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 201	20363			Rep File			CAND	DIDATE COMMITTEE V LOBBYIST								
Name of Filing C	Committee, Candi	date or L	obbyist:		CRIS	S DI	JSH C	AMPAIG	N COM	MITT	EE						
Street Address:	18807 ROUT	E 322															
City: BROOKVILLE State: PA										Zip Code: 15825							
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE- 2.X 30 DAY POST- 3. PRIMARY								AMENDMENT Yes No REPORT?						
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	:- 5	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	•	/
report type)	ANNUAL REPORT	7.	Year 2014					IG METH CHECK O				PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candida	ite:	•					DATE ()F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YE	AR		10000	REF)		
								11		4	2014		(SEE IN	STRUCTI	ONS FOR	CODES)	,
	Receipts and	МО	DAY Y	EAR				МО	DAY	YI	AR	FC	R OFFI	CE USE	ONLY		
Expenditures	from:		4 1	20	014	T	0	5	5	5	2014						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				0.00						
B. Total Moneta	ary Contributions	And Rec	eipts (From S	che	dule	I)	\$			12,6	500.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			12,6	500.00						
D. Total Expend	ditures (From Sch	edule II	I)				\$			7,5	94.09						
E. Ending Cash	Balance (Subtra	t Line D	From Line C)				\$			5,0	05.91]					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edul	le II))	\$			4,4	00.00						
G. Unpaid Debt	ts And Obligations	s (From S	Schedule IV)				\$			3	85.84						
			F	٩FF	IDA	VI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign he	re. 1	[f thi	is is	a Can	ndidate r	eport, (candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	cluding the	e attached sched	dules	filed	l on	paper (or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , tru	ıe
Sworn to and subs	cribed before me th day of	is	20							S	ignature	of Perso	n Submit	ting Rep	oort		_
	Signat	ıre					-					Prin	ted Name	•			
My Commission Ex	cpires						_					Ema	il				
	МО	D	AY	YR					Ar	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Co	omm	ittee	e, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and belief	this	politi	ical	commi	ittee has ı	not viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this day of	i	20								s	ignature o	of Candid	ate			-
							-					Printe	d Name				-
My Commission Exp	Signature						-					Ema	il				-
, commission Exp																	_
	МО	D	AY	YR					Area	Code		Da	aytime T	elephor	ne Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
CRIS DUSH CAMPAIGN COMMITTEE	From:	4/1/2014	<u>4</u> To:	5/5/2014
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)			\$	300.00
TOTAL for the Reporting	Period	(2)	\$	300.00
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)			\$	12,300.00
TOTAL for the Reporting) Period	(3)	\$	12,300.00
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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	12,600.00

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	Candidate	R	eporting	Period			
		F	rom:		То	•	
		·		DATE		AMOL	JNT
Full Name of Contributing Com	mittee		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					
CRIS DUSH CAMPAIGN COMMITTEE			From:	I	4/1/2	2 <u>014</u> To	: <u>5/5/2014</u>			
		•			DATE		AMOUNT			
Full Name of Contributor				мо	DAY	YEAR				
P. JANE MCKILLIP										
Mailing Address 227 GALBRAITH RO	OAD						\$ 200.00			
City SUMMERVILLE	State	Zip Code (Plus 4)	4	14	2014				
	PA	15864								
Full Name of Contributor				мо	DAY	YEAR				
DEBRA A. MONKS										
Mailing Address 620 MONKS ROAD							\$ 200.00			
City CORSICA	State	Zip Code (Plus 4)	4	29	2014				
	PA	15829								
Full Name of Contributor				мо	DAY	YEAR				
IRA SUNDERLAND				140	DAI	ILAK				
Mailing Address 407 E. MAHONING	ST. APT 622 APT 6	22					\$ 100.00			
City	State	Zip Code (Plus 4)	4	30	2014				
Full Name of Contributor				мо	DAY	YEAR				
TAWNIA NORRIS				МО	DAT	TEAR				
Mailing Address 51 MARLIN STREE	Т						\$ 100.00			
City	State	Zip Code (Plus 4)	4	28	2014				
Full Name of Contributor	-					V=45				
JEAN DUSH CASH TICKETS REPUBLICA	AN DINNER			МО	DAY	YEAR				
Mailing Address 1 IRONS & amp; W	OODS RD.						\$ 240.00			
City BROOKVILLE	State	Zip Code (Plus 4)	4	30	2014				
	PA	15825								
Full Name of Contributor										
DIANE BUCK				МО	DAY	YEAR				
Mailing Address 421 BUCK LANE							\$ 100.00			
City BROOKVILLE	State	Zip Code (Plus 4	,	2	5	2014				
	PA	15825								
						•	•			

