#### **Campaign Finance Report**

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

| Filer Identificati<br>Number :           | on 2012                         | 20111      |                        |       | Rep<br>File |       |                | CANDI       | DATE     |             | СОМ        | 4ITTEE             | ✓              | LOBI     | BYIST     |          |    |
|--|---------------------------------|------------|------------------------|-------|-------------|-------|----------------|-------------|----------|-------------|------------|--------------------|----------------|----------|-----------|----------|----|
| Name of Filing C                         | Committee, Candid               | late or L  | obbyist:               |       | NEIL        | SO    | N FOR          | R THE NO    | DRTHE    | AST         |            |                    |                |          |           |          |    |
| Street Address:                          | PO BOX 6054                     | 1          |                        |       |             |       |                |             |          |             |            |                    |                |          |           |          |    |
| City:                                    | PHILADELPHI                     | A          |                        |       |             |       |                | State:      | PA       |             |            | Zip Cod            | <b>ie:</b> 19  | 9114     |           |          |    |
| TYPE OF<br>REPORT                        | 6TH TUESDAY<br>PRE-PRIMARY      | 1.         | 2ND FRIDAY<br>PRIMARY  | PRE-  | - 2         | 2.    | 30 DA<br>PRIMA |             | POST-    | 3.          |            | AMENDM<br>REPORT   |                | Yes      | No        |          |    |
| (place X to<br>the right of              | 6TH TUESDAY<br>PRE-ELECTION     | 4.         | 2ND FRIDAY<br>ELECTION | PRE   | - 5         | 5.    | 30 DA<br>ELECT |             | POST-    | 6. <b>X</b> |            | TERMINA<br>REPORT  |                | Yes      | No        | `        |    |
| report type)                             | ANNUAL REPORT                   | 7.         | <b>Year</b> 2012       |       |             |       |                | IG METH     |          |             |            | PAPER              |                | <b>/</b> | DISKE     | TTE      |    |
| Name of Office S                         | Sought by Candida               | ite:       |                        |       |             |       |                | DATE C      | F ELE    | CTIC        | N          | District<br>Number | Office<br>Code | Par      | ty Code   | Count    | у  |
|  |                                 |            |                        |       |             |       |                | МО          | DAY      | YI          | EAR        | Number             | 10000          | DEN      | 1         | couc     |    |
|  |                                 |            |                        |       |             |       |                | 11          |          | 6           | 2012       |                    | (SEE IN        | STRUCTI  | ONS FOR ( | CODES)   |    |
| •  | Receipts and                    | МО         | DAY Y                  | EAR   |             |       |                | МО          | DAY      | Y           | EAR        | FO                 | R OFFI         | CE USE   | ONLY      |          |    |
| Expenditures                             | s from:                         |            | 10 23                  | 20    | 012         | Т     | 0              | 11          |          | 26          | 2012       |                    |                |          |           |          |    |
| A. Amount Bro                            | ught Forward Fro                | m Last R   | eport                  |       |             |       | \$             |             |          | 32,4        | 463.89     |                    |                |          |           |          |    |
| B. Total Moneta                          | ary Contributions               | And Rec    | eipts (From S          | che   | dule        | I)    | \$             |             |          | 33,8        | 856.96     |                    |                |          |           |          |    |
| C. Total Funds                           | Available (Sum O                | f Lines A  | and B)                 |       |             |       | \$             |             |          | 66,3        | 320.85     |                    |                |          |           |          |    |
| D. Total Expend                          | ditures (From Sch               | edule II   | I)                     |       |             |       | \$             |             |          | 48,8        | 307.67     |                    |                |          |           |          |    |
| E. Ending Cash                           | Balance (Subtrac                | t Line D   | From Line C)           |       |             |       | \$             |             |          | 17,5        | 13.18      |                    |                |          |           |          |    |
| F. Value Of In-                          | Kind Contribution               | s Receiv   | ed (From Sch           | edul  | le II       | )     | \$             |             |          | 3           | 351.50     |                    |                |          |           |          |    |
| G. Unpaid Debt                           | ts And Obligations              | (From S    | Schedule IV)           |       |             |       | \$             |             |          | 10,0        | 00.00      |                    |                |          |           |          |    |
|  |                                 |            | ,                      | 4FF   | IDA         | VI    | ΓSE            | CTION       |          |             |            |                    |                |          |           |          |    |
| PART I - If this is                      | s a Committee rep               | ort, trea  | surer sign he          | re. I | if thi      | is is | a Can          | ididate r   | eport, d | andi        | date sig   | ın here.           |                |          |           |          |    |
| I swear (or affirm) correct and comple   | ) that this report, inc<br>ete. | luding the | attached sche          | dules | filed       | d on  | paper o        | or by elect | ronic m  | edium       | , are to t | he best o          | f my kno       | wledge   | and beli  | ef , tru | e. |
| Sworn to and subs                        | cribed before me thi<br>day of  | s          | 20                     |       |             |       |                |             |          | 5           | Signature  | of Perso           | n Submit       | ting Rep | oort      |          | -  |
|  | Signatu                         | ıre        |                        |       |             |       | -              |             |          |             |            | Prin               | ted Name       | •        |           |          | -  |
| My Commission Ex                         | cpires                          |            |                        |       |             |       | _              |             |          |             |            | Ema                | il             |          |           |          | -  |
|  | МО                              | D          | AY                     | YR    |             |       |                |             | Are      | ea Cod      | ie         | Daytim             | e Teleph       | one Nu   | mber      |          |    |
| Part II- If this is                      | a report of a can               | didate's   | authorized Co          | omm   | itte        | e, C  | andida         | ate shall   | sign he  | ere.        |            |                    |                |          |           |          |    |
| I swear (or affirm)<br>No 320) as amende | that to the best of led.        | my knowle  | edge and belief        | this  | politi      | ical  | commi          | ittee has n | ot viola | ted ar      | y provis   | ions of th         | e act of J     | une 3,1  | 937 (P.L  | . 1333   | ,  |
| Sworn to and subsc                       | ribed before me this            |            | 20                     |       |             |       |                |             |          |             | s          | ignature o         | of Candid      | ate      |           |          | -  |
|  | day of                          |            |                        |       |             |       | -              |             |          |             |            | Printe             | d Name         |          |           |          | -  |
| My Commission F                          | Signature                       |            |                        |       |             |       | -              |             |          |             |            | Ema                | il             |          |           |          | -  |
| My Commission Exp                        |                                 |            |                        |       |             |       |                |             |          |             |            |                    | <del></del>    |          |           |          |    |
|  | 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 | y Period  |               |            |
| NEILSON FOR THE NORTHEAST  | From:     | 10/23/201 | <u>12</u> To: | 11/26/2012 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor  |           |           |               |            |
| TOTAL for the Reporting  | Period    | (1)       | \$            | 50.00      |
| 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)   |           |           | \$            | 2,800.00   |
| TOTAL for the Reporting  | Period    | (2)       | \$            | 2,800.00   |
| 3. Contributions Received Over \$250.00 (From Part C and Part D)   |           |           |               |            |
| Contributions Received From Political Committees (Part C)  |           |           | \$            | 28,500.00  |
| All Other Contributions (Part D)   |           |           | \$            | 2,500.00   |
| TOTAL for the Reporting  | Period    | (3)       | \$            | 31,000.00  |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)  |           |           |               |            |
| TOTAL for the Reporting  | Period    | (4)       | \$            | 6.96       |
| Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa |           |           | \$            | 33,856.96  |

