#### **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 2013	0096			Rep File	oort		CAND	IDATI		СОМІ	MITTEE	<b>✓</b>	LOBI	BYIST	
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		ALL	IAN	CE FO	R A BET	TER F	PENN	SYLVANI	Α				
Street Address:	500 NORTH 1	2TH STI	REET													
City:	LEMOYNE							State:	PA			<b>Zip Code:</b> 17043				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	- 2	2. <b>X</b>	30 DA		POST-	3.		AMENDN REPORT		Yes	No	<b>~</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	≣- !	5.	30 DA		POST-	6.		TERMIN/ REPORT		Yes	No	<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2016					NG METH CHECK (				PAPER		<b>/</b>	DISKE	TTE
Name of Office S	- Sought by Candida	te:						DATE	OF EL	ECT	ION	District Number	Office Code	Par	ty Code	County Code
								МО	DAY	7	YEAR		10000			
								1	1	8	2016	<b> </b>	(SEE IN	NSTRUCTI	ONS FOR (	ODES)
	Receipts and	МО	DAY	YEAR	ł			мо	DAY	'	YEAR	FC	R OFFI	CE USE	ONLY	
Expenditures	from:		3 8	2	016	Т	0		4	11	2016					
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			11	3,461.88					
B. Total Monetary Contributions And Receipts (From Schedul							\$			10	5,545.23					
C. Total Funds Available (Sum Of Lines A and B)							\$			219	9,007.11					
D. Total Expenditures (From Schedule III)							\$			105	5,545.23					
E. Ending Cash	Balance (Subtract	t Line D	From Line (	C)			\$			113	3,461.88	]				
F. Value Of In-	Kind Contributions	Receiv	ed (From So	chedu	le II	)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	)			\$				0.00			1		
				AFF	IDA	١٧٧	T SE	CTION								
	s a Committee rep	•							-							
I swear (or affirm) correct and comple	) that this report, incl ete.	uding the	attached sch	nedule	s filed	d on	paper	or by elec	tronic	medi	ım, are to	the best o	f my kno	wledge	and belie	ef , true
Sworn to and subs	cribed before me this day of	i	20								Signature	e of Perso	n Submit	tting Rep	oort	
	Signatu	ro					- -					Prin	ted Nam	e		
My Commission Ex	•											Ema	il			
	мо	D	AY	YR						Area (	Code	Daytin	ne Telep	hone Nu	mber	
Part II- If this is	a report of a cand	didate's	authorized	Comn	nitte	e, C	andid	ate shal	l sign	here						
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	comm	ittee has	not vio	lated	any provis	ions of th	e act of J	June 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this										s	ignature (	of Candid	late		
	day of 						-					Printe	ed Name			
	Signature						-									
My Commission Exp	_											Ema	il			
	МО	D	AY	YR	1		•		Are	a Cod	le	D	aytime 1	Γelephor	ne Numb	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
ALLIANCE FOR A BETTER PENNSYLVANIA	From:	<u>3/8/201</u>	<u>6</u> To:	<u>4/11/2016</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	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)			\$	105,545.23
TOTAL for the Reporting	) Period	(3)	\$	105,545.23
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	j Period	(4)	\$	0.00
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			\$	105,545.23

#### **PART A**

### CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	is Part to itemize onl vith an aggregate valu							
Name of Filing Commit	tee or Candidate		Re	porting	Period			
			From: To:				):	
		<u> </u>			DATE			AMOUNT
Full Name of Contributing	g Committee			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.

**PAGE TOTAL**\$ 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	Candidate		Rep	oorting P	eriod			
			Fro	m:		To	<b>:</b>	
					DATE		A	MOUNT
Full Name of Contributor				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.

