

# Campaign Finance Report

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

Filer Identification Number :		20150203		Report Filed By :		CANDIDATE		COMMITTEE		✓		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: DISANTO FOR SENATE													
Street Address: PO BOX 6638													
City: HARRISBURG						State: PA			Zip Code: 17112				
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	✓			
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	✓			
	ANNUAL REPORT	7.	Year 2015	FILING METHOD ( ) CHECK ONE			PAPER	✓	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
						MO	DAY	YEAR	REP 22				
						11	3	2015	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY				
		5	27	2015		10	19	2015					
A. Amount Brought Forward From Last Report						\$ 0.00							
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 90,950.00							
C. Total Funds Available (Sum Of Lines A and B)						\$ 90,950.00							
D. Total Expenditures (From Schedule III)						\$ 4,913.81							
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 86,036.19							
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00							
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 50,000.00							

## 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>
DISANTO FOR SENATE	From: <u>5/27/2015</u> To: <u>10/19/2015</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>	\$ 450.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 450.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 40,500.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 40,500.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 50,000.00

<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>	\$ 90,950.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

<b>PAGE TOTAL</b>	
\$	0.00

**PART B**  
**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)**

<b>Name of Filing Committee or Candidate</b> DISANTO FOR SENATE	<b>Reporting Period</b> From: <u>5/27/2015</u> To: <u>10/19/2015</u>
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<b>DATE</b>	<b>AMOUNT</b>
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<b>Full Name of Contributor</b> Anthony S Cristillo			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 3940 Walnut Street			9	8	2015	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17109				

<b>Full Name of Contributor</b> William W. Murphy			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 1517 Woodcrest Circle			9	8	2015	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17112				

<b>Full Name of Contributor</b> Benjamin L. Heim				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 192 Blackberry Hill				10	15	2015	
<b>City</b> Port Matilda	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16870					

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

<b>PAGE TOTAL</b>
\$ 450.00

**PART C**  
**Contributions Received From Political Committees**  
**OVER \$250.00**

Use this Part to itemize only contributions received from Political committees  
with an aggregate value from Over \$250.00 in the reporting period.

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

			DATE			AMOUNT
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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

<b>PAGE TOTAL</b>
\$ 0.00

**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>  DISANTO FOR SENATE	<b>Reporting Period</b>  <b>From:</b> <u>5/27/2015</u> <b>To:</b> <u>10/19/2015</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Alex DiSanto				10	15	2015	\$ 20,000.00
<b>Mailing Address</b> 5901 St. Thomas Blvd							
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17112					
<b>Employer Name</b> n/a				<b>Occupation</b> Retired			
<b>Employer Mailing Address/Principal Place of Business</b> 5901 St. Thomas Blvd			<b>City</b> Harrisburg		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17112	
Michael Ben Glezer				10	2	2015	\$ 1,000.00
<b>Mailing Address</b> 2784 Farnham Lane							
<b>City</b> York	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17408					
<b>Employer Name</b> Wagman Companies				<b>Occupation</b> CEO			
<b>Employer Mailing Address/Principal Place of Business</b> 3290 North Susquehanna Trail			<b>City</b> York		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17406	
John M. Arnold				10	2	2015	\$ 5,000.00
<b>Mailing Address</b> 78 Emlyn Lane							
<b>City</b> Mechanicsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17055					
<b>Employer Name</b> John M, Arnold				<b>Occupation</b> Chairman			
<b>Employer Mailing Address/Principal Place of Business</b> 78 Emlyn Lane			<b>City</b> Mechanicsburg		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17055	

<b>Full Name of Contributor</b> Bruce K. Heim			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,500.00
<b>Mailing Address</b> 444 E. College Avenue			10	2	2015	
<b>City</b> State College	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16801				
<b>Employer Name</b> Keystone Real Estate Group			<b>Occupation</b> Chairman			
<b>Employer Mailing Address/Principal Place of Business</b> 444 E. College Avenue		<b>City</b> State College	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16801		

<b>Full Name of Contributor</b> Barry L. Schlouch			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 35 Timberline Drive			9	28	2015	
<b>City</b> Wyomissing	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19610				
<b>Employer Name</b> Schlouch Excavating			<b>Occupation</b> President			
<b>Employer Mailing Address/Principal Place of Business</b> 132 Excelsior Drive		<b>City</b> Blandon	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19510		

