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	0363				port ed B		CANI	OIDA	TE		COMN	1ITTEE	✓ [LOB	BYIS	Т	
Name of Filing C	Committee	, Candida	ate or Lo	obbyist:		CRI:	S DI	JSH (CAMPAI	GN C	OMI	MITT	EE						
Street Address:																			
City:	BROC	KVILLE							State:	PA	4			Zip Cod	le: 15	825			_
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	Y PRE	- :	2. X	30 DA		POS	ST-	3.		AMENDMENT REPORT?		Yes	\	No	
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRIDA ELECTION	AY PRE	≣-	5.	30 DA		POS	OST- 6.		TERMINA REPORT?		Yes		No	\	
report type)	ANNUAL	REPORT	7.	Year 2014	,				NG MET					PAPER		\	DIS	KETTI	E
Name of Office S	ought by	Candidat	e:						DATE	OF E	LEC	CTIO	N	District Number	Office Code	Pa	rty Co	de Co Co	
									МО	DA	٩Y	YE	AR			REI)		
									1	1		4	2014		(SEE INS	STRUCTI	ONS F	OR COD	ES)
Summary of		and	МО	DAY	YEAR	2			МО	D/	AY	YI	EAR	FO	R OFFIC	E USE	ON	LY	
Expenditures	from:			4 1	. 2	014	Т	0		5		5	2014						
A. Amount Bro	ught Forw	ard Fron	ı Last R	eport				\$		•			0.00						
B. Total Moneta	ary Contri	butions A	And Rec	eipts (Fron	n Sche	dule	eI)	\$				12,6	500.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$				12,6	500.00						
D. Total Expend	ditures (F	rom Sche	dule II	I)				\$				7,5	594.09						
E. Ending Cash	Balance ((Subtract	Line D	From Line	C)			\$				5,0	05.91						
F. Value Of In-	Kind Cont	ributions	Receive	ed (From S	chedu	le II	()	\$				4,4	00.00						
G. Unpaid Debt	s And Ob	ligations	(From S	chedule IV	/)			\$				3	885.84						
					AFF	ID/	٩VI	T SE	CTIO	V									
PART I - If this is		-	•	_						=			_						
I swear (or affirm) correct and comple		eport, incli	uding the	attached sc	hedules	s file	d on	paper	or by ele	ctron	ic me	dium	, are to t	he best of	f my knov	vledge	and	pelief ,	true
Sworn to and subs	cribed befo	ore me this		20								S	Signature	of Persoi	1 Submitt	ing Re	port		
	_	Signatur	·a					-		_				Print	ted Name				-
My Commission Ex	cpires	Signatui	-											Emai	il				-
	Ī	мо	D/	ΑY	YR						Are	a Coc	le	Daytim	e Teleph	one Nu	mbe		
Part II- If this is	a report	of a cand	idate's	authorized	Comn	nitte	e, C	andid	ate sha	II sig	n he	re.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and beli	ief this	polit	tical	comm	ittee has	not v	/iolat	ed an	y provisi	ions of the	e act of Ju	ıne 3,1	937	P.L. 13	33,
Sworn to and subsc		e me this								_			Si	ignature o	f Candida	ate			—
	day of							_		_				Drinto	d Name				<u> </u>
	S	Signature						-										_	
My Commission Exp										Email					_				
		мо	D	AY	YR	l		•		_	\rea (Code		Da	ytime Te	elepho	ne Nu	mber	_