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

| Name of Filing Committee    | or Candidate |                   | Reporting | Period |      |    |        |
|-----------------------------|--------------|-------------------|-----------|--------|------|----|--------|
|                             |              |                   | From:     |        | То   | :  |        |
|                             |              | <b>I</b>          |           | DATE   |      |    | AMOUNT |
| Full Name of Contributing C | ommittee     |                   | МО        | DAY    | YEAR |    |        |
| Mailing Address             |              |                   |           |        |      | \$ | 0.00   |
| City                        | State        | Zip Code (Plus 4) |           |        |      |    |        |

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

0.00

### 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 Car                | ndidate            |                                       | Reporting P | eriod  |                 |                   |
|--|--------------------|---------------------------------------|-------------|--------|-----------------|-------------------|
| NEILSON FOR THE NORTHEAST                      | -                  |                                       | From:       | 10/23/ | 2012 <b>T</b> o | <u>11/26/2012</u> |
|  |                    |                                       |             | DATE   |                 | AMOUNT            |
| Full Name of Contributor ROBERT J MCGOLDRICK   |                    |                                       | мо          | DAY    | YEAR            |                   |
| Mailing Address 41 W BENEDI                    | CT AVE             |                                       |             |        |                 | <b>\$</b> 250.00  |
| City HAVERTOWN                                 | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190832303 | 10          | 24     | 2012            |                   |
| Full Name of Contributor BRUCE SHELLY          |                    |                                       | МО          | DAY    | YEAR            |                   |
| Mailing Address 1126 CALLOW  City PHILADELPHIA | State              | Zip Code (Plus 4)                     | 10          | 24     | 2012            | \$ 200.00         |
| Full Name of Contributor BRUCE A. GROSS        | PA                 | 191233710                             | мо          | DAY    | YEAR            |                   |
| Mailing Address 3814 CHALFO                    | NT DR              |                                       |             |        |                 | \$ 200.00         |
| City PHILADELPHIA                              | State<br>PA        | <b>Zip Code (Plus 4)</b><br>191543442 | 11          | 2      | 2012            | \$ 200.00         |
| Full Name of Contributor PATRICK RYAN          |                    |                                       | МО          | DAY    | YEAR            |                   |
| Mailing Address PO BOX 173  City CHADDS FORD   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19006     | 10          | 24     | 2012            | \$ 250.00         |
| Full Name of Contributor DARELL LINDER         |                    |                                       | МО          | DAY    | YEAR            |                   |
| Mailing Address 323 STONEY  City SOUTHAMPTON   | FORD ROAD          | Zip Code (Plus 4)                     | 10          | 24     | 2012            | \$ 100.00         |
| City SOUTHAMPTON                               | PA                 | 18966                                 |             |        |                 |                   |