<b>Full Name of Contributor</b> Rex A. Herbert			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 4480 Olde Salem Road			9	28	2015	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17112				
<b>Employer Name</b> Lebanon VA Medical Center			<b>Occupation</b> Doctor			
<b>Employer Mailing Address/Principal Place of Business</b> 1700 S Lincoln Ave		<b>City</b> Lebanon	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17042		

<b>Full Name of Contributor</b> Ronald J. Drnevich			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 10,000.00
<b>Mailing Address</b> 989 N Fairville Avenue			9	17	2015	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17112				
<b>Employer Name</b>			<b>Occupation</b> Retired			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

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

**PAGE TOTAL**

\$ 40,500.00

## 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>  DISANTO FOR SENATE	<b>Reporting Period</b>  From: <u>5/27/2015</u> To: <u>10/19/2015</u>
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				DATE			AMOUNT
Full Name				MO	DAY	YEAR	
John M. DiSanto							
<b>Mailing Address</b> 6130 Minglewood Road				5	27	2015	\$ 50,000.00
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17112					
<b>Receipt Description</b> Loan							

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

<b>PAGE TOTAL</b>
\$ 50,000.00

## SCHEDULE II

**IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS  
DURING THE REPORTING PERIOD.**

**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
DISANTO FOR SENATE		From: <u>5/27/2015</u> To: <u>10/19/2015</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 RECIEVED - 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  From: <span style="float: right;">To:</span>
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			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>  \$ 0.00



# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
DISANTO FOR SENATE	From <u>5/27/2015</u> To: <u>10/19/2015</u>

DATE				AMOUNT		
To Whom Paid BMD Design LLC			MO	DAY	YEAR	\$ 84.06
Mailing Address 125 South Camp Street			9	5	2015	
City Windsor	State PA	Zip Code (Plus 4) 17366	Description of Expenditure Office expense			
To Whom Paid Friends Of Nick Chimienti			MO	DAY	YEAR	\$ 500.00
Mailing Address P.O. Box 11401			9	5	2015	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Contribution			
To Whom Paid GK Visual			MO	DAY	YEAR	\$ 211.79
Mailing Address 2941 North Front Street			9	5	2015	
City Harrisburg	State PA	Zip Code (Plus 4) 17110	Description of Expenditure Office expense			
To Whom Paid Safeguard Business Systems			MO	DAY	YEAR	\$ 100.64
Mailing Address P.O. Box 88043			9	9	2015	
City Chicago	State IL	Zip Code (Plus 4) 60680	Description of Expenditure Office expense			
To Whom Paid Ream Printing Company, Inc.			MO	DAY	YEAR	\$ 2,318.22
Mailing Address 515 Farmbrook Lane			9	16	2015	
City York	State PA	Zip Code (Plus 4) 17405	Description of Expenditure Office expense			

<b>To Whom Paid</b> Friends Of Haste & Pries			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 40.00
<b>Mailing Address</b> P.O. Box 7365			9	25	2015	
<b>City</b> Steelton	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17113	<b>Description of Expenditure</b> Contribution			

  

<b>To Whom Paid</b> Ream Printing Company, Inc.			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 779.10
<b>Mailing Address</b> 515 Farmbrook Lane			9	25	2015	
<b>City</b> York	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17405	<b>Description of Expenditure</b> Office expense			

  

<b>To Whom Paid</b> Perry County Republican Committee			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 150.00
<b>Mailing Address</b> PO Box 303			9	26	2015	
<b>City</b> New Bloomfield	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17068	<b>Description of Expenditure</b> Contribution			

  

<b>To Whom Paid</b> Dauphin County Republican Committee			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 730.00
<b>Mailing Address</b> 2255 Paxton Church Road			10	18	2015	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110	<b>Description of Expenditure</b> Contribution			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 4,913.81

**SCHEDULE IV**

**STATEMENT OF UNPAID DEBTS**

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

<b>Name of Filing Committee or Candidate</b>  DISANTO FOR SENATE				<b>Reporting Period</b>  From: <u>5/27/2015</u> To: <u>10/19/2015</u>			
							<b>Outstanding Balance of Debt</b>
							<b>DATE</b>
<b>Name of Creditor</b> John M. DiSanto				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 6130 Minglewood Road				5	27	2015	
							\$      50,000.00
<b>City</b> Harrisburg	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 17112		<b>Description of Debt</b> Loan to Committee		
<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>							<b>PAGE TOTAL</b>  \$      50,000.00