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	:	
		1		DATE			AMOUNT
Full Name of Contributing C	ommittee		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 Candida	Name of Filing Committee or Candidate					Reporting Period						
CRIS DUSH CAMPAIGN COMMITTEE			Fror	m:	4/1/2	<u>2014</u> To):	<u>5/5/2014</u>				
					DATE			AMOUNT				
Full Name of Contributor				мо	DAY	YEAR						
P. JANE MCKILLIP				МО	DAI	ILAK						
Mailing Address							\$	200.00				
City SUMMERVILLE	State	Zip Code (Plus 4)	4	14	2014						
	PA	15864										
Full Name of Contributor				мо	DAY	YEAR						
DEBRA A. MONKS				МО	DAI	ILAK						
Mailing Address							\$	200.00				
City CORSICA	State	Zip Code (Plus 4)	4	29	2014						
	PA	15829										
Full Name of Contributor				мо	DAY	YEAR						
IRA SUNDERLAND						12/11						
Mailing Address							\$	100.00				
City	State	Zip Code (Plus 4)	4	30	2014						
Full Name of Contributor				МО	DAY	YEAR						
TAWNIA NORRIS						12/11						
Mailing Address							\$	100.00				
City	State	Zip Code (Plus 4)	4	28	2014						
Full Name of Contributor				МО	DAY	YEAR						
JEAN DUSH CASH TICKETS REPUBLICA	AN DINNER											
Mailing Address		I					\$	240.00				
City BROOKVILLE	State	Zip Code (Plus 4)	4	30	2014						
	PA	15825										
Full Name of Contributor				мо	DAY	YEAR						
DIANE BUCK				МО	DAI	ILAK						
Mailing Address							\$	100.00				
City BROOKVILLE	State	Zip Code (Plus 4)	2	5	2014						
	PA	15825										
Full Name of Contributor				мо	DAY	YEAR						
ANDREA SHAFFER				МО	DAT	TEAK						
ailing Address							\$	100.00				
City BROOKVILLE	State	Zip Code (Plus 4)	2	9	2014						
	PA	15825										

	ame of Contributor	мо	DAY	YEAR			
ROBE	RT & PAM COOPER						
Mailin	Mailing Address						\$ 100.00
City	BROOKVILLE	State	Zip Code (Plus 4)	3	8	2014	
		PA	15825				

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

			DA	TE		AMOUNT
ull Name of Contributing Committee				DAY	YEAR	
FAMILY PAC	FAMILY PAC					\$ 1,000.00
Mailing Address			4	4	2014	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
City PITTSBURGH	State	Zip Code (Plus 4)]	7	2014	
	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.)

Reporting Period

Name of Filing Committee or Candidate

CRIS D	CRIS DUSH CAMPAIGN COMMITTEE					<u>4/1/2</u>	<u>014</u> To	:	<u>5/5/2014</u>
					DA	ATE		AMOL	JNT
	ne of Contributor T NICHOLS				мо	DAY	YEAR	\$	500.00
	Address						2014	1	
City	BROOKVILLE	State PA	Zip (Code (Plus 4)	4	22	2014		
Employ	er Name				Occupation RETIRE)	
Employer Mailing Address/Principal Place of Business City					,	State		Zip Code (I	Plus 4)
Full Name of Contributor DEBRA BROWNLEE					МО	DAY	YEAR	\$	500.00
Mailing Address					4	18	2014		
City State Zip Code (Plus 4)				Code (Plus 4)	4	18	2014		
Employ	er Name				Occupat	ion			
Employ	er Mailing Address/Principal Plac	e of Business	•	City	•	State		Zip Code (I	Plus 4)
	me of Contributor BROWNLEE				мо	DAY	YEAR	\$	500.00
	Address							1	
City		State	Zip (Code (Plus 4)	5	5	2014		
Employ	er Name				Occupat	ion	·	<u> </u>	
Employer Mailing Address/Principal Place of Business City				City	•	State		Zip Code (I	Plus 4)
Full Na	me of Contributor								
BENJAMIN ELKIN					МО	DAY	YEAR	\$	500.00
Mailing Address					4	23	2014		
City MARION CENTER State Zip Code (Plus 4)				Code (Plus 4)		23	2011		
PA 15759									
Employer Name SELF EMPLOYED			Occupation SELF EMP.						
	Employer Mailing Address/Principal Place of Business City				<u> </u>	State			
Employ	er Mailing Address/Principal Plac	e of Business		City		State		Zip Code (I	Plus 4)