Full Name of Contributor	мо	DAY	YEAR			
ANDREA SHAFFER				57.1		
Mailing Address 61 OAK GROVE LANE						\$ 100.00
City BROOKVILLE	State	Zip Code (Plus 4)	2	9	2014	
	PA	15825				
				1	<u> </u>	1
Full Name of Contributor	-	-	МО	DAY	VEAD	
Full Name of Contributor ROBERT & Amp; PAM COOPER	•		мо	DAY	YEAR	
		•	МО	DAY	YEAR	\$ 100.00
ROBERT & Amp; PAM COOPER	State	Zip Code (Plus 4)	MO 3	DAY 8	YEAR 2014	\$ 100.00

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

PAGE TOTAL \$ 1,140.00

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 Per	iod		
CRIS DUSH CAMPAIGN COMMITTEE	From:	4/1/2014	То:	5/5/2014

DATE AMOUNT

Full Name of Contributing Committee				DAY	YEAR	
FAMILY PAC			МО		ILAK	\$ 1,000.00
Mailing Address 1001 LIBERTY AVE	SUITE 850		4	4	2014	_,
City PITTSBURGH	State	Zip Code (Plus 4)	'		201.	
	PA	15222				

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

PAGE TOTAL \$ 1,000.00

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 Repo					porting Period					
CRIS DUSH CAMPAIGN COMMITTEE			Froi	m:	<u>4/1/2</u>	<u>014</u> To	: <u>5/5/2014</u>			
				D	ATE		AMOUNT			
Full Name of Contributor				мо	DAY	YEAR				
ROBERT NICHOLS				МО	DAT	TEAR	\$ 500.00			
Mailing Address 12385 ROUTE 322				4	22	2014				
City BROOKVILLE	State	Zip Code (Pl	us 4)] '		-01.				
	PA	15825								
Employer Name				Occupat	tion	RETIREI				
Employer Mailing Address/Principal Pla	ce of Business	City			State		Zip Code (Plus 4)			
Full Name of Contributor DEBRA BROWNLEE		<u> </u>		мо	DAY	YEAR	\$ 500.00			
Mailing Address 2641 HAZEN-RICH	ARDSVILLE ROAD						1			
City	State	Zip Code (Pl	us 4)	4	18	2014				
Employer Name	!			Occupat	tion					
Employer Mailing Address/Principal Pla	ce of Business	City			State		Zip Code (Plus 4)			
Employer Mailing Address/Principal Pla Full Name of Contributor	ce of Business	City		1		VEAD				
	ce of Business	City		мо	State	YEAR	Sip Code (Plus 4) \$ 500.00			
Full Name of Contributor		City			DAY		\$ 500.00			
Full Name of Contributor DEBRA BROWNLEE		City Zip Code (Pi	us 4)	мо		YEAR 2014	\$ 500.00			
Full Name of Contributor DEBRA BROWNLEE Mailing Address 2641 HAZEN-RICH	ARDSVILLE ROAD		us 4)		DAY 5		\$ 500.00			
Full Name of Contributor DEBRA BROWNLEE Mailing Address 2641 HAZEN-RICH City	ARDSVILLE ROAD State		us 4)	- 5	DAY 5		\$ 500.00			
Full Name of Contributor DEBRA BROWNLEE Mailing Address 2641 HAZEN-RICH City Employer Name	ARDSVILLE ROAD State	Zip Code (Pi	us 4)	- 5 Occupat	DAY 5	2014	\$ 500.00 Zip Code (Plus 4)			
Full Name of Contributor DEBRA BROWNLEE Mailing Address 2641 HAZEN-RICH City Employer Name Employer Mailing Address/Principal Pla	ARDSVILLE ROAD State	Zip Code (Pi	us 4)	- 5	DAY 5		\$ 500.00			
Full Name of Contributor DEBRA BROWNLEE Mailing Address 2641 HAZEN-RICH City Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor	ARDSVILLE ROAD State ce of Business	Zip Code (Pi	us 4)	Occupat	DAY 5 tion State	2014 YEAR	\$ 500.00 Zip Code (Plus 4) \$ 500.00			
Full Name of Contributor DEBRA BROWNLEE Mailing Address 2641 HAZEN-RICH City Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor BENJAMIN ELKIN	ARDSVILLE ROAD State ce of Business	Zip Code (Pi		- 5 Occupat	DAY 5	2014	\$ 500.00 Zip Code (Plus 4) \$ 500.00			
Full Name of Contributor DEBRA BROWNLEE Mailing Address 2641 HAZEN-RICH City Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor BENJAMIN ELKIN Mailing Address 1425 OLSON ROAD	ARDSVILLE ROAD State ce of Business	Zip Code (Pl		Occupat	DAY 5 tion State	2014 YEAR	\$ 500.00 Zip Code (Plus 4) \$ 500.00			
Full Name of Contributor DEBRA BROWNLEE Mailing Address 2641 HAZEN-RICH City Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor BENJAMIN ELKIN Mailing Address 1425 OLSON ROAD	ARDSVILLE ROAD State ce of Business State	Zip Code (Pi		Occupat	DAY 5 tion State DAY 23	2014 YEAR	\$ 500.00 Zip Code (Plus 4) \$ 500.00			
Full Name of Contributor DEBRA BROWNLEE Mailing Address 2641 HAZEN-RICH City Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor BENJAMIN ELKIN Mailing Address 1425 OLSON ROAE City MARION CENTER	ARDSVILLE ROAD State ce of Business State PA	Zip Code (Pi		Occupation MO	DAY 5 tion State DAY 23	2014 YEAR 2014	\$ 500.00 Zip Code (Plus 4) \$ 500.00			

