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 200	8210			Report Filed B		CANDI	DATE		СОМ	MITTEE	✓	LOBE	BYIST	
Name of Filing C	committee, Candi	date or L	obbyist:			-	TO RE EL	ECT FR	RANK	BURN	S				
Street Address:	1654 WILLIA	M PENN	AVE												
City:	JOHNSTOWN						State:	PA			Zip Co	de: 15	909		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA PRIM		POST-	3. X		AMENDMENT REPORT?		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		POST-	POST- 6.		TERMINATION REPORT?		Yes	No	\checkmark
report type)	ANNUAL REPORT	r 7.	Year 2016				NG METHO				PAPER		\checkmark	DISKE	TTE
Name of Office S	bought by Candida	ate:					DATE O	F ELEC	СТІО	N	District Number	Office Code	Par	ty Code	County Code
	VE IN THE GENE						мо	DAY	YE	AR	72	STH	DEN	1	11
REPRESENTATI	VE IN THE GENE	KAL ASS					11		8	2016]	(SEE INS	STRUCTIO	ONS FOR (CODES)
Summary of Receipts and MO DAY YEAR							мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	from:		4 12	20	016 T	0	5	1	16	2016					
A. Amount Bro	ught Forward Fro	m Last R	eport			\$			98,5	99.11					
B. Total Monetary Contributions And Receipts (From Schedule I						\$	\$ 1,004.40								
C. Total Funds Available (Sum Of Lines A and B)						\$			99,5	63.51					
D. Total Expenditures (From Schedule III)						\$			1,5	72.60					
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)		\$			97,9	90.91	-				
F. Value Of In-	Kind Contributior	s Receiv	ed (From S	chedul	le II)	\$				0.00	-				
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV	/)		\$			5	00.00		·			
				AFF	IDAVI	T SE	CTION								
PART I - If this is			-					• •		-					
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached sc	hedules	filed on	paper	or by elect	ronic me	edium,	are to t	the best o	of my knov	vledge	and beli	ef, true
Sworn to and subs	cribed before me th day of	is	20						Si	ignature	e of Perso	n Submitt	ing Rep	ort	
	Signat	ure				-					Prir	ited Name	1		
My Commission Ex	cpires					_					Ema	nil			
	мо	D/	AY	YR				Are	ea Cod	e	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a car	didate's	authorized	Comm	nittee, C	andid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and beli	ief this	political	comm	ittee has n	ot violat	ted any	y provis	ions of th	e act of Ju	ıne 3,19	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this day of	5	20							s	ignature	of Candida	ite		
						-					Printe	ed Name			
My Commission Exp	Signature					-					Ema	nil			
	мо	D	AY	YR		-		Area	Code		D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Page										
Name of Filing Committee or Candidate	Reporting	g Period								
COMMITTEE TO RE ELECT FRANK BURNS	From:	<u>4/12/201</u>	<u>6</u> To:	<u>5/16/2016</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)			\$	1,000.00						
All Other Contributions (Part D)			\$	0.00						
TOTAL for the Reporting	Period	(3)	\$	1,000.00						
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			•							
TOTAL for the Reporting	Period	(4)	\$	4.40						
]						
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			\$	1,004.40						

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		Re	porting	Period			
			Fro	From: To:			1	
				DATE AMOU				
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.					\$	0.00		

PAGE 3

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)									
Name of Filing Committee or Candidate Reporting Period									
				From: To):	
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City State Zip Code (Plus 4)									
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	0.00	

PAGE 5

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	J Period				
COMMITTEE TO RE ELECT FRANK BURNS	5		From:	<u>4/1</u>	2/2016	То:	<u>5/16/2016</u>	
				DA	TE		AMOUNT	
Full Name of Contributing Committee PA REALTORS PAC				мо	DAY	YEAR	\$	500.00
Mailing Address 500 N 12TH STREET	T SUITE 100			4	21	2016		
City LEMOYNE	State	Zip Code (Plus 4)				2010		
	РА	170431213						
Full Name of Contributing Committee PA AFL - CIO COPE				мо	DAY	YEAR	\$	500.00
Mailing Address 600 NORTH 2ND STR	EET			4	22	2016		500.00
City HARRISBURG	State	Zip Code	e (Plus 4)			2010		
	РА	17101						
		-						PAGE TOTAL
nter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.					\$	1,000.00		

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.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Froi	n:		Т	То:	
				D	ATE		АМ	IOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	ıs 4)					
Employer Name				Occupation				
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.					P#	AGE TOTAL 0.00		

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.