Full Name of Contributor				мо	DAY	YEAR	 	1,500.00
JOE BARBER] *	1,300.00
Mailing Address				4	28	2014	1	
City BROOKVILLE	State	Zi	p Code (Plus 4)					
	I _{PA}	1 15	5825				1	
Employer Name SELF EMP. BARE	BER TRUCKING			Occupat	tion	SELF EM	P.	
Employer Mailing Address/Principa	al Place of Business		City		State		Zip Code	(Plus 4)
Full Name of Contributor						•		
PATRICIA LEACH				МО	DAY	YEAR	\$	500.00
Mailing Address							1	
City MARION CENTER	State	Zi	p Code (Plus 4)	4	26	2014		
Thursday CENTER	PA		5759					
Employer Name	117	. 10	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Occupat	tion	RETIRED	·	
Employer Mailing Address/Principa	al Diago of Rusinoss		City	Тоссира	State	KLIIKLL	Zip Code	(Pluc 4)
Employer Maining Address/Principa	ai Flace of Busiliess		City		State		Zip Code	(Flus 4)
Full Name of Contributor				мо	DAY	YEAR	\$	1,000.00
TANIS PENDLETON] *	1,000.00
Mailing Address				4	14	2014		
City BROOKVILLE	State	Zi	p Code (Plus 4)					
	PA 15825					l		
Employer Name BROOKVILLE HO	SPITAL			Occupat	tion	ANESTH	ELOGIST	
Employer Mailing Address/Principa	al Place of Business		City		State		Zip Code	(Plus 4)
			BROOKVILLE		PA		15825	
Full Name of Contributor			-					
MARK TONELL				МО	DAY	YEAR	\$	300.00
Mailing Address							1	
City REYNOLDSVILLE	State	Zi	p Code (Plus 4)	2	3	2014		
	l _{PA}	15	5851	1				
Employer Name SELF				Occupat	tion	JEWELEI		
Employer Mailing Address/Principa	al Place of Business		City	1	State	1	Zip Code	(Plus 4)
			BROOKVILLE		PA		15825	(1.120.1)
			BROOKVILLE		117		T T T	
Full Name of Contributor				мо	DAY	YEAR	_{\$}	2,500.00
RALEIGH ROBERTSON							-	,
Mailing Address	GL-1-	T	o Cada (Disa 4)	2	10	2014		
City NEW BETHLEHEM	State		p Code (Plus 4)					
	I PA	I 16	5242	+		l 		
Employer Name SELF			Т	Occupat	tion	OIL AND	GAS PRO	
Employer Mailing Address/Principa	al Place of Business		City		State		Zip Code	(Plus 4)
			NEW BETHLEHE	М	PA		16242	
Full Name of Contributor				МО	DAY	YEAR	\$	2,500.00
VALERIE ROBERTSON	LERIE ROBERTSON						ļ ~	2,300.00
Mailing Address				2	10	2014		
City NEW BETHLEHEM	State	Zi	p Code (Plus 4)]				
	PA 16242					<u> </u>	I	
Employer Name R.B. ROBERTSO	N AND SON GAS AND	OIL CC	MPANY L.P.	Occupat	tion	OFFICE	MANAGE	٦
Employer Mailing Address/Principa	al Place of Business		City		State		Zip Code	(Plus 4)
			NEW BETHLEHE	М	PA		16242	
			•		•			

