

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 :		20120363		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: CRIS DUSH CAMPAIGN COMMITTEE												
Street Address:												
City: BROOKVILLE						State: PA			Zip Code: 15825			
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	<input checked="" type="checkbox"/>	No		
	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		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	REP			
						11	4	2014	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		9	16	2014		10	20	2014				
A. Amount Brought Forward From Last Report						\$ 3,936.16						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 14,825.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 18,761.16						
D. Total Expenditures (From Schedule III)						\$ 4,595.34						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 14,165.82						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 2,629.18						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 230.00						

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

Name of Filing Committee or Candidate	Reporting Period
CRIS DUSH CAMPAIGN COMMITTEE	From: <u>9/16/2014</u> To: <u>10/20/2014</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
---	---------

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				
Mailing Address				
City	State	Zip Code (Plus 4)		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.	PAGE TOTAL \$ 0.00
--	----------------------------------

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

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	\$ 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.

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		Reporting Period	
CRIS DUSH CAMPAIGN COMMITTEE		From: <u>9/16/2014</u> To: <u>10/20/2014</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)	\$ 326.44
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 2,302.74
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.)			\$ 2,629.18

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

Name of Filing Committee or Candidate CRIS DUSH CAMPAIGN COMMITTEE	Reporting Period From: <u>9/16/2014</u> To: <u>10/20/2014</u>
--	---

			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 200.00
JOHN WAGNER			10	1	2014	
Mailing Address						
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825				
Description of Contribution: CAMPAIGN HEADQUARTERS UTILITIES						
Full Name of Contributor			MO	DAY	YEAR	\$ 126.44
HOUSE REPUBLICAN CAMPAIGN COMM			10	10	2014	
Mailing Address						
City HARRISBURG	State PA	Zip Code (Plus 4) 17108				
Description of Contribution: POSTCARDS & LISTS						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 326.44

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

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

					DATE		AMOUNT	
Full Name of Contributor JOHN WAGNER					MO 10	DAY 1	YEAR 2014	\$ 2,000.00
Mailing Address								
City BROOKVILLE	State PA		Zip Code(Plus 4) 15825					
Employer of Contributor SELF					Occupation DOCTOR			
Employer Mailing Address/Principal Place of Business			City BROOKVILLE	State	Zip Code(Plus 4)		Description of Contribution CAMPAIGN HEADQUARTERS	
Full Name of Contributor HOUSE REPUBLICAN CAMPAIGN COMM.					MO 9	DAY 26	YEAR 2014	\$ 302.74
Mailing Address								
City HARRISBURG	State PA		Zip Code(Plus 4) 17108					
Employer of Contributor					Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code(Plus 4)		Description of Contribution POSTCARDS & LIST	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.								PAGE TOTAL 2,302.74

SCHEDULE III STATEMENT OF EXPENDITURES

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

				DATE	AMOUNT		
To Whom Paid BATTAGLIA PRINTING				MO	DAY	YEAR	\$ 928.83
Mailing Address				9	19	2014	
City	BROOKVILLE	State	PA	Zip Code (Plus 4)	15825	Description of Expenditure BROCHURES	
To Whom Paid S&T BANK				MO	DAY	YEAR	\$ 25.00
Mailing Address				9	22	2014	
City	BROOKVILLE	State	PA	Zip Code (Plus 4)	15825	Description of Expenditure BANK FEE	
To Whom Paid BATTAGLIA PRINTING				MO	DAY	YEAR	\$ 63.60
Mailing Address				9	27	2014	
City	BROOKVILLE	State	PA	Zip Code (Plus 4)	15825	Description of Expenditure CAMPAIGN CARDS	
To Whom Paid COOKPORT FAIR				MO	DAY	YEAR	\$ 120.00
Mailing Address				9	27	2014	
City	COMMODORE	State	PA	Zip Code (Plus 4)	15729	Description of Expenditure FAIR BOOTH	
To Whom Paid CRIS DUSH				MO	DAY	YEAR	\$ 1,449.00
Mailing Address				10	7	2014	
City	BROOKVILLE	State	PA	Zip Code (Plus 4)	15825	Description of Expenditure REIMBURSE FOR ROAD SIGNS	
To Whom Paid HOMETOWN PUNXY				MO	DAY	YEAR	\$ 135.00
Mailing Address				10	8	2014	
City	PUNXSUTAWNEY	State	PA	Zip Code (Plus 4)	15767	Description of Expenditure PRINT AD	

To Whom Paid PUNXSU SPIRIT-CO. NEIGHBOR			MO	DAY	YEAR	\$ 115.00
Mailing Address			10	8	2014	
City	State	Zip Code (Plus 4)	Description of Expenditure PRINT PAPER AD			
To Whom Paid R&I MEDIA			MO	DAY	YEAR	\$ 800.00
Mailing Address			10	8	2014	
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825	Description of Expenditure ROADSIDE BILLBOARDS			
To Whom Paid WINDSTREAM			MO	DAY	YEAR	\$ 144.90
Mailing Address			10	11	2014	
City	State	Zip Code (Plus 4)	Description of Expenditure PHONE SERVICE			
To Whom Paid BATTAGLIA PRINTING			MO	DAY	YEAR	\$ 539.01
Mailing Address			10	20	2014	
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825	Description of Expenditure BROCHURES			
To Whom Paid PUNXSU SPIRIT			MO	DAY	YEAR	\$ 115.00
Mailing Address						
City PUNXSUTAWNEY	State PA	Zip Code (Plus 4) 15767	Description of Expenditure PRINT AD			
To Whom Paid S&T BANK			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	14	2014	
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825	Description of Expenditure			
To Whom Paid S&T BANK			MO	DAY	YEAR	\$ 60.00
Mailing Address			10	8	2014	
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825	Description of Expenditure DEPOSIT SLIPS			
To Whom Paid S&T BANK			MO	DAY	YEAR	\$ 4,595.34
Mailing Address						
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL

