

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

|   |                          |                          |                         |                         |                                    |  |  |                     |                            |                    |                                     |
|---|--------------------------|--------------------------|-------------------------|-------------------------|------------------------------------|--|--|---------------------|----------------------------|--------------------|-------------------------------------|
| <b>Filer Identification Number :</b> 20150033                         |                          | <b>Report Filed By :</b> |                         | <b>CANDIDATE</b>        |                                    | <b>COMMITTEE</b> <input checked="" type="checkbox"/> | <b>LOBBYIST</b>                                  |                     |                            |                    |                                     |
| <b>Name of Filing Committee, Candidate or Lobbyist:</b> Build PA PAC  |                          |                          |                         |                         |                                    |  |  |                     |                            |                    |                                     |
| <b>Street Address:</b> 816 Highfield Court                            |                          |                          |                         |                         |                                    |  |  |                     |                            |                    |                                     |
| <b>City:</b> Coraopolis   |                          |                          |                         | <b>State:</b> PA        |                                    | <b>Zip Code:</b> 15108                               |  |                     |                            |                    |                                     |
| <b>TYPE OF REPORT</b><br><br>(place X to the right of report type)    | 6TH TUESDAY PRE-PRIMARY  | 1.                       | 2ND FRIDAY PRE-PRIMARY  | 2.X                     | 30 DAY PRIMARY                     | POST-PRIMARY   | 3.   | AMENDMENT REPORT?   | Yes                        | No                 | <input checked="" type="checkbox"/> |
|   | 6TH TUESDAY PRE-ELECTION | 4.                       | 2ND FRIDAY PRE-ELECTION | 5.                      | 30 DAY ELECTION                    | POST-ELECTION  | 6.   | TERMINATION REPORT? | Yes                        | No                 | <input checked="" type="checkbox"/> |
|   | ANNUAL REPORT            | 7.                       | Year 2015               |                         | <b>FILING METHOD ( ) CHECK ONE</b> |  | <b>PAPER</b> <input checked="" type="checkbox"/> | <b>DISKETTE</b>     |                            |                    |                                     |
| <b>Name of Office Sought by Candidate:</b>                            |                          |                          |                         | <b>DATE OF ELECTION</b> |                                    |  | <b>District Number</b>                           | <b>Office Code</b>  | <b>Party Code</b>          | <b>County Code</b> |                                     |
|   |                          |                          |                         | <b>MO</b>               | <b>DAY</b>                         | <b>YEAR</b>  | 02   |                     |                            |                    |                                     |
|   |                          |                          |                         | 11                      | 3                                  | 2015   | (SEE INSTRUCTIONS FOR CODES)                     |                     |                            |                    |                                     |
| <b>Summary of Receipts and Expenditures from:</b>                     |                          | <b>MO</b>                | <b>DAY</b>              | <b>YEAR</b>             | <b>TO</b>                          | <b>MO</b>  | <b>DAY</b>                                       | <b>YEAR</b>         | <b>FOR OFFICE USE ONLY</b> |                    |                                     |
|   |                          | 3                        | 31                      | 2015                    |                                    | 5  | 4  | 2015                |                            |                    |                                     |
| <b>A. Amount Brought Forward From Last Report</b>                     |                          |                          |                         |                         | \$ 88,116.16                       |  |  |                     |                            |                    |                                     |
| <b>B. Total Monetary Contributions And Receipts (From Schedule I)</b> |                          |                          |                         |                         | \$ 45,505.97                       |  |  |                     |                            |                    |                                     |
| <b>C. Total Funds Available (Sum Of Lines A and B)</b>                |                          |                          |                         |                         | \$ 133,622.13                      |  |  |                     |                            |                    |                                     |
| <b>D. Total Expenditures (From Schedule III)</b>                      |                          |                          |                         |                         | \$ 26,679.69                       |  |  |                     |                            |                    |                                     |
| <b>E. Ending Cash Balance (Subtract Line D From Line C)</b>           |                          |                          |                         |                         | \$ 106,942.44                      |  |  |                     |                            |                    |                                     |
| <b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>  |                          |                          |                         |                         | \$ 0.00                            |  |  |                     |                            |                    |                                     |
| <b>G. Unpaid Debts And Obligations (From Schedule IV)</b>             |                          |                          |                         |                         | \$ 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 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