Full Name of Contributor				мо	DAY	YEAR	\$	2,000.00
JOHN WILLIAMS							-	•
Mailing Address				2	10	2014		
City BROOKVILLE	State		p Code (Plus 4)					
	PA I	15	5825			<u> </u>	I	
Employer Name SELF				Occupat	ion	SANITA	TION COI	MPANY OWNER
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code	e (Plus 4)
			REYNOLSVILLE		PA		15851	
Full Name of Contributor					DAY	VEAD		
ROBERT ROBERTSON				МО	DAY	YEAR	\$	2,000.00
Mailing Address				2	14	2014	1	
City BROOKVILLE	State	Zi	p Code (Plus 4)]	14	2014		
	PA I	15	5825					
Employer Name SELF				Occupat	ion	OTL AND	GAS PR	ODUCER
Employer Mailing Address/Principal Plac	e of Business		City		State			(Plus 4)
,,			NEW BETHLEHER	м	PA		16242	• (•)
			INCAN DETUTE	· ·	114		10242	
Full Name of Contributor				мо	DAY	YEAR	\$	1,000.00
JOHN WAGNER							1	1,000.00
Mailing Address	1			2	12	2014		
City BROOKVILLE	State	Zi	p Code (Plus 4)					
	PA	15	825			l	l	
Employer Name SELF				Occupat	ion	PHYSICI	AN	
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code	e (Plus 4)
			BROOKVILLE		PA		15825	
Full Name of Contributor			-					
 PATRICIA LEACH				МО	DAY	YEAR	\$	500.00
Mailing Address				_			1	
City MARION CENTER	State	Zi	p Code (Plus 4)	2	12	2014	l	
	PA	15	5759					
Employer Name NONE				Occupat	ion	RETIRE)	
Employer Mailing Address/Principal Plac	e of Rusiness		City	1	State			e (Plus 4)
Zimproyer Framing Address, Francipal Fra	c o. buocss						p	. (1.145-1)
							Т	
Full Name of Contributor				мо	DAY	YEAR	\$	500.00
PATRICIA LEACH							-	
Mailing Address	State		n Codo (Blue 4)	3	5	2014		
City MARION CENTER	State		p Code (Plus 4)					
	PA I	15	5759	 	_	l 	1	
Employer Name NONE				Occupat	1	RETIRE		
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code	e (Plus 4)
Full Name of Contributor				мо	DAY	YEAR	\$	1,000.00
JAMES AND TONI AMEY							1	
Mailing Address	State	7:	n Code (Blue 4)	2	19	2014		
City CANFIELD	State		p Code (Plus 4)					
	OH I	44	1406			l	1	
Employer Name RETIRED			Occupat	ion	RETIRE	(BOTH)		
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code	e (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:			То:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	lus 4)					
Receipt Description	'	.					<u> </u>	
				_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	Section	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			Reporting	Period			
CRIS DUSH CAMPAIGN COM	MITTEE			From:	<u>4</u>	1/1/2014	To:	<u>5/5/2014</u>
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
JOHN WAGNER				1-10	57(1	12/11		200.00
Mailing Address				2	3	2014	\$	200.00
City BROOKVILLE	s	tate	Zip Code (Plus 4)			2014		
	P	Ά	15825					
Description of Contribution:	UTILITIES F	OR CAMPAIGN H	EADQUARTERS	•			•	
Full Name of Contributor				МО	DAY	YEAR		
JOHN WAGNER				MO	DAT	IEAR	_	200.00
Mailing Address				3	3	2014	\$	200.00
City BROOKVILLE	s	tate	Zip Code (Plus 4)			2014		
	P	'A	15825					
Description of Contribution:	UTILITIES F	OR CAMPAIGN H	EADQUARTERS	•	•			
Enter Grand Total of Part F	on Schedule	e II. In-Kind Co	ontributions Deta	iled Sumi	marv Pag	ie.		PAGE TOTAL

