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 201	60090			Repo Filed		:	CAND	CANDIDATE COMMITTEE V LOBBYIST					YIST		
Name of Filing C	Committee, Candi	date or L	obbyist:		DELO	RETO), T	ONY FR	IENDS	OF			•			
Street Address:	1438 PHILAI	DELPHIA	STREET													
City:	INDIANA							State:	PA			Zip Cod	de: 1	5701-04	400	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	2.		DA IMA		POST-	3.		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5.		DA ECT	Y ION	POST-	6.		TERMINATION Yes REPORT?			No	~
report type)	ANNUAL REPOR	7.	Year 2016			FILING METHOD () CHECK ONE						PAPER	PAPER DISKETTE			
Name of Office S	Sought by Candid	ate:	_					DATE (OF ELE	CTIC	N	District Number	Office Code	Part	y Code	County Code
								МО	DAY	YI	EAR	41	STS	DEM		32
SENATOR IN THE GENERAL ASSEMBLY 11 8								2016		(SEE IN	ISTRUCTIO	NS FOR C	ODES)			
	Receipts and	МО	DAY Y	'EAR				МО	DAY	ΥI	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures	s from:		9 20	20	016	то		10)	24	2016					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			5,2	258.68					
B. Total Moneta	ary Contributions	And Rec	eipts (From S	Sche	dule I)	\$			1,8	342.00					
C. Total Funds Available (Sum Of Lines A and B) \$ 7,100.68																
D. Total Expenditures (From Schedule III) \$ 2,860.00																
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)				\$			4,2	40.68					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edul	e II)		\$				0.00					
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)				\$				0.00			•		
			,	AFF:	IDA۱	IT S	SE	CTION								
PART I - If this is	s a Committee re	ort, trea	surer sign he	ere. I	f this	is a (Can	didate r	eport,	candi	date sig	jn here.				
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached sche	dules	filed o	n pap	er o	or by elec	tronic m	edium	, are to t	the best o	f my kno	wledge a	ınd belie	f , true
Sworn to and subs	cribed before me th	is	20							5	Signature	of Perso	n Submit	ting Rep	ort	
	- Signat					_						Prin	ted Nam	e		
My Commission Ex	Signat cpires	uie										Ema	il			
	мо	D	AY	YR					Ar	ea Cod	le	Daytim	e Telepi	none Nur	nber	
Part II- If this is	a report of a car	didate's	authorized Co	omm	ittee,	Cano	dida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	this	politic	al con	mmi	ittee has	not viola	ted an	y provis	ions of th	e act of J	une 3,19	37 (P.L.	1333,
Sworn to and subsc		.									s	ignature o	of Candid	ate		
	day of		_ 20			_						D	d Name			
	Signature					_						Printe	d Name			
My Commission Exp	_											Ema	il			
	МО	D	AY	YR		_			Area	Code		Da	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	J Period		
DELORETO, TONY FRIENDS OF	From:	9/20/201	<u>6</u> То:	<u>10/24/2016</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	92.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)	_		\$	200.00
All Other Contributions (Part B)			\$	750.00
TOTAL for the Reporting	Period	(2)	\$	950.00
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)			\$	800.00
TOTAL for the Reporting	Period	(3)	\$	800.00
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			\$	1,842.00

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 Candidate	Reporting	Period	
DELORETO, TONY FRIENDS OF	From:	9/20/2016	To: <u>10/24/2016</u>
		DATE	AMOUNT

Full Name of Contributing Committee Friends of Barbara Hafer			мо	DAY	YEAR	
Mailing Address 157 Greenview Dr						\$ 100.00
City Indiana	State PA	Zip Code (Plus 4) 15701	9	22	2016	
Full Name of Contributing Committee Armstrong County Democratic Committee				DAY	YEAR	
Mailing Address 307 N Pennslyv	ania Ave					\$ 100.00
City Apollo	State PA	Zip Code (Plus 4) 15613	10	17	2016	