|   |   |                                 |  |           |               |                      | PAGE |        |
|---|---|---------------------------------|--|-----------|---------------|----------------------|------|--------|
| Full Name of Con  | tributor  |                                 |  |           |               |                      |      |        |
| THOMAS G MOO  | RE  |                                 |  | МО        | DAY           | YEAR                 |      |        |
| Mailing Address   | 3548 K ST   |                                 |  |           |               |                      | \$   | 250.00 |
| City PHILADE  | ΙΡΗΤΑ   | State                           | Zip Code (Plus 4)                      | 10        | 24            | 2012                 |      |        |
| 111111111111111111111111111111111111111   |   | PA                              | 191341413                              |           |               |                      |      |        |
| Full Name of Con  |   |                                 |  | мо        | DAY           | YEAR                 |      |        |
| Mailing Address   | 3813 OAKHILL RD   |                                 |  |           |               |                      | \$   | 200.00 |
| City PHILADE  | IDHTA   | State                           | Zip Code (Plus 4)                      | 10        | 23            | 2012                 |      |        |
| · ITIILADEI   | LITIA   | PA                              | 191544227                              |           |               |                      |      |        |
| Full Name of Con<br>ROY S. COHEN  | tributor  |                                 |  | МО        | DAY           | YEAR                 |      |        |
| Mailing Address   | 152 RENAISSANCE   | DRIVE                           |  |           |               |                      | \$   | 250.00 |
| City PHILADE  | LPHIA   | State                           | Zip Code (Plus 4)                      | 10        | 24            | 2012                 |      |        |
|   |   | PA                              | 19103                                  |           |               |                      |      |        |
| Full Name of Contributor  EREDERICK FOX   |   |                                 |  |           |               |                      |      |        |
| Full Name of Con<br>FREDERICK FOX   |   |                                 |  | МО        | DAY           | YEAR                 |      |        |
|   |   | UNIT 2538                       |  | МО        | DAY           | YEAR                 | \$   | 250.00 |
| FREDERICK FOX   | 500 REGATTA DR  | UNIT 2538                       | Zip Code (Plus 4)                      | <b>мо</b> | <b>DAY</b> 24 | <b>YEAR</b> 2012     | \$   | 250.00 |
| FREDERICK FOX  Mailing Address  | 500 REGATTA DR  |                                 | <b>Zip Code (Plus 4)</b><br>191465259  |           |               |                      | \$   | 250.00 |
| FREDERICK FOX  Mailing Address  | 500 REGATTA DR LPHIA  | State                           |  |           | 24            |                      | \$   | 250.00 |
| FREDERICK FOX  Mailing Address  City PHILADE  Full Name of Con  | 500 REGATTA DR LPHIA  | State<br>PA                     |  | 10        | DAY           | 2012<br>YEAR         | \$   | 250.00 |
| FREDERICK FOX  Mailing Address  City PHILADE  Full Name of Con JOANNE PHILLIP   | 500 REGATTA DR  LPHIA  tributor S   | State<br>PA                     |  | 10        | 24            | 2012                 |      |        |
| FREDERICK FOX  Mailing Address  City PHILADE  Full Name of Con JOANNE PHILLIP  Mailing Address  | 500 REGATTA DR  LPHIA  tributor S   | State PA TOWN RD                | 191465259                              | 10        | DAY           | 2012<br>YEAR         |      |        |
| FREDERICK FOX  Mailing Address  City PHILADE  Full Name of Con JOANNE PHILLIP  Mailing Address  | 500 REGATTA DR LPHIA  tributor S 302 S OLD MIDDLE                               | State PA TOWN RD State          | 191465259  Zip Code (Plus 4)           | 10        | DAY           | 2012<br>YEAR         |      |        |
| FREDERICK FOX  Mailing Address  City PHILADE  Full Name of Con JOANNE PHILLIP  Mailing Address  City MEDIA  Full Name of Con                                | 500 REGATTA DR LPHIA  tributor S 302 S OLD MIDDLE                               | State PA  TOWN RD  State PA     | 191465259  Zip Code (Plus 4)           | 10 MO     | 24<br>DAY     | 2012<br>YEAR<br>2012 |      |        |
| FREDERICK FOX  Mailing Address  City PHILADE  Full Name of Con JOANNE PHILLIP  Mailing Address  City MEDIA  Full Name of Con ESTHER SULZBA  Mailing Address | 500 REGATTA DR  LPHIA  tributor S 302 S OLD MIDDLE  tributor CH 437 SUNNY RIDGE | State PA  TOWN RD  State PA     | 191465259  Zip Code (Plus 4)           | 10 MO     | 24<br>DAY     | 2012<br>YEAR<br>2012 | \$   | 100.00 |
| FREDERICK FOX  Mailing Address  City PHILADE  Full Name of Con JOANNE PHILLIP  Mailing Address  City MEDIA  Full Name of Con ESTHER SULZBA  Mailing Address | 500 REGATTA DR  LPHIA  tributor S 302 S OLD MIDDLE  tributor CH 437 SUNNY RIDGE | State PA  TOWN RD  State PA  RD | 191465259  Zip Code (Plus 4) 190634751 | 10 MO     | 24  DAY  31   | 2012  YEAR  2012     | \$   | 100.00 |

| Full Name of Contributor GERARD ROTHSTEIN, JR. |                    |                                   | мо | DAY | YEAR |    |        |
|--|--------------------|-----------------------------------|----|-----|------|----|--------|
| Mailing Address 2 ROLLING H                    | EIGHTS LANE P.O.   | BOX 273                           |    |     |      | \$ | 250.00 |
| City CHESTER HEIGHTS                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19017 | 10 | 24  | 2012 |    |        |
| Full Name of Contributor MICHAEL KEARNEY       |                    |                                   | МО | DAY | YEAR |    |        |
| Mailing Address 700 MANOR R                    | ND.                |                                   |    |     |      | 1  |        |
| 700 MANOR N                                    | (D                 |                                   | 10 | 24  | 2012 | \$ | 250.00 |

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

**PAGE TOTAL \$** 2,800.00

#### **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 |        |      |                    |
|---|--------------------|---------------------------|-------------------|--------|--------|------|--------------------|
| NEILSON FOR THE NORTHEAST   |                    |                           | From:             | 10/2   | 3/2012 | То:  | 11/26/2012         |
|   |                    |                           |                   | DA     | TE     |      | AMOUNT             |
| Full Name of Contributing Committee STEAMFITTERS' LOCAL 420 COPE      |                    |                           |                   | МО     | DAY    | YEAR |                    |
| Mailing Address 14420 TOWNSEND R                                      | RD STE A           |                           |                   |        |        |      | <b>\$</b> 1,000.00 |
| City PHILADELPHIA   | <b>State</b><br>PA | <b>Zip Code</b><br>191541 | <b>(Plus 4)</b>   | 10     | 31     | 2012 |                    |
| Full Name of Contributing Committee  DAN FRANKEL/23RD DISTRICT COMMIT | ПЕЕ                |                           |                   | МО     | DAY    | YEAR |                    |
| Mailing Address PO BOX 81594  City PITTSBURGH                         | State<br>PA        | <b>Zip Code</b> 152170    | e (Plus 4)<br>394 | 11     | 15     | 2012 | \$ 500.00          |
| Full Name of Contributing Committee NECA-PAC                          |                    |                           |                   | МО     | DAY    | YEAR |                    |
| Mailing Address 2003 RENAISSANCE                                      | BLVD               |                           |                   |        |        |      | <b>\$</b> 500.00   |
| City KING OF PRUSSIA  | State<br>PA        | <b>Zip Code</b> 194062    | <b>Plus 4)</b>    | 10     | 24     | 2012 |                    |
| Full Name of Contributing Committee THE CHARTWELL LAW PAC             |                    |                           |                   | МО     | DAY    | YEAR |                    |
| Mailing Address 970 RITTENHOUSE R  City EAGLEVILLE                    | State PA           | <b>Zip Code</b> 194032    | e (Plus 4)<br>265 | 11     | 20     | 2012 | \$ 10,000.00       |
| Full Name of Contributing Committee PA FUTURE PAC                     |                    |                           |                   | МО     | DAY    | YEAR |                    |
| Mailing Address PO BOX 58635  |                    |                           |                   |        |        |      | \$ 10,000.00       |
| City PHILADELPHIA   | <b>State</b> PA    | <b>Zip Code</b> 191028    | e (Plus 4)        | 11     | 2      | 2012 |                    |