Full Name of Contributor								
JOE BARBER				МО	DAY	YEAR	\$	1,500.00
Mailing Address 3661 RT 28 NORTH				4	20	2014	1	
City BROOKVILLE	State	Zi	p Code (Plus 4)	1 "	28	2014		
	PA	15	825					
Employer Name SELF EMP. BARBER TI	RUCKING			Occupat	ion	SELF EM	IP.	
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code	(Plus 4)
3661 RT 28								
Full Name of Contributor								
PATRICIA LEACH				МО	DAY	YEAR	\$	500.00
Mailing Address 532 PFEIFFER ROAL)			4	26	2014		
City MARION CENTER	State	Zi	p Code (Plus 4)] "	20	2014		
	PA	15	5759					
Employer Name				Occupat	ion	RETIRED)	
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code	(Plus 4)
Full Name of Contributor						V=45		
TANIS PENDLETON				МО	DAY	YEAR	\$	1,000.00
Mailing Address 314 RHODES LANE				4	14	2014	7	
City BROOKVILLE	State	Zi	p Code (Plus 4)]	14	2014		
	PA	15	825				l	
Employer Name BROOKVILLE HOSPITA	AL			Occupat	ion ,	ANESTH	ELOGIST	
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code	(Plus 4)
100 HOSPITAL RD.			BROOKVILLE		PA		15825	
Full Name of Contributor						V=45		
MARK TONELL				МО	DAY	YEAR	\$	300.00
Mailing Address 537 VOTECH ROAD				2	3	2014	1	
City REYNOLDSVILLE	State	Zi	p Code (Plus 4)		3	2014		
	PA	15	851				l	
Employer Name SELF				Occupat	ion	JEWELE	R	
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code	(Plus 4)
TONELL'S JEWELRYMAIN STREET			BROOKVILLE		PA		15825	
Full Name of Contributor				MO	DAY	VEAD		
RALEIGH ROBERTSON				МО	DAY	YEAR	\$	2,500.00
Mailing Address 9325 ROUTE 861				2	10	2014		
City NEW BETHLEHEM	State	Zi	p Code (Plus 4)	_				
	PA	16	5242				l	
Employer Name SELF				Occupat	ion (OIL AND	GAS PR	ODUCER
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code	(Plus 4)
R.B. ROBERTSON AND SON GAS AND C BOX 190	OIL COMPANY L.P.P.	0.	NEW BETHLEHE	M	PA		16242	
Full Name of Contributor				мо	DAY	YEAR		2 500 00
VALERIE ROBERTSON						LAIN	\$	2,500.00
Mailing Address 9325 ROUTE 861	T			2	10	2014		
City NEW BETHLEHEM	State		p Code (Plus 4)					
Employer Name - D.D. DODTOTOO!	I PA		5242	0		055765	1	
Employer Name R.B. ROBERTSON AND		L CC		Occupat	1	UFFICE T	MANAGE	
Employer Mailing Address/Principal Place	ce of Business		City		State		•	e (Plus 4)
P.O. BOX 190			NEW BETHLEHE	ľ	PA		16242	