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	ortin	ıg P	eriod			
CRIS DUSH CAMPAIGN COMMITTEE				Fro	m:		4/1/201	<u>4</u> To:	<u>5/5</u>	<u>/2014</u>
							DATE		AMOU	INT
Full Name of Contributor JOHN WAGNER					МО		DAY	YEAR		
Mailing Address						2	3	2014	\$	2,000.00
City BROOKVILLE	State PA		Zip Code(Plus 4) 15825							
Employer of Contributor SELF EMP.					Оссі	upa	tion Ph	IYSICIAN		
Employer Mailing Address/Principal Plac	e of Business	City BR	y OOKVILLE	State	e Z	Zip (Code(Plus 4)	1 -	otion of Contril	
Full Name of Contributor JOHN WAGNER					мо		DAY	YEAR		
Mailing Address						3	3	2014	\$	2,000.00
City BROOKVILLE	State PA		Zip Code(Plus 4) 15825							
Employer of Contributor SELF EMP.					Occi	upa	tion Ph	IYSICIAN		
Employer Mailing Address/Principal Plac	e of Business	City BR	y OOKVILLE	State	e Z	Zip (Code(Plus 4)	1 -	otion of Contril	
Full Name of Contributor JOHN WAGNER					мо		DAY	YEAR		
Mailing Address						2	3	2014	\$	2,000.00
City BROOKVILLE	State PA		Zip Code(Plus 4) 15825							
Employer of Contributor SELF					Occi	upa	tion PH	IYSICIAN	<u> </u>	
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Z	Zip (Code(Plus 4)	Descrip	otion of Contril	oution
								OFFICE HEADQ	SUITE FOR C	CAMPAIGN
Full Name of Contributor JOHN WAGNER					мо		DAY	YEAR		
Mailing Address						3	3	2014	\$	2,000.00
City BROOKVILLE	State		Zip Code(Plus 4)							
	PA	- 1	15825							
Employer of Contributor SELF	PA		15825		Occi	upa	tion Ph	IYSICIAN		
Employer of Contributor SELF Employer Mailing Address/Principal Place		City		State			tion Ph Code(Plus 4)	IYSICIAN Descrip	otion of Contril	oution

Full Name of Contributor				мо	DAY	VEAD	
JOHN WAGNER				МО	DAY	YEAR	
Mailing Address				2	28	2014	\$ 200.00
City BROOKVILLE	State	Zip Code(Plus 4)					
	PA	15825					
Employer of Contributor SE	LF	•		Occupa	tion Ph	HYSICIAN	l
Employer Mailing Address/Prin	cipal Place of Business	City	State	Zip	Code(Plus 4)	Descri	ption of Contribution
						-	TES AT CAMPAIGN QUARTE
Full Name of Contributor				мо	DAY	YEAR	
JOHN WAGNER					2		
Mailing Address				3	31	2014	\$ 200.00
City BROOKVILLE	State	Zip Code(Plus 4)					
	PA	15825					
Employer of Contributor SE	LF	•		Occupa	tion Ph	HYSICIAN	l
Employer Mailing Address/Prin	cipal Place of Business	City	State	Zip	Code(Plus 4)	Descri	ption of Contribution
						_	TES AT CAMPAIGN QUARTE
Enter Grand Total of Part G	on Schedule II. In-Kii	nd Contributions D	etaile	d			PAGE TOTAL
Summary Page, Section 3.				-			8,400.00

SCHEDULE III STATEMENT OF EXPENDITURES

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

					DATE		AMOUNT
To Wh	om Paid			мо	DAY	YEAR	
SARVE	EY NOTARY SERVICE			140		1 Z / LIX	
Mailin	g Address			4	4	2014	\$ 18.00
City	BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	15825	NOTARY	Y WORK		
To Wh	om Paid			мо	DAY	YEAR	
WIND	STREAM			HO		IZAK	
Mailin	g Address			4	11	2014	\$ 259.00
City	LOUISVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		KY	40290	PHONE	& IN	ΓERNET	
To Wh	om Paid			мо	DAY	YEAR	
REND	A RADIO			HO		ILAK	
Mailin	g Address			4	14	2014	\$ 260.00
City	PUNXSUTAWNEY	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	15767	RADIO	ADS		
To Wh	om Paid			мо	DAY	YEAR	
REND	A RADIO BROADCASTING			МО		ILAK	
Mailin	g Address			4	14	2014	\$ 322.00
City	PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	15220	RADIO	ADS		
To Wh	om Paid			мо	DAY	YEAR	
THE B	ROOKVILLE MIRROR			МО		ILAK	
Mailin	g Address			4	19	2014	\$ 135.00
City	BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	15825	PRINT A	AD		
To Wh	om Paid			MO	IDAY	I YFAR	
	om Paid ROOKVILLE MIRROR			МО	DAY	YEAR	
ТНЕ В				MO 4	DAY 19	YEAR 2014	\$ 250.00
ТНЕ В	ROOKVILLE MIRROR	State	Zip Code (Plus 4)	4		2014	\$ 250.00