Name of Filing Committee or Can	didate		Report	ing Perio	d			
COMMITTEE TO RE ELECT FRAN	K BURNS		From:		<u>4/12/201</u>	<u>6</u> To:		<u>5/16/2016</u>
				D	ATE			AMOUNT
Full Name SLOVENIAN SAVINGS AND LOAN				мо	DAY	YEAR	\$	4.40
Mailing Address 357 FIRST STREET			4	17	2016	1		
City CONEMAUGH	State	Zip Code (Plus 4)	-	17	2010		
	PA	15909						
Receipt Description INTERES	T INCOME	•						
				-		Γ		PAGE TOTAL
Enter Grand Total of Part E on S	Schedule I, Detailed	I Summary Page,	Section	4.			\$	4.40

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								
COMMITTEE TO RE ELECT FRANK BURNS	From:	<u>4/12/2016</u> то:	<u>5/16/2016</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	riod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	[F)								
TOTAL for the Reporting Pe	riod (2)	\$	0.00						
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)									
TOTAL for the Reporting Pe	riod (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, I		\$	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:			То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				 \$	0.0)0
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	le,	F	AGE TOTAL	_
						\$	0.0	0

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

Name of Filing Committee or Candidate			Rep	porting F	Period		
			Fro	m:		То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor		•		Occupa	tion		•
Employer Mailing Address/Principal Plac	e of Business C	lity	State	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	Contributions D	etaile	d			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
COMMITTEE TO RE ELECT FRANK BURN	IS		From	<u>4/12</u>	<u>2/2016</u>	То:	<u>5/16/2016</u>
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
POSTMASTER							
Mailing Address FRANKLIN ST.			4	14	2016	\$	14.72
City JOHNSTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15901	POSTAG	GE - MAILII	NG REPO	RT FILING	
To Whom Paid			мо	DAY	YEAR		
THE TRIBUNE DEMOCRAT			4				1 000 00
Mailing Address 425 LOCUST ST P.O.				21	2016	\$	1,000.00
City JOHNSTOWN State Zip Code (Plus 4)			Descrip	tion of Exp	enditure		
	РА	159070340	AD / NE	WSPAPER			
To Whom Paid CONEMAUGH FIRE CO.			мо	DAY	YEAR		
Mailing Address 343 FIRST ST			4	22	2016	\$	30.00
City CONEMAUGH	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure		
	PA	15909	DONAT	ION			
To Whom Paid WAL - MART			мо	DAY	YEAR		
Mailing Address 300 WAL - MART DR			5	13	2016	\$	527.88
City EBENSBURG	State	Zip Code (Plus 4)	Descrip	l tion of Exp	l enditure		
PA				JNDRAISE		ES	
		-	-			Р	AGE TOTAL
Enter Grand Total of Expenditures o	n Page 1, Report C	over Page, Item D).			\$	1,572.60

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

Name of Filing Committee or Candidate			Reportin	ng Period				
COMMITTEE TO RE ELECT FRANK BURN	S		From:	<u>4/12/2016</u> To: <u>5/16/2016</u>				
					DATE			standing ance of Debt
Name of Creditor FRANK BURNS					DAY	YEAR		
Mailing Address 1654 WILLIAM PENN	I AVE			2	10	2015	\$	500.00
City JOHNSTOWN	State	Zip Code (P	Plus 4)	Descript	tion of Deb	t	•	
	PA	15909		LOAN TO	о сомміт	TEE		
								PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						\$	500.00	