| Full Name of Contributing Committee  LABORERS DISTRICT COUNCIL PAC FU | ND    |                   | МО  | DAY  | YEAR |             |
|---|-------|-------------------|-----|------|------|-------------|
| Mailing Address 665 N BROAD ST FI                                     | _ 3   |                   |     |      |      | \$ 500.00   |
| City PHILADELPHIA   | State | Zip Code (Plus 4) | 10  | 26   | 2012 |             |
|   | PA    | 191232418         |     |      |      |             |
| Full Name of Contributing Committee BEW C.O.P.E.                      |       | МО                | DAY | YEAR |      |             |
| Mailing Address 900 7TH ST NW   |       |                   |     |      |      | \$ 2,000.00 |
| City WASHINGTON   | State | Zip Code (Plus 4) | 11  | 15   | 2012 |             |
|   | DC    | 200013886         |     |      |      |             |
| Full Name of Contributing Committee  IBEW C.O.P.E.                    |       |                   | МО  | DAY  | YEAR |             |
| Mailing Address 900 7TH ST NW   |       |                   |     |      |      | \$ 4,000.00 |
| City WASHINGTON   | State | Zip Code (Plus 4) | 11  | 2    | 2012 |             |
|   | DC    | 200013886         |     |      |      |             |

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

**PAGE TOTAL \$** 28,500.00

### 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 Co              | ommittee or Candidate  |       |     |            | Rep        | orting Pe | riod    |               |            |             |
|--------------------------------|------------------------|-------|-----|------------|------------|-----------|---------|---------------|------------|-------------|
| NEILSON FOR T                  | HE NORTHEAST           |       |     |            | Fron       | n:        | 10/23/2 | <u>012</u> To | <b>)</b> : | 11/26/2012  |
|                                |                        |       |     |            |            | DA        | ATE     |               | Α          | MOUNT       |
| Full Name of Con               | tributor               |       |     |            |            | МО        | DAY     | YEAR          |            |             |
| JEFFREY SCARPE                 | ELLO                   |       |     |            |            | 140       | באו     | ILAK          |            |             |
| Mailing<br>Address             | 2003 RENAISSANCE I     | BLVD  |     |            |            |           |         |               | \$         | 500.00      |
| City NORRIST                   | OWN                    | State | Zip | Code (Plus | (4)        | 10        | 24      | 2012          | !          |             |
|                                |                        | PA    | 19  | 4062746    |            |           |         |               |            |             |
| Employer Name                  | NECA                   |       |     |            |            | Occupat   | tion    | XECUT:        | IVE        |             |
| Employer Mailing<br>Business   | Address/Principal Plac | e of  |     | City       |            | 1         | State   |               | Zip Co     | de (Plus 4) |
| 2003 RENAISSA                  | NCE BLVD               |       |     | KING OF    | PRUSS      | SIA       | PA      |               | 1940       | 6           |
| Full Name of Con<br>JOHN CONDI | tributor               |       |     |            |            | мо        | DAY     | YEAR          |            |             |
| Mailing<br>Address             | 826 ELLIS AVE          |       |     |            |            |           |         |               | \$         | 500.00      |
| City NEWTOW                    | /N SQUARE              | State | Zip | Code (Plus | <b>34)</b> | 10        | 24      | 2012          | !          |             |
|                                | -                      | PA    | 19  | 0733906    |            |           |         |               |            |             |
| Employer Name                  | HATZEL & BUEH          | LER   |     |            |            | Occupat   | tion    | XECUT         | IVE        |             |
| Employer Mailing<br>Business   | Address/Principal Plac | e of  |     | City       |            |           | State   |               | Zip Co     | de (Plus 4) |
| 2705 BLACK LAK                 | KE PLSUITE 201         |       |     | PHILADE    | LPHIA      |           | PA      |               | 1915       | 4           |
| Full Name of Con               | tributor               |       |     |            |            | мо        | DAY     | YEAR          |            |             |
| FRANKLIN P HOL                 | LERAN                  |       |     |            |            | МО        | DAI     | ILAK          |            |             |
| Mailing<br>Address             | 580 CHURCH RD          |       |     |            |            |           |         |               | \$         | 500.00      |
| City MALVERN                   | N                      | State | Zip | Code (Plus | (4)        | 10        | 24      | 2012          | !          |             |
|                                |                        | PA    | 19  | 3558672    |            |           |         |               |            |             |
| Employer Name                  | H B FRAZER CO.         |       |     |            |            | Occupat   | tion    | LECTRI        | CAL CO     | NTRACTOR    |
| Employer Mailing<br>Business   | Address/Principal Plac | e of  |     | City       |            |           | State   |               | Zip Co     | de (Plus 4) |
| 514 SHOEMAKER                  | R RD                   |       |     | KING OF    | PRUSS      | SIA       | PA      |               | 1940       | 6           |

| Full Name of Contributor JOYCE RAINES           |                       |              |                        | мо      | DAY                  | YEAR              |                   |  |  |
|---|-----------------------|--------------|------------------------|---------|----------------------|-------------------|-------------------|--|--|
| Mailing<br>Address PO BOX 333                   |                       |              |                        |         |                      |                   | \$ 500.00         |  |  |
| City FURLONG                                    | State                 | Ziį          | Code (Plus 4)          | 10      | 24                   | 2012              |                   |  |  |
|   | PA                    | PA 189250333 |                        |         |                      |                   |                   |  |  |
| Employer Name ICI                               | 0                     |              |                        |         | Occupation PRESIDENT |                   |                   |  |  |
| mployer Mailing Address/Principal Place of City |                       |              | State Zip Code (Plus 4 |         |                      | Zip Code (Plus 4) |                   |  |  |
| 100 INDUSTRIAL DR NEW BRITAIN                   |                       |              |                        | PA      |                      | 18901             |                   |  |  |
| Full Name of Contributor LUKE CUNNINGHAM        |                       |              |                        | МО      | DAY                  | YEAR              |                   |  |  |
| Mailing 1325 CLAY ST                            |                       |              |                        |         |                      |                   | \$ 500.00         |  |  |
| City BETHLEHEM                                  | State                 | Ziį          | Code (Plus 4)          | 10      | 24                   | 2012              |                   |  |  |
|   | PA                    | 18           | 0184804                |         |                      |                   |                   |  |  |
| Employer Name WEST SIDE HA                      | AMMER ELECTRIC        | <b>.</b>     |                        | Occupat | c <b>ion</b>         | CONTRA            | CTOR              |  |  |
| Employer Mailing Address/Princip<br>Business    | oal Place of          |              | City                   |         | State                |                   | Zip Code (Plus 4) |  |  |
| 1325 CLAY ST                                    |                       |              | BETHLEHEM              |         | PA                   |                   | 18018             |  |  |
| Enter Grand Total of Part C or                  | n Schedule I, Detaile | ed Sumn      | nary Page, Section     | on 3.   |                      |                   | PAGE TOTAL        |  |  |