Full Name of Contributor JOHN WILLIAMS				мо	DAY	YEAR	\$	2,000.00
Mailing Address 10 SPHERE STREET							-	
City BROOKVILLE	State	7in	Code (Plus 4)	2	10	2014		
BROOKVILLE	PA	_	-					
Envelope Name OF E	I PA I	158	323	0	•			40.4.0.7.0.4.4.150
Employer Name SELF		$\overline{}$		Occupat	T	SANITA		1PANY OWNER
Employer Mailing Address/Principal Plac			City		State		Zip Code	(Plus 4)
WILLIAMS SANITATION COMPANY411 V	VILLIAMS ROAD		REYNOLSVILLE		PA		15851	
Full Name of Contributor ROBERT ROBERTSON				мо	DAY	YEAR	\$	2,000.00
Mailing Address 5193 ROUTE 322						2014	1	
City BROOKVILLE	State	Zip	Code (Plus 4)	2	14	2014		
	PA	158	325					
Employer Name SELF				Occupat	ion	ΩΤΙ ΔΝΓ	GAS PRO	ODLICER
Employer Mailing Address/Principal Plac	o of Rusiness	Т	City	1	State	012 7 11 12	Zip Code	
R. B. ROBERTSON AND SON GAS AND (ر ا	•	4	1		-	(1143 4)
BOX 190	JIL COMPANT L.P.P.C	o.	NEW BETHLEHEN	′I	PA		16242	
Full Name of Contributor				мо	DAY	YEAR	\$	1,000.00
JOHN WAGNER] *	1,000.00
Mailing Address 19 WESTERN AVE				2	12	2014		
City BROOKVILLE	State	Zip	Code (Plus 4)	_				
	PA	158	325					
Employer Name SELF				Occupat	ion	PHYSIC:	AN	
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code	(Plus 4)
ANKLE AND FOOT ASSOCIATES73 SOU	TH WHITE STREET		BROOKVILLE		PA		15825	
Full Name of Contributor				мо	DAY	YEAR	\$	500.00
PATRICIA LEACH					27	,] *	300.00
Mailing Address 532 PFEIFFER ROAD)			2	12	2014		
City MARION CENTER	State	Zip	Code (Plus 4)	_				
	PA	157	759					
Employer Name NONE				Occupat	ion	RETIREI)	
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code	(Plus 4)
Full Name of Contributor				МО	DAY	YEAR	\$	500.00
PATRICIA LEACH	<u> </u>						-	
Mailing Address 532 PFEIFFER ROAD		<u>_</u>	Cada (Blood 2)	3	5	2014		
City MARION CENTER	State	-	Code (Plus 4)					
	I PA I	157	759		<u> </u>		ı	
Employer Name NONE				Occupat	ion	RETIRE		
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code	(Plus 4)
Full Name of Contributor				мо	DAY	YEAR	\$	1,000.00
JAMES AND TONI AMEY]	1,000.00
Mailing Address 4450 TURNER ROAD				2	19	2014	1	
City CANFIELD	State	Zip	Code (Plus 4)					
	он	444	106				1	
Employer Name RETIRED				Occupat	ion	RETIRE) (BOTH)	
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code	(Plus 4)