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

PAGE TOTAL \$ 200.00

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 Candidat	Name of Filing Committee or Candidate			orting Po	eriod			
DELORETO, TONY FRIENDS OF			Froi	m:	9/20/2	2 <u>016</u> To):	10/24/2016
					DATE			AMOUNT
Full Name of Contributor Leslie McConnell				МО	DAY	YEAR		
Mailing Address 215 Wainwright Rd							\$	100.00
City Blairsville	State PA	Zip Code (Plus 4) 15717		9	22	2016		
Full Name of Contributor Bonnie Adair				МО	DAY	YEAR		
Mailing Address 668 Falling Run Roa	ad			0	27	2016	\$	50.00
City Blairsville	State PA	Zip Code (Plus 4) 15717		9	27	2016		
Full Name of Contributor Dolores Brzycki				МО	DAY	YEAR		
Mailing Address 426 Edgewood Dr							\$	100.00
City Indiana	State PA	Zip Code (Plus 4) 15701		9	23	2016		
Full Name of Contributor Dolores Brzycki				МО	DAY	YEAR		
Mailing Address 426 Edgewood Dr	I ou	Tio Code (Blood)		10	24	2016	\$	100.00
City Indiana	State PA	Zip Code (Plus 4) 15701						
Full Name of Contributor Lynne Alvine				МО	DAY	YEAR		
Mailing Address 175 Mill Run Rd							\$	50.00
City Indiana	State PA	Zip Code (Plus 4) 15701		10	19	2016		

							IOL J
Full Name of Contributor Dave Ferguson			МО	DAY	YEAR		
Mailing Address 225 S 6th	St					\$	50.00
City Indiana	State PA	Zip Code (Plus 4) 15701	10	20	2016		
Full Name of Contributor Kenneth Balitski			МО	DAY	YEAR		
Mailing Address 980 Count	ry Lane					\$	50.00
City Indiana	State PA	Zip Code (Plus 4) 15701			2016		
Full Name of Contributor Kathleen Werner Millward	МО	DAY	YEAR				
Mailing Address 505 Stable Road						\$	50.00
City Indiana	State PA	Zip Code (Plus 4) 15701	10	14	2016		
Full Name of Contributor Cliff Murdock			МО	DAY	YEAR		
Mailing Address 443 Dedick	∢ Rd					\$	100.00
City Saltsburg	State PA	Zip Code (Plus 4) 15681	10	22	2016		
Full Name of Contributor Katrina Kayden				DAY	YEAR		
Mailing Address 598 S 6th	St					\$	100.00
City Indiana	State PA	Zip Code (Plus 4) 15701	10	23	2016		
	·	•				P	AGE TOTAL

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

PAGE TOTAL \$ 750.00

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	me 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 Sche	dule 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 Co	ame of Filing Committee of Candidate				Reporting Period						
DELORETO, TOI	NY FRIENDS OF				Fron	1:	9/20/2	<u>016</u> To	: 1	10/24/2016	
				•		DA	ATE		АМО	DUNT	
Full Name of Con	ntributor					мо	DAY	YEAR			
Robert J Watta						МО	DAT	ILAR			
Mailing Address	50 College Lodge Rd								\$	300.00	
City Indiana		State	Zip Code	e (Plus 4)	10	17	2016			
		PA	15701								
Employer Name	- 19/A				Occupation Retired						
	Employer Mailing Address/Principal Place of Business City			State				Zip Code (Plus 4)			
N/A			N/A	Ą	PA				15701		
Full Name of Con Forrest Harris	ntributor					МО	DAY	YEAR			
Mailing Address	110 Cornell Ave								\$	500.00	
City Blairsville	e	State	Zip Code	e (Plus 4)	10	19	2016			
		PA	15717								
Employer Name	Sanso's Italian Deli	1				Occupat	tion F	Restaura	nt Owner		
Employer Mailing Business	Address/Principal Plac	ce of	City	У			State		Zip Code	(Plus 4)	
3113 Route 119	Hwy S		Hoi	mer City			PA		15748		
Enter Grand To	tal of Part C on Sche	dule I, Detailed S	ummary l	Page, S	ectio	on 3.			PA	GE TOTAL	
			-						\$	800.00	
										000.00	