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                    |
| Build PA PAC                                 | From: <u>3/31/2015</u> To: <u>5/4/2015</u> |

|  |         |
|--|---------|
| <b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b> |         |
| <b>TOTAL for the Reporting Period (1)</b>                                      | \$ 0.00 |

|  |         |
|--|---------|
| <b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b> |         |
| <b>Contributions Received From Political Committees (Part A)</b>                 | \$ 0.00 |
| <b>All Other Contributions (Part B)</b>  | \$ 0.00 |
| <b>TOTAL for the Reporting Period (2)</b>  | \$ 0.00 |

|   |              |
|---|--------------|
| <b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b> |              |
| <b>Contributions Received From Political Committees (Part C)</b>        | \$ 33,500.00 |
| <b>All Other Contributions (Part D)</b>                                 | \$ 12,000.00 |
| <b>TOTAL for the Reporting Period (3)</b>                               | \$ 45,500.00 |

|  |         |
|--|---------|
| <b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b> |         |
| <b>TOTAL for the Reporting Period (4)</b>  | \$ 5.97 |

|   |              |
|---|--------------|
| <b>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.)</b> | \$ 45,505.97 |
|---|--------------|





# 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.**

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b><br><br>Build PA PAC | <b>Reporting Period</b><br><br><b>From:</b> <u>3/31/2015</u> <b>To:</b> <u>5/4/2015</u> |
|--|---|

|  |          |                         |  | DATE |     | AMOUNT |             |
|--|----------|-------------------------|--|------|-----|--------|-------------|
| Full Name of Contributing Committee<br>Pennsylvania Coal PAC               |          |                         |  | MO   | DAY | YEAR   | \$ 1,000.00 |
| Mailing Address 212 North Third Street, Suite 102                          |          |                         |  | 4    | 9   | 2015   |             |
| City Harrisburg  | State PA | Zip Code (Plus 4) 17101 |  |      |     |        |             |
| Full Name of Contributing Committee<br>NFG PAPAC                           |          |                         |  | MO   | DAY | YEAR   | \$ 1,000.00 |
| Mailing Address 1100 State Street  |          |                         |  | 4    | 13  | 2015   |             |
| City Erie  | State PA | Zip Code (Plus 4) 16501 |  |      |     |        |             |
| Full Name of Contributing Committee<br>Highmark Health PAC                 |          |                         |  | MO   | DAY | YEAR   | \$ 1,000.00 |
| Mailing Address 1800 Center Street   |          |                         |  | 4    | 20  | 2015   |             |
| City Camp Hill   | State PA | Zip Code (Plus 4) 17089 |  |      |     |        |             |
| Full Name of Contributing Committee<br>Coalition for Pennsylvania's Future |          |                         |  | MO   | DAY | YEAR   | \$ 2,500.00 |
| Mailing Address Post Office Box 12090                                      |          |                         |  | 4    | 20  | 2015   |             |
| City Harrisburg  | State PA | Zip Code (Plus 4) 17108 |  |      |     |        |             |
| Full Name of Contributing Committee<br>Citizens for a Better Commonwealth  |          |                         |  | MO   | DAY | YEAR   | \$ 2,500.00 |
| Mailing Address Post Office Box 12090                                      |          |                         |  | 4    | 20  | 2015   |             |
| City Harrisburg  | State PA | Zip Code (Plus 4) 17108 |  |      |     |        |             |
| Full Name of Contributing Committee<br>POMPAC                              |          |                         |  | MO   | DAY | YEAR   | \$ 1,000.00 |
| Mailing Address Post Office Box 68   |          |                         |  | 5    | 4   | 2015   |             |
| City Highspire   | State PA | Zip Code (Plus 4) 17034 |  |      |     |        |             |