PAGE 10

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

PAGE TOTAL

17,300.00

\$

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:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description		.			•			
Futor Crowd Total of Book	F an Cabadula I Batailad	Summer Base Se		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, 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 Period		
CRIS DUSH CAMPAIGN COMMITTEE	From:	<u>4/1/2014</u> To:	<u>5/5/2014</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	4,400.00
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,	•	\$	4,400.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	2		Reporting	Period			
CRIS DUSH CAMPAIGN COMMITTEE			From:	<u> </u>	<u>4/1/2014</u>	То:	<u>5/5/2014</u>
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
JOHN WAGNER			МО	DAT	TEAR	\$	200.00
Mailing Address 19 WESTERN AVE			2	3	2014	7 *	200.00
City BROOKVILLE	State	Zip Code (Plus 4)					
	PA	15825					
Description of Contribution: UTILIT	IES FOR CAMPAIGN	HEADQUARTERS	•	•			
Full Name of Contributor JOHN WAGNER			МО	DAY	YEAR		200.00
Mailing Address 19 WESTERN AVE			3	3	2014	\$	200.00
City BROOKVILLE	State	Zip Code (Plus 4)	_ ~		2011		
	PA	15825					
Description of Contribution: UTILIT	IES FOR CAMPAIGN	HEADQUARTERS	•		·		
Enter Grand Total of Part F on Sch Section 2.	edule II, In-Kind	Contributions Deta	iled Sum	mary Pag			PAGE TOTAL
						\$	400.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	Reporting Period					
CRIS DUSH CAMPAIGN COMMITTEE				Fro	m:		4/1/201	<u>.4</u> To:	<u>5/5/2014</u>	
				•			DATE			AMOUNT
Full Name of Contributor JOHN WAGNER					мо		DAY	YEAR		
Mailing Address 19 WESTERN AVE				-		2	3	2014	\$	\$ 2,000.00
City BROOKVILLE	State		Zip Code(Plus 4)							
	PA		15825							
Employer of Contributor SELF EMP.	-				Осс	cupa	tion Ph	HYSICIAN	l	
Employer Mailing Address/Principal Plac ANKLE & DOT ASSOC. 73 SOUTH		Cit	ty ROOKVILLE	State	e i	' ' '		1	Description of Contribution CAMPAIGN OFFICE SUITE	
/ with the same of	***************************************		to ott ville					G/ 11 11 /		
JOHN WAGNER				мо	,	DAY	YEAR			
Mailing Address 19 WESTERN AVE	iiling Address 19 WESTERN AVE		-		3	3	2014	\$	2,000.00	
City BROOKVILLE	State		Zip Code(Plus 4)							
	PA		15825							
Employer of Contributor SELF EMP.			•		Осс	upa	tion Ph	HYSICIAN	l	
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	State	e	Zip (Code(Plus 4)	Descrip	otion of	Contribution
ANKLE & amp; FOOT ASSOC. 73 SOUTH	WHITE ST	BR	ROOKVILLE				CAMPAIGN OFFICE SUITE			
Full Name of Contributor					мо		DAY	YEAR		
JOHN WAGNER				-					\$	2,000.00
Mailing Address 19 WESTERN AVE						2	3	2014	4	2,000.00
City BROOKVILLE	State		Zip Code(Plus 4)							
	PA		15825							
Employer of Contributor SELF					Осс	upa	tion Ph	HYSICIAN	l	
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	State	e i	Zip (Code(Plus 4)	Descrip	otion of	Contribution
ANKLE AND FOOT ASSOCIATES 73 SOL STREET	JTH WHITE							OFFICE		FOR CAMPAIGN
Full Name of Contributor					мо		DAY	YEAR		
JOHN WAGNER									\$	2,000.00
Mailing Address 19 WESTERN AVE						3	3	2014	Ť	2,000.00
City BROOKVILLE	State		Zip Code(Plus 4)							
	PA		15825							
Employer of Contributor SELF		_						HYSICIAN	l	
Employer Mailing Address/Principal Plac		Cit	ty	State	e i	Zip (Code(Plus 4)	1		Contribution
ANKLE AND FOOT ASSOCIATES 73 SOL STREET	IIH WHIIE							HEADO		FOR CAMPAIGN