**PAGE TOTAL**\$ 2,500.00

### 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 | Reporting Pe | eriod                        |            |
|---------------------------------------|--------------|------------------------------|------------|
| NEILSON FOR THE NORTHEAST             | From:        | <u>10/23/2012</u> <b>To:</b> | 11/26/2012 |

|                                 |                    |                                       | D  | ATE |      | AMOUNT |      |
|---------------------------------|--------------------|---------------------------------------|----|-----|------|--------|------|
| Full Name BENEFICIAL BANK       |                    |                                       | МО | DAY | YEAR |        |      |
| Mailing Address 3202 RED LION R | D                  |                                       | 10 | 2.1 | 2012 | \$     | 6.96 |
| <b>City</b> PHILADELPHIA        | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191141109 | 10 | 31  | 2012 |        |      |
| Receipt Description INTEREST    |                    |                                       |    |     |      |        |      |

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

**PAGE TOTAL \$**6.96

#### **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 Per | iod                          |            |  |  |  |  |  |
|--|---------------|------------------------------|------------|--|--|--|--|--|
| NEILSON FOR THE NORTHEAST  | From:         | <u>10/23/2012</u> <b>To:</b> | 11/26/2012 |  |  |  |  |  |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR  |               |                              |            |  |  |  |  |  |
| TOTAL for the Reporting Pe   | eriod (1)     | \$                           | 0.00       |  |  |  |  |  |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR   | T F)          |                              |            |  |  |  |  |  |
| TOTAL for the Reporting Pe   | eriod (2)     | \$                           | 0.00       |  |  |  |  |  |
| 3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)   |               |                              |            |  |  |  |  |  |
| TOTAL for the Reporting Pe   | eriod (3)     | \$                           | 351.50     |  |  |  |  |  |
| 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, | •             | \$                           | 351.50     |  |  |  |  |  |

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

| Name of Filing Committee or Candidate |                     |                       | Reporting Period |               |        |           |            |
|---------------------------------------|---------------------|-----------------------|------------------|---------------|--------|-----------|------------|
|                                       |                     |                       | From:            |               |        | To:       |            |
|                                       |                     |                       |                  | DATE          |        |           | AMOUNT     |
| Full Name of Contributor              |                     |                       | МО               | DAY           | YEAR   |           |            |
| Mailing Address                       |                     |                       |                  |               |        | <b>\$</b> | 0.00       |
| City                                  | State               | Zip Code (Plus 4)     |                  |               |        |           |            |
| Description of Contribution:          |                     |                       |                  |               |        |           |            |
| Enter Grand Total of Part F on S      | chedule II In-Kir   | nd Contributions Deta | iled Sum         | mary Pag      | ле Г   |           | PAGE TOTAL |
| Section 2.                            | incudic 11, 111 Kii | ia contributions beta | nea Sam          | illial y I as | ,<br>, |           | PAGE TOTAL |
|                                       |                     |                       |                  |               |        | \$        | 0.00       |

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

| Name of Filing Committee or Candidate | Reporting Period |                      |                     |  |  |
|---------------------------------------|------------------|----------------------|---------------------|--|--|
| NEILSON FOR THE NORTHEAST             | From:            | 10/23/2012 <b>To</b> | : <u>11/26/2012</u> |  |  |

|            |            |                    |                                 |   |             | DATE                        |                       | AMOUNT                       |            |
|------------|------------|--------------------|---------------------------------|---|-------------|-----------------------------|-----------------------|------------------------------|------------|
|            |            |                    |                                 | МО  |             | DAY                         | YEAR                  |                              |            |
| BLVD       |            |                    |                                 |   |             |                             |                       | \$                           | 351.50     |
| State      |            | Zip Code(Pl        | lus 4)                          |   | 10          | 24                          | 2012                  |                              |            |
| PA         |            | 19406274           | -6                              |   |             |                             |                       |                              |            |
|            |            |                    |                                 | Occ   | upat        | ion                         |                       |                              |            |
| e of       | City       |                    |                                 | Zip Code(Plus<br>4)                               |             | Description of Contribution |                       |                              |            |
|            |            |                    |                                 |   |             |                             | FUNDR                 | AISER                        | EXPENSES   |
| dule II I  | n-Kind     | Contributio        | ne Dot                          | ailed   |             |                             |                       |                              | PAGE TOTAL |
| auie II, I | ii-Kiilu   | Contributio        | nis Det                         | ancu  |             |                             |                       |                              | 351.50     |
|            | PA<br>e of | State PA e of City | State Zip Code(P<br>PA 19406274 | State Zip Code(Plus 4) 194062746  e of City State | BLVD  State | State                       | BLVD   10   24     PA | BLVD   10   24   2012     PA | State      |

### SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting Period |            |     |            |
|---------------------------------------|------------------|------------|-----|------------|
| NEILSON FOR THE NORTHEAST             | From             | 10/23/2012 | То: | 11/26/2012 |

|  |                    |                                       |                          | DATE                     |           | AMOUNT         |
|--|--------------------|---------------------------------------|--------------------------|--------------------------|-----------|----------------|
| <b>To Whom Paid</b><br>BROAD STREET MEDIA PA |                    |                                       | мо                       | DAY                      | YEAR      |                |
| Mailing Address 2512 METROPOL                | ITAN DR            |                                       | 10                       | 30                       | 2012      | \$<br>1,080.00 |
| City FEASTERVILLE TREVOSE                    | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190536738 | <b>Descrip</b><br>ADVER  | I<br>Ition of Exp        |           |                |
| <b>To Whom Paid</b><br>DORIS M. NEILSON      |                    |                                       | МО                       | DAY                      | YEAR      |                |
| Mailing Address 3812 CHALFONT DR             |                    |                                       |                          | 25                       | 2012      | \$<br>193.50   |
| City PHILADELPHIA                            | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191543442 |                          | otion of Exp<br>JRSMENT  | penditure |                |
| <b>To Whom Paid</b><br>BRIAN EDDIS           |                    |                                       | МО                       | DAY                      | YEAR      |                |
| Mailing Address 1259 STANWOOI                | D ST               |                                       | 10                       | 31                       | 2012      | \$<br>5,000.00 |
| City PHILADELPHIA                            | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 191111512    | 1                        | tion of Exp<br>LTING FEE |           |                |
| <b>To Whom Paid</b><br>MADISON FANNING       |                    |                                       | МО                       | DAY                      | YEAR      |                |
| Mailing Address 9816 LEGION ST               | -                  |                                       | 11                       | 8                        | 2012      | \$<br>45.00    |
| City PHILADELPHIA                            | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191141500 |                          | otion of Exp<br>EXPENSES |           |                |
| To Whom Paid<br>COMCAST CABLE                |                    |                                       | МО                       | DAY                      | YEAR      |                |
| Mailing Address PO BOX 3005                  |                    |                                       | 11                       | 11                       | 2012      | \$<br>222.68   |
| City SOUTHEASTERN                            | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>193983005 | <b>Descrip</b><br>SERVIC | otion of Exp<br>CE FEE   | penditure |                |
|  |                    |                                       |                          |                          |           |                |

| To Whom Paid SARAH O'NEILL   | МО                | DAY                                       | YEAR                |    |  |                    |
|--|-------------------|---|---------------------|----|--|--------------------|
| Mailing Address 12404 RAMBLER RD   | 11                | 1   | 2012                | \$ |  | 90.00              |
| City PHILADELPHIA State Zip Code (Plus 4) PA 191541312   | Descrip           | otion of Exp<br>EXPENSES                  | penditure           |    |  |                    |
| To Whom Paid MADISON FANNING   | МО                | DAY                                       | YEAR                |    |  |                    |
| Mailing Address 9816 LEGION ST   | 10                | 26  | 2012                | \$ |  | 185.00             |
| City PHILADELPHIA PA Zip Code (Plus 4) PA 191141500  | Descrip           | Description of Expenditure FIELS EXPENSES |                     |    |  |                    |
| To Whom Paid JENNIFER M. SLAVIC  | МО                | DAY                                       | YEAR                |    |  |                    |
| Mailing Address 152 MERCY ST   | 11                | 16  | 2012                | \$ |  | 1,800.00           |
| City PHILADELPHIA State Zip Code (Plus 4) PA 191482614   | Descrip           | otion of Exp                              |                     |    |  |                    |
| To Whom Paid OUR LADY OF CALVARY CHURCH  | МО                | DAY                                       | YEAR                |    |  |                    |
| Mailing Address 11024 KNIGHTS RD   | 11                | 4   | 2012                | \$ |  | 100.00             |
|  |                   |   |                     |    |  |                    |
| City PHILADELPHIA PA 2ip Code (Plus 4) PA 191544213  | Description DONAT | otion of Exp                              | enditure            |    |  |                    |
| PHILADELPHIA   | Descrip           |   | YEAR                |    |  |                    |
| To Whom Paid   | DONAT             | ION                                       |                     | \$ |  | 1,130.26           |
| To Whom Paid BRIAN EDDIS   | MO  11  Descrip   | DAY                                       | YEAR 2012 penditure | \$ |  | 1,130.26           |
| To Whom Paid BRIAN EDDIS  Mailing Address 1259 STANWOOD ST  City PHILADELPHIA State Zip Code (Plus 4)          | MO  11  Descrip   | DAY 8                                     | YEAR 2012 penditure | \$ |  | 1,130.26           |
| To Whom Paid BRIAN EDDIS  Mailing Address 1259 STANWOOD ST  City PHILADELPHIA State PA 191111512  To Whom Paid | MO  11  Descrip   | DAY  8  otion of Exp JRSEMENT             | YEAR 2012 penditure | \$ |  | 1,130.26<br>700.00 |

| мо   | DAY  | YEAR   |  |   |  |  |
|--|--|--|--|---|--|--|
| 10   | 26   | 2012   | \$   |   | 153.00   |  |
| 1  |  | enditure   |  |   |  |  |
| МО   | DAY  | YEAR   |  |   |  |  |
| 11   | 8  | 2012   | \$   |   | 318.43   |  |
| Description of Expenditure REIMBURSEMENT       |  |  |  |   |  |  |
| МО   | DAY  | YEAR   |  |   |  |  |
| 10   | 26   | 2012   | \$   |   | 300.00   |  |
|  |  | Description of Expenditure FIELD EXPENSES  |  |   |  |  |
| 1  |  | enditure   |  |   |  |  |
| 1  |  | year   |  |   |  |  |
| FIELD E  | EXPENSES   |  | \$   |   | 6,054.00   |  |
| MO 11 Descrip                                  | DAY  | YEAR 2012 penditure  | \$   |   | 6,054.00   |  |
| MO 11 Descrip                                  | DAY  26  | YEAR 2012 penditure  | \$   |   | 6,054.00   |  |
| MO  11  Descrip MISC C                         | DAY  26  Stion of Exp AMPAIGN                                | YEAR 2012 Denditure EXPENSE  | \$   |   | 6,054.00   |  |
| MO  11  Descrip MISC C  MO  11  Descrip        | DAY  26  Ition of Expanded AMPAIGN  DAY                      | YEAR  2012  Denditure  EXPENSE  YEAR  2012  Denditure                                      | <b>\$</b>  | ON FILE   |  |  |
| MO  11  Descrip MISC C  MO  11  Descrip        | DAY  26  Stion of Exp  AMPAIGN  DAY  6                       | YEAR  2012  Denditure  EXPENSE  YEAR  2012  Denditure                                      | <b>\$</b>  | ON FILE   |  |  |
| MO  11  Descrip MISC C  MO  11  Descrip GOTV E | DAY  26  Ition of Exp AMPAIGN  DAY  6  Ition of Exp EXPENSES | YEAR  2012  Denditure  EXPENSE  YEAR  2012  Denditure  - VOUCH                             | <b>\$</b>  | ON FILE   |  |  |
|  | Descrip FIELD E  MO  11  Descrip REIMBU                      | 10 26  Description of Express  MO DAY  11 8  Description of Express  REIMBURSEMENT  MO DAY | Description of Expenditure FIELD EXPENSES  MO DAY YEAR  11 8 2012  Description of Expenditure REIMBURSEMENT  MO DAY YEAR | Description of Expenditure FIELD EXPENSES  MO DAY YEAR  11 8 2012 \$  Description of Expenditure REIMBURSEMENT  MO DAY YEAR | 10 26 2012 \$  Description of Expenditure FIELD EXPENSES  MO DAY YEAR  11 8 2012 \$  Description of Expenditure REIMBURSEMENT  MO DAY YEAR |  |

