### **Campaign Finance Report**

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

Filer Identificati Number :	on 2012	0363			Repo Filed		CA	NDI	DATE		COM	AITTEE	<b>V</b>	LUB	51151	
Name of Filing C	Committee, Candid	ate or L	obbyist:	İ	FRIEN	DS OF	CRIS	DU:	SH							
Street Address:																
City:	SUMMERVILLE	Ē					State	e:	PA			Zip Co	de: 15	864		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. <b>X</b>	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA		F	POST-	3.		AMENDN REPORT		Yes	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		F	POST-	6.		TERMIN/ REPORT		Yes	No	<b>~</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2016				NG ME CHEC					PAPER		$\checkmark$	DISKE	TTE
Name of Office S	Sought by Candida	te:	-		-	-	DAT	ЕΟ	F ELE	CTIO	N	District Number	Office Code	Pai	ty Code	County Code
							МО		DAY	YE	AR		•	REF		
								11		8	2016		(SEE IN	STRUCTI	ONS FOR O	CODES)
	Receipts and	МО	DAY	YEAR			МО		DAY	YI	EAR	FC	OR OFFI	CE USE	ONLY	
Expenditures	from:		1 1	. 20	016	то		3		7	2016					
A. Amount Brought Forward From Last Report										5,4	152.17					
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sched	dule I)	\$	;				25.00					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$				5,4	177.17					
D. Total Expend	ditures (From Sch	edule II	I)			\$	1			1,4	75.05					
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$				4,0	02.12					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	e II)	\$					0.00					
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV	/)		\$	,				0.00					
						IT SE										
I swear (or affirm)	s a Committee report, incl		_								_		of my kno	wledge	and belie	ef , true
correct and comple	ete. scribed before me this	ì									·:	of Daves	n Submit	ina Da		
	day of					_				3	ngnature	or Perso	n Submit	ung Ke	ort	
	Signatu	re				_						Prin	ted Name	•		
My Commission Ex	cpires					_						Ema	il			
	МО	D	AY	YR					Are	a Coc	le	Daytin	ne Teleph	one Nu	mber	
	a report of a cand								_							
No 320) as amende		iy knowi	eage and bei	ier this	politica	ii comm	littee n	as n	ot viola	eu an	y provis	ions of th	e act or J	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this day of		20								S	ignature (	of Candid	ate		
						_						Printe	ed Name			
My Commission Exp	Signature pires					_						Ema	nil			
	МО	D	AY	YR		_			Area	Code		D	aytime T	elephor	ie Numb	 er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF CRIS DUSH	From:	1/1/201	<u>б</u> То:	<u>3/7/2016</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	25.00
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)			\$	0.00
TOTAL for the Reporting	y Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	y Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	25.00

#### **PART A**

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

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidat	e	'	Reporting	Period			
		'	From:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Committee			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

### ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee	e or Candidate		Rep	orting P	eriod				
From:					To	):			
					DATE			AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)	)						
				•	•	•		DACE TOT	

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

#### **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:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							<b>-</b>   \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	age, Sectio	n 3.			\$	(	0.00

### ALL OTHER CONTRIBUTIONS

**OVER \$250.00** 

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fron	n:		To	):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 0.00

## OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee	or Candidate		Report	ing Peri	od			
			From:			To:		
		•		E	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	us 4)					
Receipt Description	<u> </u>	<b>'</b>			•			
Futor Curred Total of Doub	F an Cabadula I Datailad	I Comment Page Co		4			ı	PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	Summary Page, So	ection	4.			\$	0.00

#### **SCHEDULE II**

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

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

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period	I						
FRIENDS OF CRIS DUSH	From:	<u>1/1/2016</u> <b>To:</b>	<u>3/7/2016</u>					
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 PART 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)	\$	0.00					
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00					

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

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

Name of Filing Committee or Cand	Il Name of Contributor  iiling Address  y State Zip Code (Plus 4)			Reporting Period					
			From:			To:			
				DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						<b>7</b> \$	0.00		
City	State	Zip Code (Plus 4)							
Description of Contribution:	•		•	•	•				
Enter Grand Total of Part F on	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL		
Section 2.						\$	0.00		

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	iod		
FRIENDS OF CRIS DUSH	From	1/1/2016	То:	<u>3/7/2016</u>

					DATE			AMOUNT		
To Wh	om Paid			МО	DAY	YEAR				
CRIS	DUSH			МО	DAT	ILAK				
Mailin	g Address			1	4	2016	\$	160.00		
City	BROOKVILLE	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	15825	TRANS	FER TO: CF	RIS DUSH	I CAMPAIG	N COMMITTEE		
To Wh	om Paid			МО	DAY	YEAR				
KEND	ALL'S KREATIONS			1-10	JA.	ILAK				
Mailin	g Address			1	11	2016	\$	159.00		
City	BIG RUN	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	15715	ADVER	TISING					
To Wh	om Paid			МО	DAY	YEAR				
HRCC				1-10		12/110				
Mailin	g Address		1	19	2016	\$	700.00			
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•			
		PA	17108	CAMPA	IGN SOFTV	VARE &ar	mp; VOTER	LIST		
To Wh	om Paid			МО	DAY	YEAR				
BROO	KVILLE MIRROR				J	1 = 1				
Mailin	g Address			1	21	2016	\$	25.00		
City	BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	15825	ADVER	TISING					
To Wh	om Paid			МО	DAY	YEAR				
PUNX:	SY SHOP 'N SAVE									
Mailin	g Address			1	22	2016	\$	83.16		
City	PUNXSUTAWNEY	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•			
		PA	15767	SOCIAL	EVENT: G	ROUNDH	OG COOKI	ES		
To Wh	om Paid			МО	DAY	YEAR				
POST	MASTER			1-10		12/110				
Mailin	g Address			1	25	2016	\$	7.89		
City BROOKVILLE State Zip Code (Plus 4)			) Description of Expenditure							
	PA 15767				POSTAGE - CERTIFIED R. RECEIPT REPORT					

To Whom Paid					DAY	YEAR			
HOMETOWN PUNXSUTAWNEY						ILAK			
Mailing Address					24	2016	\$	21	0.00
City	PUNXSUTAWNEY	State	Zip Code (Plus 4)	Description of Expenditure					
		PA	15767	ADVERTISING: GROUND HOG SOUVENIR					
To Whom Paid					DAY	YEAR			
HOMETOWN PUNXSUTAWNEY						ILAK			
Mailing Address							\$	8	0.00
City	PUNXSUTAWNEY	State	Zip Code (Plus 4)	Description of Expenditure					
	PA 15767 ADVERTISING: PRESIDE						'S TRIBU	JTE	
							PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							\$	1,425	5.05