|   |                    |                                   |           |            |             |              |
|---|--------------------|-----------------------------------|-----------|------------|-------------|--------------|
| <b>Full Name of Contributing Committee</b><br>Pennsylvania Retail PAC             |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 500.00    |
| <b>Mailing Address</b> 224 Pine Street  |                    |                                   | 4         | 20         | 2015        |              |
| <b>City</b> Harrisburg  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17101 |           |            |             |              |
| <b>Full Name of Contributing Committee</b><br>DISPAC                              |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 1,000.00  |
| <b>Mailing Address</b> 230 South Broad Street, Suite 903                          |                    |                                   | 4         | 20         | 2015        |              |
| <b>City</b> Philadelphia  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19102 |           |            |             |              |
| <b>Full Name of Contributing Committee</b><br>Responsible Citizens                |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 15,000.00 |
| <b>Mailing Address</b> PO Box 12090   |                    |                                   | 4         | 20         | 2015        |              |
| <b>City</b> Harrisburg  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17108 |           |            |             |              |
| <b>Full Name of Contributing Committee</b><br>First Energy PAC                    |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 1,000.00  |
| <b>Mailing Address</b> 76 South Main Street                                       |                    |                                   | 5         | 4          | 2015        |              |
| <b>City</b> Akron   | <b>State</b><br>OH | <b>Zip Code (Plus 4)</b><br>44308 |           |            |             |              |
| <b>Full Name of Contributing Committee</b><br>Red River Canyon Committee          |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 1,000.00  |
| <b>Mailing Address</b> 500 N. Third Street, 9th Floor                             |                    |                                   | 4         | 20         | 2015        |              |
| <b>City</b> Harrisburg  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17101 |           |            |             |              |
| <b>Full Name of Contributing Committee</b><br>Northeast PA Leadership Fund        |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 5,000.00  |
| <b>Mailing Address</b> 22 Kimberly Drive  |                    |                                   | 4         | 9          | 2015        |              |
| <b>City</b> Dallas  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18612 |           |            |             |              |
| <b>Full Name of Contributing Committee</b><br>Health Partners of Philadelphia PAC |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 1,000.00  |
| <b>Mailing Address</b> 901 Market Street, Suite 500                               |                    |                                   | 4         | 20         | 2015        |              |
| <b>City</b> Philadelphia  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19107 |           |            |             |              |

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

**PAGE TOTAL**

\$ 33,500.00

**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.)**

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b><br><br>Build PA PAC | <b>Reporting Period</b><br><br><b>From:</b> <u>3/31/2015</u> <b>To:</b> <u>5/4/2015</u> |
|--|---|

|  |                    |                                   |                             | DATE                        |                    |                                   | AMOUNT       |
|--|--------------------|-----------------------------------|-----------------------------|-----------------------------|--------------------|-----------------------------------|--------------|
| <b>Full Name of Contributor</b><br>Sean M. Reilly                                      |                    |                                   |                             | <b>MO</b>                   | <b>DAY</b>         | <b>YEAR</b>                       | \$ 1,000.00  |
| <b>Mailing Address</b> 826 Kerper Street   |                    |                                   |                             | 4                           | 20                 | 2015                              |              |
| <b>City</b> Philadelphia   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19111 |                             |                             |                    |                                   |              |
| <b>Employer Name</b> Roscommon International   |                    |                                   |                             | <b>Occupation</b> President |                    |                                   |              |
| <b>Employer Mailing Address/Principal Place of Business</b><br>2 Bala Plaza, Suite 300 |                    |                                   | <b>City</b><br>Bala Cynwyd  |                             | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19005 |              |
| <b>Full Name of Contributor</b><br>Daniel J. Hilferty                                  |                    |                                   |                             | <b>MO</b>                   | <b>DAY</b>         | <b>YEAR</b>                       | \$ 1,000.00  |
| <b>Mailing Address</b> 220 Cedarbrook Road   |                    |                                   |                             | 4                           | 20                 | 2015                              |              |
| <b>City</b> Ardmore  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19003 |                             |                             |                    |                                   |              |
| <b>Employer Name</b> Independence Blue Cross   |                    |                                   |                             | <b>Occupation</b> President |                    |                                   |              |
| <b>Employer Mailing Address/Principal Place of Business</b><br>1901 Market Street      |                    |                                   | <b>City</b><br>Philadelphia |                             | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19103 |              |
| <b>Full Name of Contributor</b><br>David E. Barendsfeld                                |                    |                                   |                             | <b>MO</b>                   | <b>DAY</b>         | <b>YEAR</b>                       | \$ 10,000.00 |
| <b>Mailing Address</b> Post Office Box 889   |                    |                                   |                             | 5                           | 4                  | 2015                              |              |
| <b>City</b> Ellwood City   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>16117 |                             |                             |                    |                                   |              |
| <b>Employer Name</b> Ellwood City Forge  |                    |                                   |                             | <b>Occupation</b> CEO       |                    |                                   |              |
| <b>Employer Mailing Address/Principal Place of Business</b><br>Post Office Box 31      |                    |                                   | <b>City</b><br>Ellwood City |                             | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>16117 |              |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 12,000.00      |