**PAGE TOTAL \$**0.00

#### **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:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary Pa	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				Repo	orting Pe	riod			
ALLIANCE FOR A BETTER PENNSYLVAN	IIA			Fron	n:	<u>3/8/2</u>	<u>016</u> To	9: <u>4/11/2016</u>	
					D/	ATE		AMOUNT	
Full Name of Contributor					мо	DAY	YEAR		
NATIONAL ASSOCIATION OF REALTORS	5				MO	DAI	ILAK		
Mailing 430 MICHIGAN AVENU Address	JE							\$ 20,495.23	
City CHICAGO	State	Zip	Code (Plus	4)	3	25	2016		
	IL	60	6114087						
Employer Name		ı			Occupation			1	
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Code (Plus 4)	
Business									
		I				1			
Full Name of Contributor	_				мо	DAY	YEAR		
NATIONAL ASSOCIATION OF REALTORS							Ц		
Mailing 430 MICHIGAN AVENU Address	JE							\$ 53,650.00	
City CHICAGO	State	Zip	Code (Plus	4)	4	8	2016		
	IL	60	6114087						
Employer Name					Occupat	tion		•	
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Code (Plus 4)	
Business									
Full Name of Contributor									
NATIONAL ASSOCIATION OF REALTORS	5				МО	DAY	YEAR		
Mailing 430 MICHIGAN AVENU	JE							\$ 31,400.00	
City CHICAGO	State	Zip	Code (Plus	4)	4	11	2016		
	IL	60	6114087						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Code (Plus 4)	

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

PAGE TOTAL

105,545.23

\$

## 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	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	-	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z</i> 50a. <b>y</b> 1 dgc,	Section				\$	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							
ALLIANCE FOR A BETTER PENNSYLVANIA	From:	3/8/2016 <b>To:</b>	<u>4/11/2016</u>					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	. 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)	\$	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, 1		\$	0.00					

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

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

Name of Filing Committee or Candidat	:e		Reporting	g Period			
			From:			То:	
				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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate					Reporting	Period			
					From:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus	4)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

## STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reporti	ng Period			
ALLIANCE FOR A BETTER PENN	ISYLVANIA		From	<u>3/8</u>	<u>3/2016</u>	То:	4/11/2016
				DATE			AMOUNT
To Whom Paid ACCESS, LLC			мо	DAY	YEAR		
Mailing Address 2711 CENTE	ERVILLE ROAD SUITE	120-7567	3	29	2016	\$	6,019.98
City WILMINGTON	State	Zip Code (Plus 4)	Description of Expenditure				
	DE	198081660	INDEPE	•	PENDITU		ONS HD 131-
To Whom Paid ACCESS, LLC			мо	DAY	YEAR		
Mailing Address 2711 CENTE	ERVILLE ROAD SUITE	120-7567	3	29	2016	\$	14,475.25
City WILMINGTON State Zip Code (Plus 4)				tion of Exp	enditure		
	DE	198081660	INDEPE	NDENT EX	JRE-HELM	HD 104-	
To Whom Paid KEYSTONE ANALYTICS			мо	DAY	YEAR		
Mailing Address 500 N 12TH						1	
500 N. 121F	STREET SUITE 100		4	6	2016	\$	2,800.00
- 300 N. 12111	State	Zip Code (Plus 4)		6 Otion of Exp			2,800.00
- 500 N. 1211	<u> </u>	<b>Zip Code (Plus 4)</b> 17043	Descrip	otion of Exp	enditure		2,800.00 L HD 111 -
- 300 N. 12111	State		<b>Descrip</b> INDEPE	otion of Exp	enditure		
City LEMOYNE  To Whom Paid  KEYSTONE ANALYTICS	State		Descrip INDEPE DIRECT	otion of Exp ENDENT EX MAIL	enditure PENDITU		
City LEMOYNE  To Whom Paid  KEYSTONE ANALYTICS	State PA		Descrip INDEPE DIRECT MO	ENDENT EXTENDENT	year 2016	JRE - HALI	L HD 111 -
City LEMOYNE  To Whom Paid KEYSTONE ANALYTICS  Mailing Address 500 N. 12TH	State PA  H STREET SUITE 100	17043	Descrip INDEPE DIRECT  MO  4  Descrip	DAY  CHION OF EXPENDENT EX	YEAR 2016	JRE - HALI	L HD 111 -
City LEMOYNE  To Whom Paid KEYSTONE ANALYTICS  Mailing Address 500 N. 12TH	State PA  H STREET SUITE 100  State	2ip Code (Plus 4)	Descrip INDEPE DIRECT  MO  4  Descrip INDEPE INDEPE	DAY  CHION OF EXPENDENT EX	YEAR 2016	JRE - HALI	L HD 111 - 2,800.00
City LEMOYNE  To Whom Paid KEYSTONE ANALYTICS  Mailing Address 500 N. 12TH  City LEMOYNE  To Whom Paid KEYSTONE ANALYTICS	State PA  H STREET SUITE 100  State	2ip Code (Plus 4)	Descrip INDEPE DIRECT MO  4  Descrip INDEPE DIRECT INDEPE DIRECT	DAY  CHOCK OF EXPENDENT EXTENDENT EXPENDENT EX	YEAR 2016 PENDITU	JRE - HALI	L HD 111 - 2,800.00