To W	nom Paid			МО	DAY	YEAR	
ARIST	TOTLE			1410	DA1	ILAK	
Mailin	g Address			4	19	2014	\$ 900.00
City		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
				CAMPAI	GN SOFTW	/ARE	
To Wi	nom Paid			мо	DAY	YEAR	
ВАТТ	AGLIA PRINTING			МО	DA1	ILAK	
Mailin	g Address			4	28	2014	\$ 2,490.33
City	BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	15825				
To W	nom Paid			МО	DAY	VEAD	
INDIA	ANA CO. REPUB. COMMITTEE			МО	DAY	YEAR	
Mailin	g Address			4	30	2014	\$ 430.00
City	INDIANA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	15701	REPUB.	DINNER		
To W	nom Paid				l _{DAY}	VEAD	
INDIA	NA CO. REPUB COMM.			МО	DAY	YEAR	
Mailin	g Address			4	30	2014	\$ 30.00
City	INDIANA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	15701				
To W	nom Paid			МО	DAY	VEAD	
REND	A RADIO			МО	DAY	YEAR	
Mailin	g Address			5	6	2014	\$ 689.00
City	PUNXSUTAWNEY	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	15767	RADIO	ADS		
To Wi	nom Paid			МО	DAY	YEAR	
REND	A RADIO			МО	DAY	TEAK	
Mailin	g Address			5	6	2014	\$ 1,137.50
City	PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	15220				
To W	nom Paid		•	МО	DAY	YEAR	
ARIST	TOTLE			МО	DA1	ILAK	
Mailin	g Address			2	14	2014	\$ 900.00
City	SAN DIEGO	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		CA	92123	CAMPAI	GN SOFTW	/ARE	
To W	nom Paid			MO	DAY	YEAR	
ВАТТ	AGLIA PRINTING COMPANY			МО	DAT	TEAR	
Mailin	g Address			3	3	2014	\$ 159.00
City	BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	15825	FLYERS			

To Wi	nom Paid			МО	DAY	YEAR		
THE N	1IRRORS			1-10		1 Z / LIK		
Mailin	g Address			3	3	2014	\$	375.00
City	BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	15825	NEWSP	APER ADS			
To Wi	nom Paid			МО	DAY	YEAR		
REND	A BROADCASTING			NO	DAI	ILAK		
Mailin	g Address			2	27	2014	\$	504.00
City	INDIANA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	15701	RADIO	AD			
To Wi	nom Paid			МО	DAY	YEAR		
R &ar	np; I MEDIA			МО	DAT	TEAR		
Mailin	g Address			3	24	2014	\$	1,225.00
City	BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	15825	BILLBO	ARDS			
To W	nom Paid			МО	DAY	YEAR		
ADVE	RTISING BY SCHUCKERS			МО	DAT	TEAR		
Mailin	g Address			3	3	2014	\$	1,158.58
City	BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	15825	MAGNE	TIC ADS			
To W	nom Paid			МО	DAY	YEAR		
INDIA	NA GAZETTE			МО	DAT	TEAR		
Mailin	g Address			2	27	2014	\$	254.70
City	INDIANA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	15701	NEWSP	APER AD			
To W	nom Paid			МО	DAY	YEAR		
SOLLI	ENBERGERS			MO	DAT	TEAR		
Mailin	g Address			3	10	2014	\$	15.00
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	17101	NOTARY	AND COP	Y SERVIO	CES	
To Wi	nom Paid	•	·		DAY	VEAD		
LORI	LAYS			МО	DAY	YEAR		
Mailin	g Address			3	25	2014	\$	464.00
City	BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	15825	REIMB.	FOR BING	O DOBBE	RS	
To W	nom Paid			МО	DAY	YEAR		
JACKI	E WILLIAMS			MO	DAT	TEAR		
Mailin	g Address			3	25	2014	\$	2,062.50
City	RIDGWAY	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure	<u> </u>	
		PA	15853	MARKET	ΓING SERV	'.		