## 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.**

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b><br><br>Build PA PAC | <b>Reporting Period</b><br><br>From: <u>3/31/2015</u> To: <u>5/4/2015</u> |
|--|---|

|   |                    |                                   |  | DATE    |           | AMOUNT       |                |
|---|--------------------|-----------------------------------|--|---------|-----------|--------------|----------------|
| <b>Full Name</b><br>First National Bank       |                    |                                   |  | MO<br>3 | DAY<br>31 | YEAR<br>2015 | \$<br><br>0.82 |
| <b>Mailing Address</b> 4140 East State Street |                    |                                   |  |         |           |              |                |
| <b>City</b> Hermitage                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>16148 |  |         |           |              |                |
| <b>Receipt Description</b> interest earned    |                    |                                   |  |         |           |              |                |
| <b>Full Name</b><br>First National Bank       |                    |                                   |  | MO<br>4 | DAY<br>30 | YEAR<br>2015 | \$<br><br>5.15 |
| <b>Mailing Address</b> 4140 East State Street |                    |                                   |  |         |           |              |                |
| <b>City</b> Hermitage                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>16148 |  |         |           |              |                |
| <b>Receipt Description</b> interest earned    |                    |                                   |  |         |           |              |                |

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 5.97           |



## 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**

|  |  |  |         |
|--|--|--|---------|
| <b>Name of Filing Committee or Candidate</b>   |  | <b>Reporting Period</b>                    |         |
| Build PA PAC   |  | From: <u>3/31/2015</u> To: <u>5/4/2015</u> |         |
| <b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>   |  |  |         |
| TOTAL for the Reporting Period   |  | (1)  | \$ 0.00 |
| <b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>  |  |  |         |
| TOTAL for the Reporting Period   |  | (2)  | \$ 0.00 |
| <b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>  |  |  |         |
| TOTAL for the Reporting Period   |  | (3)  | \$ 0.00 |
| 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.) |  |  | \$ 0.00 |

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

|                                       |  |
|---------------------------------------|--|
| Name of Filing Committee or Candidate | Reporting Period<br><br>From: <span style="float: right;">To:</span> |
|---------------------------------------|--|

|   |       |                   | DATE |     |      | AMOUNT                           |
|---|-------|-------------------|------|-----|------|----------------------------------|
| Full Name of Contributor  |       |                   | MO   | DAY | YEAR | \$ 0.00                          |
| Mailing Address   |       |                   |      |     |      |                                  |
| City  | State | Zip Code (Plus 4) |      |     |      |                                  |
| Description of Contribution:  |       |                   |      |     |      |                                  |
| Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2. |       |                   |      |     |      | <b>PAGE TOTAL</b><br><br>\$ 0.00 |