| To Whom Paid MADISON FANNING  Mailing Address 9816 LEGION ST   | мо                             |   |                                       |                           |
|--|--------------------------------|---|---------------------------------------|---------------------------|
| Mailing Address 9816 LEGION ST   |                                | DAY                                     | YEAR                                  |                           |
|  | 11                             | 1                                       | 2012                                  | \$<br>225.00              |
| City PHILADELPHIA PA Zip Code (Plus 4) PA 191141500  | Descrip                        | ption of Exp<br>EXPENSES                |                                       |                           |
| To Whom Paid<br>SOCCER POST  | мо                             | DAY                                     | YEAR                                  |                           |
| Mailing Address 3354 GRANT AVE   | 10                             | 28                                      | 2012                                  | \$<br>24.57               |
| City PHILADELPHIA State Zip Code (Plus 4) PA 191142614   | <b>Descrip</b> UTILIT          | ption of Exp                            |                                       |                           |
| To Whom Paid PRINT AND SEW   | МО                             | DAY                                     | YEAR                                  |                           |
| Mailing Address 10960 DUTTON RD  | 11                             | 25                                      | 2012                                  | \$<br>200.00              |
| City PHILADELPHIA State Zip Code (Plus 4) PA 191543204   | Descrip                        | ption of Exp                            |                                       |                           |
| To Whom Paid PRINT AND SEW   | мо                             | DAY                                     | YEAR                                  |                           |
|  |                                |   |                                       |                           |
| Mailing Address 10960 DUTTON RD  | 11                             | 11                                      | 2012                                  | \$<br>240.00              |
| Mailing Address 10960 DUTTON RD  City PHILADELPHIA State PA 191543204  | Descrip                        | 11  ption of Exp                        | penditure                             | \$<br>240.00              |
| City PHILADELPHIA State Zip Code (Plus 4)  | Descrip                        | ption of Exp                            | penditure                             | \$<br>240.00              |
| City   | <b>Descrip</b><br>PRINTI       | ption of Exp                            | penditure<br>IALS                     | \$<br>240.00<br>11,168.06 |
| City PHILADELPHIA  State PA  191543204  To Whom Paid STRASSHEIM GRAPHIC DESIGN   | Descrip<br>PRINTI<br>MO        | DAY  26  ption of Exp                   | penditure<br>IALS<br>YEAR<br>2012     | 240.00<br>11,168.06       |
| City PHILADELPHIA  State PA  191543204  To Whom Paid STRASSHEIM GRAPHIC DESIGN  Mailing Address 333 N 15TH ST  City PHILADELPHIA  State Zip Code (Plus 4)  2ip Code (Plus 4)   | PRINTI  MO  11  Descrip        | DAY  26  ption of Exp                   | penditure<br>IALS<br>YEAR<br>2012     |                           |
| City PHILADELPHIA  To Whom Paid STRASSHEIM GRAPHIC DESIGN  Mailing Address 333 N 15TH ST  City PHILADELPHIA  To Whom Paid  To Whom Paid  State PA  2ip Code (Plus 4) 191543204 | PRINTI  MO  11  Descrip PRINTI | DAY  26  ption of Exp  27  Ption of Exp | penditure IALS  YEAR  2012  penditure |                           |