17043

PA

INDEPENDENT EXPENDITURE - HALL HD 111 -

DIRECT MAIL

							PAC	∍E 13
To Whom Paid KEYSTONE ANAL	YTICS			МО	DAY	YEAR		
Mailing Address	500 N. 12TH STREE	T SUITE 100		4	6	2016	\$	1,500.00
City LEMOYNE		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17043					HD 111 - LIVE
To Whom Paid KEYSTONE ANAL	YTICS			МО	DAY	YEAR		
Mailing Address	500 N. 12TH STREE	T SUITE 100		4	6	2016	\$	8,125.00
City LEMOYNE		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17043	1 -				IN SD 13 -
To Whom Paid KEYSTONE ANAL	YTICS			МО	DAY	YEAR		
Mailing Address	500 N. 12TH STREE	T SUITE 100		4 6 2016			\$	8,125.00
City LEMOYNE		State PA	<b>Zip Code (Plus 4)</b> 17043	Description of Expenditure  INDEPENDENT EXPENDITURE - MARTIN SD 13 DIRECT MAIL				
To Whom Paid KEYSTONE ANAL	YTICS			мо	DAY	YEAR		
Mailing Address	500 N. 12TH STREE	T SUITE 100		4	6	2016	\$	3,000.00
City LEMOYNE		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17043	1 .				IN SD 13 -
To Whom Paid KEYSTONE ANAL	YTICS			МО	DAY	YEAR		
Mailing Address	500 N. 12TH STREE	T SUITE 100		4	6	2016	\$	10,750.00
City LEMOYNE		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17043	1			JRE - REGA	N SD 31 -
To Whom Paid KEYSTONE ANAL	YTICS			МО	DAY	YEAR		
Mailing Address 500 N. 12TH STREET SUITE 100			4	6	2016	\$	10,750.00	
City LEMOYNE State Zip Code (Plus 4) PA 17043			Description of Expenditure  INDEPENDENT EXPENDITURE - REGAN SD 31 - DIRECT MAIL					

To Whom Paid KEYSTONE ANALYTICS			МО	DAY	YEAR		
Mailing Address 500 N. 12TH STREET SUITE 100			4	6	2016	\$	6,000.00
City LEMOYNE	State	Zip Code (Plus 4)	Description of Expenditure				
LENOTNE	PA	17043	INDEPENDENT EXPENDITURE - REGAN SD 31 - LIVE PHONES				
To Whom Paid KEYSTONE ANALYTICS			мо	DAY	YEAR		
Mailing Address 500 N. 12TH STREET SUITE 100			4	6	2016	\$	3,900.00
City LEMOYNE	State	Zip Code (Plus 4)	Descrip	tion of Exp	l enditure		
LENGTNE	PA	17043	INDEPE	INDEPENDENT EXPENDITURE - REGAN SD 31 - WEB ADS			
To Whom Paid OPF, INC.			мо	DAY	YEAR		
Mailing Address 6211 NW 132ND STREET			4	6	2016	\$	6,500.00
City GAINESVILLE	State	Zip Code (Plus 4)	Description of Expenditure				
	FL	32653	INDEPENDENT EXPENDITURE - KILLION SD 9 - DIRECT MAIL				
To Whom Paid OPF, INC.			мо	DAY	YEAR		
Mailing Address 6211 NW 132ND STREET			4	6	2016	\$	6,500.00
<b>City</b> GAINESVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	FL	32653	INDEPENDENT EXPENDITURE - KILLION SD 9 - DIRECT MAIL				
<b>To Whom Paid</b> OPF, INC.			МО	DAY	YEAR		
Mailing Address 6211 NW 132ND STREET			4	6	2016	\$	6,500.00
City GAINESVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
G, and G	FL	32653	Description of Expenditure  INDEPENDENT EXPENDITURE - KILLION SD 9 - DIRECT MAIL				
<b>To Whom Paid</b> OFP, INC.			мо	DAY	YEAR		
Mailing Address 6211 NW 132ND STREET			4	6	2016	\$	5,000.00
City GAINESVILLE	State	Zip Code (Plus 4)	Description of Expenditure				
	FL	32653	INDEPENDENT EXPENDITURE - KILLION SD 9 - WEB ADS				
							PAGE TOTAL
Enter Grand Total of Expendi	tures on Page 1, Re	port Cover Page, Item D	·-			\$	105,545.23