		PA	15825	CAMPA1	IGN CARDS	5				
To W	nom Paid			МО	DAY	YEAR				
соок	PORT FAIR			МО	DAT	TEAR				
Mailin	g Address			9	27	2014	\$	120.00		
City	COMMODORE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l			
		PA	15729	FAIR BOOTH						
To W	nom Paid			МО	DAY	YEAR				
CRIS	DUSH			МО	DAT	TEAR				
Mailin	g Address			10	7	2014	\$	1,449.00		
City	BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
PA 15825				REIMBU	JRSE FOR I	ROAD SIG	SNS			
To W	nom Paid			МО	DAY	YEAR				
НОМЕ	TOWN PUNXY			МО	DAT	IEAR				
Mailing Address				10	8	2014	\$	135.00		
City PUNXSUTAWNEY State Zip Code (Plus 4)			Description of Expenditure							
	PA 15767				PRINT AD					

om Paid			мо	DAY	YEAR			
PUNXSY SPIRIT-CO. NEIGHBOR Mailing Address				8	2014			
			10			\$	115.00	
	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		P		PRINT PAPER AD				
om Paid			мо	DAY	YEAR			
R&I MEDIA								
Mailing Address			10	8	2014	\$	800.00	
City BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
	PA	15825	ROADSIDE BILLBOARDS					
To Whom Paid			МО	DAY	YFAR			
STREAM			1-10					
Mailing Address			10	11	2014	\$	144.90	
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
			PHONE SERVICE					
om Paid			МО	DAY	VEAR			
BATTAGLIA PRINTING			М		ILAK			
Mailing Address			10	20	2014	\$	539.01	
City BROOKVILLE	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	15825	BROCHURES					
To Whom Paid				DAY	YFAR			
PUNXY SPIRIT			М		IZAK			
Mailing Address						\$	115.00	
City PUNXSUTAWNEY	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	15767	PRINT AD					
To Whom Paid				DAY	VEAD			
S&T BANK			М		ILAK			
Mailing Address			10	14	2014	\$	100.00	
City BROOKVILLE	State	Zip Code (Plus 4)	Descrip	Description of Expenditure				
	PA	15825						
To Whom Paid			МС	DAY	VEAD			
S&T BANK			МО	DAT	ILAR			
Mailing Address			10	8	2014	\$	60.00	
City BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1		
BROOKVILLE								
BROOKVILLE	PA	15825	DEPOSI	T SLIPS				
	•	15825	•	T SLIPS			PAGE TOTAL	
	om Paid p;I MEDIA p Address BROOKVILLE om Paid p Address om Paid p Address BROOKVILLE om Paid p Address PUNXSUTAWNEY om Paid p;T BANK p Address BROOKVILLE	SY SPIRIT-CO. NEIGHBOR 3 Address BROOKVILLE State PA OM Paid STREAM 3 Address State OM Paid GLIA PRINTING 3 Address BROOKVILLE State PA OM Paid GLIA PRINTING 3 Address BROOKVILLE State PA OM Paid	State Zip Code (Plus 4) om Paid c); MEDIA g Address BROOKVILLE State Zip Code (Plus 4) 15825 om Paid GILA PRINTING g Address BROOKVILLE State Zip Code (Plus 4) 15825 om Paid GLIA PRINTING g Address BROOKVILLE State Zip Code (Plus 4) 15825 om Paid GY SPIRIT g Address PUNXSUTAWNEY State Zip Code (Plus 4) 15767 om Paid c); T BANK g Address BROOKVILLE State Zip Code (Plus 4) 15767 om Paid c); T BANK g Address BROOKVILLE State Zip Code (Plus 4) 15767 om Paid c); T BANK g Address BROOKVILLE State Zip Code (Plus 4) 15767	SY SPIRIT-CO. NEIGHBOR 3 Address 10 State Zip Code (Plus 4) Descript PRINT F MO 3 Address 10 BROOKVILLE State Zip Code (Plus 4) Descript PA 15825 ROADSI MO State Zip Code (Plus 4) Descript PA 15825 ROADSI MO State Zip Code (Plus 4) Descript PHONE MO State Zip Code (Plus 4) Descript PHONE MO MO MO State Zip Code (Plus 4) Descript PHONE MO MO MO MO MO MO State Zip Code (Plus 4) Descript PHONE MO MO State Zip Code (Plus 4) Descript PA 15825 BROCHI MO MO MO MO MO MO MO MO MO M	SY SPIRIT-CO. NEIGHBOR Address State Stat	MO DAY YEAR MO	State Zip Code (Plus 4) Description of Expenditure PRINT PAPER AD	