Full Name of Contributor JOHN WAGNER				мо	DAY	YEAR			
Mailing Address 19 WESTERN AVE				2	28	2014	\$ 200.00		
City BROOKVILLE	State	Zip Code(Plus 4)							
	PA	15825							
Employer of Contributor SELF			•	Occupa	tion PH	IYSICIAN	YSICIAN		
Employer Mailing Address/Principal Plac	e of Business	City	State	Zip	Code(Plus 4)	Descri	ption of Contribution		
ANKLE AND FOOT ASSOCIATES 73 SOU STREET	TH WHITE					_	UTILITIES AT CAMPAIGN HEADQUARTE		
Full Name of Contributor JOHN WAGNER				мо	DAY	YEAR			
Mailing Address 19 WESTERN AVE				3	31	2014	\$ 200.00		
City BROOKVILLE	State	Zip Code(Plus 4)							
	PA	15825							
Employer of Contributor SELF			•	Occupa	tion Ph	HYSICIAN	l		
Employer Mailing Address/Principal Plac	e of Business	City	State	Zip	Code(Plus 4)	Descri	ption of Contribution		
ANKLE AND FOOT ASSOCIATES 73 SOU STREET	TH WHITE					-	TES AT CAMPAIGN QUARTE		
Enter Grand Total of Part G on Scho	edule II, In-Kin	d Contributions D	etaile	d			PAGE TOTAL		
Summary Page, Section 3.	,	-		-			8,400.00		

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
CRIS DUSH CAMPAIGN COMMITTEE	From	4/1/2014	То:	<u>5/5/2014</u>

				DATE		AMOUNT
To Whom Paid			мо	DAY	YEAR	
SARVEY NOTARY SERVICE			М		1 Z / LIK	
Mailing Address 273 ALLEGHENY	BLVD.		4	4	2014	\$ 18.00
City BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
	PA	15825	NOTAR	Y WORK		
To Whom Paid			мо	DAY	YEAR	
WINDSTREAM			1-10		1 Z / LIK	
Mailing Address PO BOX 9001908			4	11	2014	\$ 259.00
City LOUISVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
	КҮ	40290	PHONE	& IN	TERNET	
To Whom Paid			мо	DAY	YEAR	
RENDA RADIO			М		IZAK	
Mailing Address 904 N. MAIN ST.			4	14	2014	\$ 260.00
City PUNXSUTAWNEY	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
	PA	15767	RADIO	ADS		
To Whom Paid			мо	DAY	YEAR	
RENDA RADIO BROADCASTING			М		IZAK	
Mailing Address 900 PARISH STRE	EET 4TH FLOOR		4	14	2014	\$ 322.00
City PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
	PA	15220	RADIO	ADS		
To Whom Paid			мо	DAY	YEAR	
THE BROOKVILLE MIRROR			МО		ILAK	
Mailing Address 203 MAIN STREE	Γ		4	19	2014	\$ 135.00
City BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
	PA	15825	PRINT A	AD		
To Whom Paid			мо	DAY	YEAR	
THE BROOKVILLE MIRROR			140		ILAK	
Mailing Address 203 MAIN ST.			4	19	2014	\$ 250.00
City BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
	PA	15825				