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

|                                       |                  |
|---------------------------------------|------------------|
| Name of Filing Committee or Candidate | Reporting Period |
|                                       | From: To:        |

|   |       |                  |       | DATE             |                             | AMOUNT          |         |
|---|-------|------------------|-------|------------------|-----------------------------|-----------------|---------|
| Full Name of Contributor  |       |                  |       | MO               | DAY                         | YEAR            | \$ 0.00 |
| Mailing Address   |       |                  |       |                  |                             |                 |         |
| City  | State | Zip Code(Plus 4) |       |                  |                             |                 |         |
| Employer of Contributor   |       |                  |       | Occupation       |                             |                 |         |
| Employer Mailing Address/Principal Place of Business  |       | City             | State | Zip Code(Plus 4) | Description of Contribution |                 |         |
| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. |       |                  |       |                  |                             | PAGE TOTAL 0.00 |         |

# SCHEDULE III STATEMENT OF EXPENDITURES

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                   |
| Build PA PAC                                 | From <u>3/31/2015</u> To: <u>5/4/2015</u> |

| DATE   |                 |                                |   | AMOUNT      |
|--|-----------------|--------------------------------|---|-------------|
| To Whom Paid   | MO              | DAY                            | YEAR  |             |
| Stephen STARR Events                                       |                 |                                |   |             |
| <b>Mailing Address</b> 118-128 North Broad Street          | 4               | 8                              | 2015  | \$ 7,675.24 |
| <b>City</b> Philadelphia                                   | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 19102 | <b>Description of Expenditure</b> event catering      |             |
| To Whom Paid   | MO              | DAY                            | YEAR  |             |
| Mr. Steven Miller  |                 |                                |   |             |
| <b>Mailing Address</b> 512 Kifer Street                    | 4               | 14                             | 2015  | \$ 279.24   |
| <b>City</b> Bellefonte                                     | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 16823 | <b>Description of Expenditure</b> reimbursement       |             |
| To Whom Paid   | MO              | DAY                            | YEAR  |             |
| American Express   |                 |                                |   |             |
| <b>Mailing Address</b> PO Box 1270                         | 4               | 23                             | 2015  | \$ 479.23   |
| <b>City</b> Newark   | <b>State</b> NJ | <b>Zip Code (Plus 4)</b> 07101 | <b>Description of Expenditure</b> credit card payment |             |
| To Whom Paid   | MO              | DAY                            | YEAR  |             |
| Covey for Justice Committee                                |                 |                                |   |             |
| <b>Mailing Address</b> 115 North Broad Street              | 5               | 1                              | 2015  | \$ 5,000.00 |
| <b>City</b> Doylestown                                     | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 18901 | <b>Description of Expenditure</b> donation            |             |
| To Whom Paid   | MO              | DAY                            | YEAR  |             |
| Maverick Finance   |                 |                                |   |             |
| <b>Mailing Address</b> 403 North Second Street, 2FL        | 5               | 4                              | 2015  | \$ 8,000.00 |
| <b>City</b> Harrisburg                                     | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 17101 | <b>Description of Expenditure</b> consulting          |             |
| To Whom Paid   | MO              | DAY                            | YEAR  |             |
| Judge Judy Olson for Supreme Court                         |                 |                                |   |             |
| <b>Mailing Address</b> c/o Jen Callery 7080 Clubview Drive | 5               | 4                              | 2015  | \$ 5,000.00 |
| <b>City</b> Bridgeville                                    | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 15017 | <b>Description of Expenditure</b> contribution        |             |

|  |                    |                                   |  |            |             |  |
|--|--------------------|-----------------------------------|--|------------|-------------|--|
| <b>To Whom Paid</b><br>Mr. Steven Miller                                       |                    |                                   | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 245.98                         |
| <b>Mailing Address</b> 512 Kifer Street  |                    |                                   | 5  | 4          | 2015        |  |
| <b>City</b> Bellefonte   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>16823 | <b>Description of Expenditure</b><br>reimbursement |            |             |  |
| <b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b> |                    |                                   |  |            |             | <b>PAGE TOTAL</b><br><b>\$</b> 26,679.69 |