| <b>To Whom Paid</b><br>PA HDCC  |   |   | мо   | DAY   | YEAR  |    |  |                   |
|---|---|---|--|---|---|----|--|-------------------|
| Mailing Address 205 STATE   | ST                                      |   | 10   | 26  | 2012  | \$ |  | 5,800.00          |
| City HARRISBURG   | State                                   | Zip Code (Plus 4)                                   | Descrip  | tion of Exp   | enditure  |    |  |                   |
|   | PA                                      | 171011130   | DIRECT   |   |   |    |  |                   |
| To Whom Paid<br>VERIZON WIRELESS  |   |   | мо   | DAY   | YEAR  |    |  |                   |
| Mailing Address PO BOX 255  | ling Address PO BOX 25505               |   |  |   | 2012  | \$ |  | 178.17            |
| City LEHIGH VALLEY  | State                                   | Zip Code (Plus 4)                                   | Description of Expenditure                           |   |   |    |  |                   |
|   | PA                                      | 180025505   | SERVIC   |   |   |    |  |                   |
| To Whom Paid<br>SEAN GALLAGHER  |   |   | МО   | DAY   | YEAR  |    |  |                   |
| Mailing Address 1625 RHAW   | /N ST                                   |   | 11   | 1   | 2012  | \$ |  | 500.00            |
| City PHILADELPHIA   | State                                   | Zip Code (Plus 4)                                   | Descrip  | tion of Exp   | enditure  |    |  |                   |
|   | PA                                      | 191112951   | <b>Description of Expenditure</b> OFFICE WORK        |   |   |    |  |                   |
|   |   |   |  |   |   |    |  |                   |
| To Whom Paid<br>BENEFICIAL BANK   | <u> </u>                                |   | МО   | DAY   | YEAR  |    |  |                   |
|   | ION RD                                  |   | <b>MO</b>  | <b>DAY</b> 26   | <b>YEAR</b> 2012                                  | \$ |  | 30.00             |
| Mailing Address 3202 RED L  | ION RD                                  | Zip Code (Plus 4)                                   | 10   |   | 2012  | \$ |  | 30.00             |
| Mailing Address 3202 RED L  |   |   | 10   | 26  | 2012  | \$ |  | 30.00             |
| Mailing Address 3202 RED L  | State                                   | Zip Code (Plus 4)                                   | 10  Descrip  | 26  | 2012  | \$ |  | 30.00             |
| Mailing Address 3202 RED L  City PHILADELPHIA  To Whom Paid   | <b>State</b><br>PA                      | Zip Code (Plus 4)                                   | 10  Descrip SERVIC                                   | 26<br>Intion of Exp<br>SE FEE                               | 2012<br>penditure                                 | \$ |  | 30.00<br>1,575.00 |
| Mailing Address 3202 RED L  City PHILADELPHIA  To Whom Paid PRINT AND SEW  Mailing Address 10960 DUT  | <b>State</b><br>PA                      | Zip Code (Plus 4)                                   | Descrip<br>SERVIC                                    | 26 Etion of Exp EE FEE  DAY                                 | 2012 Denditure  YEAR  2012                        |    |  |                   |
| Mailing Address 3202 RED L  City PHILADELPHIA  To Whom Paid PRINT AND SEW  Mailing Address 10960 DUT  | State PA TON RD                         | Zip Code (Plus 4) 191141109                         | Descrip SERVIC                                       | 26  Ition of Exp EE FEE  DAY                                | 2012  penditure  YEAR  2012  penditure            |    |  |                   |
| Mailing Address 3202 RED L  City PHILADELPHIA  To Whom Paid PRINT AND SEW  Mailing Address 10960 DUT  | State PA  TON RD  State                 | Zip Code (Plus 4)<br>191141109<br>Zip Code (Plus 4) | Descrip SERVIC                                       | 26  Ition of Exp EE FEE  DAY  11                            | 2012  penditure  YEAR  2012  penditure            |    |  |                   |
| Mailing Address 3202 RED L  City PHILADELPHIA  To Whom Paid PRINT AND SEW  Mailing Address 10960 DUT  City PHILADELPHIA  To Whom Paid BROAD STREET MEDIA PA | State PA  TON RD  State                 | Zip Code (Plus 4)<br>191141109<br>Zip Code (Plus 4) | Descrip SERVIC                                       | 26  Ition of Exp EE FEE  DAY  11  Ition of Exp NG MATER     | 2012  Penditure  YEAR  2012  Penditure  IALS      |    |  |                   |
| Mailing Address 3202 RED L  City PHILADELPHIA  To Whom Paid PRINT AND SEW  Mailing Address 10960 DUT  City PHILADELPHIA  To Whom Paid BROAD STREET MEDIA PA | State PA  TON RD  State PA  OPOLITAN DR | Zip Code (Plus 4)<br>191141109<br>Zip Code (Plus 4) | 10  Descrip SERVICO  MO  11  Descrip PRINTII  MO  10 | 26  Ition of Exp E FEE  DAY  11  Ition of Exp NG MATER  DAY | 2012  Penditure  2012  Penditure IALS  YEAR  2012 | \$ |  | 1,575.00          |

| To Whom Paid JENNIFER M. SLAVIC  |                    |                                       | мо | DAY          | YEAR      |                 |
|----------------------------------|--------------------|---------------------------------------|----|--------------|-----------|-----------------|
| Mailing Address 152 MERCY S      | Г                  |                                       | 10 | 31           | 2012      | \$<br>1,800.00  |
| City PHILADELPHIA                | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 191482614    | 1  | otion of Exp |           |                 |
| To Whom Paid IBEW LOCAL 269      |                    |                                       | МО | DAY          | YEAR      |                 |
| Mailing Address 670 WHITEHE      | AD RD              |                                       | 11 | 8            | 2012      | \$<br>275.00    |
| City LAWRENCE TOWNSHIP           | <b>State</b><br>NJ | <b>Zip Code (Plus 4)</b> 086484440    |    | otion of Exp | penditure |                 |
| To Whom Paid KEEL COMMUNICATIONS |                    |                                       | МО | DAY          | YEAR      |                 |
| Mailing Address PO BOX 335       |                    |                                       | 11 | 12           | 2012      | \$<br>1,500.00  |
| City SPRING HOUSE                | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>194770335 | 1  | otion of Exp |           |                 |
| Enter Grand Total of Expendit    | ures on Page 1 R   | enort Cover Page Item D               |    |              |           | PAGE TOTAL      |
| Lines Grand Potal of Expendit    | uics on rage 1, K  | cport cover rage, Item D              |    |              |           | \$<br>48,807.67 |

### 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 Reporting |                    |                                  |          | ng Period                |          |      |    |                                |
|---|--------------------|----------------------------------|----------|--------------------------|----------|------|----|--------------------------------|
| NEILSON FOR THE NORTHEAST From:                 |                    |                                  |          | <u>10</u>                | /23/2012 | То:  | 1  | 1/26/2012                      |
|   |                    |                                  |          |                          | DATE     |      |    | Outstanding<br>Balance of Debt |
| Name of Creditor EDWARD J NEILSON               |                    |                                  |          |                          | DAY      | YEAR |    |                                |
| Mailing Address 3812 CHALFON                    | T DR               |                                  |          | 4                        | 11       | 2012 | \$ | 10,000.00                      |
| City PHILADELPHIA                               | <b>State</b><br>PA | <b>Zip Code (Pl</b><br>191543442 | _        | <b>Descrip</b><br>LOAN T |          |      |    |                                |
| Enter Grand Total of Unpaid D                   | ebts on Page       | 1, Report Cover Pa               | ge, Item | G.                       |          |      | \$ | PAGE TOTAL                     |
|   |                    |                                  |          |                          |          | L    | т  | 10,000.00                      |