To Whom Paid			мо	DAY	YEAR			
ARISTOTLE			М		TEAK			
Mailing Address			4	19	2014	\$	900.00	
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
			CAMPAI	GN SOFTW	/ARE			
To Whom Paid			МО	DAY	YEAR			
BATTAGLIA PRINTING			110		1 Z/IIX			
Mailing Address RT 28			4	28	2014	\$	2,490.33	
City BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	15825						
To Whom Paid			МО	DAY	YEAR			
INDIANA CO. REPUB. COMMITTEE								
Mailing Address P.O. BOX 565			4	30	2014	\$	430.00	
City INDIANA	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	15701	REPUB.	DINNER				
To Whom Paid			МО	DAY	YEAR			
INDIANA CO. REPUB COMM.								
Mailing Address PO BOX 565				30	2014	\$	30.00	
City INDIANA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	15701						
To Whom Paid			МО	DAY	YEAR			
RENDA RADIO								
Mailing Address 904 N. MAIN ST.			5	6	2014	\$	689.00	
City PUNXSUTAWNEY	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	15767	RADIO /	ADS				
To Whom Paid			МО	DAY	YEAR			
RENDA RADIO								
Mailing Address 900 PARISH ST. 41	TH FLOOR		5	6	2014	\$	1,137.50	
City PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	15220						
To Whom Paid			мо	DAY	YEAR			
ARISTOTLE						_	000.00	
Mailing Address 3625 RUFFIN ROAL	SUITE 100		2	14	2014	\$	900.00	
City SAN DIEGO	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
	CA	92123	CAMPAI	GN SOFTV	/ARE			
To Whom Paid			мо	DAY	YEAR			
BATTAGLIA PRINTING COMPANY							480.00	
Mailing Address 877 ROUTE 28			3	3	2014	\$	159.00	
City BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
PA 15825 FLYERS								

									AGL 10	
To Whom					мо	DAY	YEAR			
THE MIRR	ORS.									
Mailing Ad	ldress	203 MAIN STREET			3	3	2014	\$	375.00	
City BR	ROOKVILI	.E	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
			PA	15825	NEWSPA	APER ADS				
To Whom	Paid				мо	DAY	YEAR			
RENDA BR	ROADCAS	TING								
Mailing Ad	ldress	840 PHILADELPHIA	STREET		2	27	2014	\$	504.00	
City IN	DIANA		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
			PA	15701	RADIO A	AD				
To Whom	Paid				МО	DAY	YEAR			
R & I	I MEDIA				140	DAI	ILAK			
Mailing Ad	ldress	106 MAIN STREET			3	24	2014	\$	1,225.00	
City BR	ROOKVILL	.E	State	Zip Code (Plus 4)	Description of Expenditure					
			PA	15825	BILLBOA	ARDS				
To Whom	Paid				мо	DAY	YEAR			
ADVERTIS	SING BY S	SCHUCKERS			140		ILAK			
Mailing Ad	ldress	18 LUTHERN CEMETA	ARY ROAD		3	3	2014	\$	1,158.58	
City BR	ROOKVILL	.E	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
			PA	15825	MAGNET	TIC ADS				
To Whom	Paid				мо	DAY	YEAR			
INDIANA (GAZETTE				110		12/110			
Mailing Ad	ldress	899 WATER STREET			2	27	2014	\$	254.70	
City IN	DIANA		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
			PA	15701	NEWSPA	APER AD				
To Whom	Paid				мо	DAY	YEAR			
SOLLENBE	ERGERS				110		12/110			
Mailing Ad	ldress	213 STATE STREET			3	10	2014	\$	15.00	
City HA	ARRISBU	RG	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
			PA	17101	NOTARY	' AND COP	Y SERVIC	ES		
To Whom	Paid				мо	DAY	YEAR			
LORI LAYS	5				MO	DAI	ILAK			
Mailing Ad	ldress	BUTLER CEMETERY F	ROAD		3	25	2014	\$	464.00	
City BR	ROOKVILL	.E	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
			PA	15825	REIMB.	FOR BING	O DOBBE	RS		
To Whom	Paid				МО	DAY	YEAR			
JACKIE W	ILLIAMS				MO	DAT	ILAK			
Mailing Ad	ldress	307 VERNON AVENU	E		3	25	2014	\$	2,062.50	
City RII	DGWAY		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	<u> </u>		
			PA	15853	MARKET	ING SERV	<u>. </u>			
				-	•					

