### **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 8100	)237			Rep File			CANDI	DATE		СОМ	1ITTEE	TTEE / LOBBYIST					
Name of Filing C	Committee, Candid	late or L	obbyist:	Ţ,	PENI	NSY	LVAN	IA APAR	TMENT	ASS	OCIATI	ON						
Street Address:	ONE BALA PL	AZA STI	515															
City:	BALA CYNWY	D						State:	PA			<b>Zip Code:</b> 19004-0000						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY F PRIMARY	PRE-	. 2	2.	30 DA PRIMA		POST-	3. <b>X</b>		AMENDM REPORT?		Yes	No	•		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	•		
report type)	ANNUAL REPORT	7.	<b>Year</b> 2016					IG METH				PAPER		<b>\</b>	DISKE	TTE		
Name of Office S	Sought by Candida	ite:	•		_			DATE C	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Count Code	y	
	,							МО	DAY	YE	AR	Itamber	code			Couc		
								11		8	2016	6 (SEE INSTRUCTIONS FO				ODES)		
,	Receipts and	МО	DAY YE	EAR				МО	DAY	YE	AR	FOR OFFICE USE ONLY						
Expenditures	s trom:		4 12	20	016	Т	0	5	:	16	2016							
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			161,2	33.59							
B. Total Moneta	ary Contributions	And Rec	eipts (From So	che	dule	I)	\$			2,0	17.00							
C. Total Funds Available (Sum Of Lines A and B) \$ 163,250.59																		
D. Total Expenditures (From Schedule III) \$ 6,228.00																		
E. Ending Cash Balance (Subtract Line D From Line C) \$						-	157,0	22.59										
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	edul	e II)	)	\$				0.00							
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			•				
			А	\FF	IDA	VI	T SE	CTION										
PART I - If this is	s a Committee rep	ort, trea	surer sign her	re. I	f thi	is is	a Can	ididate r	eport, c	andio	late sig	ın here.						
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	e attached sched	lules	filed	d on	paper (	or by elect	ronic m	edium,	, are to t	he best o	f my kno	wledge	and belie	ef , tru	e,	
Sworn to and subs	cribed before me thi day of	s	20							s	ignature	of Perso	n Submit	ting Rep	ort		-	
	Signatu	ıre					-					Prin	ted Name	e			-	
My Commission Ex	cpires						_					Ema	il				_	
	МО	D	AY	YR					Arc	ea Cod	e	Daytim	e Telepl	one Nu	mber			
Part II- If this is	a report of a can	didate's	authorized Co	mm	itte	e, C	andida	ate shall	sign he	ere.								
I swear (or affirm) No 320) as amende	that to the best of i	ny knowl	edge and belief	this	politi	ical	commi	ittee has r	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	1333	,	
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate			-	
-	day of						-					Printe	d Name				-	
	Signature						-										_	
My Commission Exp	pires											Ema	II					
	мо	D	AY	YR			•		Area	Code		Da	aytime T	elephon	e Numb	er		

## SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
PENNSYLVANIA APARTMENT ASSOCIATION	From:	4/12/201	<u>16</u> To:	<u>5/16/2016</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	145.50
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)			\$	1,871.50
TOTAL for the Reporting	Period	(3)	\$	1,871.50
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	) 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			\$	2,017.00

#### **PART A**

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

\$50.01 TO \$250.00

Name of Filing Committee or Candidate		Re	eporting	Period				
			From:			То	:	
					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.