To Whom Paid			МО	DAY	YEAR	
BAHAGLIA PRINTING			MO	DAI	ILAK	
Mailing Address			3	25	2014	\$ 435.00
City BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
	PA	15825	BROCH	JRES		
To Whom Paid			МО	DAY	YEAR	
WAL MART			1-10			
Mailing Address			3	12	2014	\$ 41.31
City CLARION	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
	PA		PRINTE	R CASSET	Γ	
						PAGE TOTAL
Enter Grand Total of Expenditu	ures on Page 1, Rep	ort Cover Page, Item D	-			\$ 14,514.92

SCHEDULE IV 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	1			
CRIS [DUSH CAMPAIGN COMMITTEE			From:		<u>4/1/2014</u>	То:		<u>5/5/2014</u>
						DATE			itstanding lance of Debt
Name	of Creditor				мо	DAY	YEAR		
CRIS I	DUSH						7 = 7 11.1		
Mailin	g Address				4	29	2014	\$	149.00
City	BROOKVILLE	State	Zip Code (F	lus 4)	Descrip	tion of Deb	t		
		PA	15825		CAMPAI GRAPHI		NS ON P	ERSO	ONAL CARD 33
Name	of Creditor					DAY	VEAD		
CRIS I	DUSH				МО	DAY	YEAR		
Mailin	g Address				4	21	2014	\$	1,463.15
City	BROOKVILLE	State	Zip Code (F	lus 4)	Descrip	tion of Deb	t		
		PA	15825		CAMPAI	GN MATER	RIALS AD	S	
Name	of Creditor				МО	DAY	YEAR		
CRIS I	DUSH				МО	DAT	TEAR		
Mailin	g Address				4	21	2014	\$	387.00
City	BROOKVILLE	State	Zip Code (F	lus 4)	Descrip	tion of Deb	t		
		PA	15825		AD STR RADIO		OADCAST	ΓWI	TH PERS. CK.
Name	of Creditor				М0	DAY	VEAD		
PATRI	CIA LEACH				МО	DAY	YEAR		
Mailin	g Address				3	1	2014	\$	66.78
City	MARION CENTER	State	Zip Code (F	lus 4)	Descrip	tion of Deb	t		
		PA	15759		MEET & RESTAL	amp; GRE JRANT, HO	ET AT HO ME PA	MEM	IADE
Name	of Creditor				МС	DAY	VEAD		
PATRI	CIA LEACH				МО	DAT	YEAR		
Mailin	g Address				3	6	2014	\$	143.63

Zip Code (Plus 4)

15759

City

MARION CENTER

State

PA

Description of Debt

MEET & RESTAURANT, COOKPORT, PA

Name of Creditor PATRICIA LEACH			мо	DAY	YEAR		
Mailing Address			2	28	2014	\$	175.43
City MARION CENTER	State	Zip Code (Plus 4)	Descrip	tion of Deb	t		
	PA	15759	OF NEW		D MESSA	GE FC	RS AND COPIES OR RAYNE AND
							PAGE TOTAL
Enter Grand Total of Unpa	aid Debts on Page 1,	Report Cover Page, Iten	n G.			\$	2,384.99
					L		
					L		