To Whom Paid				DAY	YEAR		
BAHAGLIA PRINTING			МО		1 L /110		
Mailing Address 877 ROUTE 28			3	25	2014	\$	435.00
City BROOKVILLE	State	Zip Code (Plus 4)	Description of Expenditure				
PA 15825				JRES			
To Whom Paid			мо	DAY	YEAR		
WAL MART							
Mailing Address CLARION MALL			3	12	2014	\$	41.31
City CLARION	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
	PA		PRINTE	R CASSETT	Ī		
							PAGE TOTAL
Enter Grand Total of Expenditures of	on Page 1, Report C	over Page, Item D	•			\$	14,514.92

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporti	ng Period					
CRIS DUSH CAMPAIGN COMMITTEE			From:		<u>4/1/2014</u>	То:	<u>5/5/2014</u>		
					DATE		Outstanding Balance of Debt		
Name of Creditor CRIS DUSH				мо	DAY	YEAR			
Mailing Address 18807 ROUTE 322				4	29	2014	\$ 149.00		
City BROOKVILLE	State	Zip Code (P	lus 4)	Description of Debt					
	PA 15825				AMPAIGN BUTTONS ON PERSONAL CARD 33 RAPHICS				
Name of Creditor CRIS DUSH				мо	DAY	YEAR			
Mailing Address 18807 ROUTE 322				4	21	2014	\$ 1,463.15		
City BROOKVILLE	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
	PA	15825		CAMPAI	GN MATER	IALS ADS	S		
Name of Creditor CRIS DUSH				мо	DAY	YEAR			
Mailing Address 18807 ROUTE 322				4	21	2014	\$ 387.00		
City BROOKVILLE	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
	PA	15825		AD STR RADIO		OADCAST	Γ WITH PERS. CK.		
Name of Creditor				мо	DAY	YEAR			
PATRICIA LEACH				-110					
Mailing Address 532 PFIEFFER ROAD)			3	1	2014	\$ 66.78		
City MARION CENTER	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
	PA	15759			amp; GRE		MEMADE		

Name of Creditor

PATRICIA LEACH

Mailing Address

MARION CENTER

City

532 PFIEFFER ROAD

State

PA

143.63

DAY

Description of Debt

YEAR

2014

MEET & Amp; GREET AT PARDEE'S RESTAURANT, COOKPORT, PA

6

МО

Zip Code (Plus 4)

15759

3

lame of Creditor ATRICIA LEACH			мо	DAY	YEAR			
Mailing Address 532 PFIEFFE	R ROAD		2	28	2014	\$	175.43	
City MARION CENTER	State	Zip Code (Plus 4)	Description of Debt					
PA 15759 PRINTING 2 SIDED COLO OF NEWSPAPER AD MES GREEN TOWNSHIP RESI						GE FOR RAYNE AND		
						ı	PAGE TOTAL	
Enter Grand Total of Unpa	id Debts on Page 1,	Report Cover Page, Iter	n G.			\$	2,384.99	
					_			