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 Cand	idate		Rep	oorting P	eriod			
			From: To				<b>)</b> :	
					DATE		АМ	OUNT
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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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 Co	ommittee or Candidate				Rep	orting Pe	riod				
PENNSYLVANIA	APARTMENT ASSOCIA	TION			Fror	n:	4/12/2	016 To	<b>o</b> :	<u>5/16/2016</u>	
						DA	ATE		АМ	IOUNT	
Full Name of Con Berger Realty	ntributor					мо	DAY	YEAR			
Mailing Address	POB 609								\$	572.50	
City Southeas	stern	State	Zij	Code (Plus	4)	4	12	2016	·		
		PA	19	399							
Employer Name	Berger Realty					Occupat	t <b>ion</b> r	eal esta	ate manag	gement	
Employer Mailing Business	Address/Principal Plac	e of		City			State		Zip Code	e (Plus 4)	
POB 609				Southeas	tern		PA		19399		
Full Name of Con Solomon Manage						МО	DAY	YEAR			
Mailing 92 River Rd							\$	299.00			
City Summit		State	Zij	Code (Plus	4)	4	12	2016	5		
		NJ	07	'901							
Employer Name	Solomon Mtg					Occupat	t <b>ion</b>	eal esta	ate manag	gement	
Employer Mailing Business	Address/Principal Plac	e of		City		l	State		Zip Code	e (Plus 4)	
92 River Rd				Summit			NJ		07901		
Full Name of Con	ntributor										
Cutler and Cutle	r: Pine Manor Apts					МО	DAY	YEAR			
Mailing Address	POB 646								\$	1,000.00	
City Jenkinto	wn	State	Zij	Code (Plus	4)	4	12	2016	5		
		PA	19	046							
Employer Name	Cutler and Cutler DBA	A Pine Manor Apts				Occupation real estate management				gement	
Employer Mailing Business	Address/Principal Plac	e of		City		State			Zip Code (Plus 4)		
POB 646				Jenkintov	vn		PA		19046		

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

PAGE TOTAL

**\$** 1,871.50

# 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 Ca	ndidate		Repor	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 on	Schedule T Detailed	l Summary Page	Section	4			ı	PAGE TOTAL
zinci. Grana rotal or rait z on	ocilculate 1, Detailet	. Janimary rage,	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	d	
PENNSYLVANIA APARTMENT ASSOCIATION	From:	<u>4/12/2016</u> <b>To:</b>	<u>5/16/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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,		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

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

Name of Filing Committee or Candid	late		Reportin	g 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	Schedule II. In-Kir	nd Contributions Deta	iled Sum	mary Pag	ae. F		PAGE TOTAL
Section 2.				,;	,-,	\$	
1						Ψ	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	1				Re	porting l	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									- \$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Pe	eriod		
PENNSYLVANIA APARTMENT ASSOCIATION	From	<u>4/12/2016</u>	То:	<u>5/16/2016</u>

				DATE		AMOUNT
<b>To Whom Paid</b> Friends of Warren Kampf			МО	DAY	YEAR	
Mailing Address POB 1439			4	13	2016	\$ 500.00
City Paoli	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19301	<b>Descrip</b> contrib	otion of Exp ution	penditure	
<b>To Whom Paid</b> Reform PA PAC			МО	DAY	YEAR	
Mailing Address POB 412			4	13	2016	\$ 1,000.00
City Harrisburg State Zip Code (Plus 4) PA 17108				otion of Exp ution	penditure	
<b>To Whom Paid</b> Friends of Madeleine Dean			МО	DAY	YEAR	
Mailing Address POB 381			4	13	2016	\$ 500.00
<b>City</b> Glenside	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19038	<b>Descrip</b> contrib	otion of Exp ution	penditure	
<b>To Whom Paid</b> Friends of Scott Petri			МО	DAY	YEAR	
Mailing Address POB 161			5	5	2016	\$ 225.00
<b>City</b> Richboro	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18954	<b>Descrip</b> contrib	otion of Exp ution	penditure	
<b>To Whom Paid</b> Friends of Joe Scarnati			МО	DAY	YEAR	
Mailing Address POB 33			5	5	2016	\$ 2,000.00
City Youngsville State Zip Code (Plus 4) PA 16371			<b>Descrip</b> contrib	otion of Exp ution	penditure	
	T	T				

To Whom Paid Citizens for Pat Browne			мо	DAY	YEAR		
Mailing Address POB 90307			5	5	2016	\$	1,000.00
<b>City</b> Allentown	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	18109	contribution				
To Whom Paid Committee to Elect Wayne Fontana			мо	DAY	YEAR		
Mailing Address 1309 Creedmoor Ave			5	5	2016	\$	1,000.00
<b>City</b> Pittsburgh	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	15226	contribution				
To Whom Paid Citizens Bank			мо	DAY	YEAR		
Mailing Address POB 7000			4	29	2016	\$	3.00
City Providence	State	Zip Code (Plus 4)	Description of Expenditure checking account service charge				
	RI	02940					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
Enter Grand Lotal of Expenditure	s on Page 1, R	eport Cover Page, Item D.	•			\$	6,228.00