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 Perio	od				
			From:			To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	1		
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description	·	·		•			•		
Enter Grand Total of Part E	on Schedule I. Detailer	l Summary Page.	Section	4.				PAGE TO	ΓAL
- Communication of the Ex	Januara 1/ Betained	. Jaai y 1 ago,	Dection	••			\$		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 Perio	d						
DELORETO, TONY FRIENDS OF	From:	<u>9/20/2016</u> To:	<u>10/24/2016</u>					
L. 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,		\$	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						\$	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 Candidat	ame of Filing Committee or Candidate			Reporting Period						
					Fro	om:		To:		
							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 Place of Business City State						Zip Code(Plus 4) Description of Co			of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.									PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
DELORETO, TONY FRIENDS OF	From	9/20/2016	То:	10/24/2016
	DATE			AMOUNT

				DATE			AMOUNT	
To Whom Paid Armstrong County Del	mocratic Committee	е		мо	DAY	YEAR		
Mailing Address 307 N Pennsylvania Ave			9	25	2016	\$	40.00	
City Apollo	s	State PA	Zip Code (Plus 4) 15613	Descrip Event 1	otion of Exp			
To Whom Paid Eric Barker				МО	DAY	YEAR		
Mailing Address 662 Chestnut St			9	20	2016	\$	700.00	
City Indiana	s	State PA	Zip Code (Plus 4) 15701	Description of Expenditure Social Media Advertising				
To Whom Paid Eric Barker				МО	DAY	YEAR		
Mailing Address 662 Chestnut St			10	22	2016	\$	300.00	
City Indiana	s	State PA	Zip Code (Plus 4) 15701	Description of Expenditure Social Media Advertising				
To Whom Paid Joseph M Diamond			МО	DAY	YEAR			
Mailing Address 105 Woods Lane			9	25	2016	\$	40.00	
City Altoona	s	State PA	Zip Code (Plus 4) 16601	1	otion of Exp ureau Eve			
To Whom Paid Eric Witmer			МО	DAY	YEAR			
Mailing Address 4591 Purchase Line Road			9	24	2016	\$	40.00	
City Marion Center	s	State PA	Zip Code (Plus 4) 15759		otion of Exp Ad Reimbu			

							PAGE 13
To Whom Paid Westmoreland Central Labor	мо	DAY	YEAR				
Mailing Address 170 Hollyplace				7	2016	\$	120.00
City Mt. Pleasant	State PA	Zip Code (Plus 4) 15666	Descrip Event 1	ntion of Exp			
To Whom Paid Family Life Media	·		МО	DAY	YEAR		
Mailing Address 114 South Jefferson St			10	4	2016	\$	100.00
City Kitanning	State PA	Zip Code (Plus 4) 16201	Description of Expenditure Radio Advertising				
To Whom Paid WTYM Radio			МО	DAY	YEAR		
Mailing Address 114 South Jefferson St			10	4	2016	\$	950.00
City Kitanning	State PA	Zip Code (Plus 4) 16201	Description of Expenditure Radio Advertising				
To Whom Paid Indiana County Democratic Committee			МО	DAY	YEAR		
Mailing Address P.O. Box	Address P.O. Box 315			11	2016	\$	490.00
City Indiana	State PA	Zip Code (Plus 4) 15701	Description of Expenditure Event Tickets and Program Ad				
To Whom Paid Eleanor Horvath				DAY	YEAR		
Mailing Address P.O. Box 2			10	21	2016	\$	80.00
City Tire Hill	State PA	Zip Code (Plus 4) 15959	Description of Expenditure Travel Expenses Reimbursement				
Enter Grand Total of Expe	enditures on Page 1 Pe	port Cover Page Item D	•				PAGE TOTAL
Lines Granu Total of Expe	muitures on Paye 1, Re	port cover Page, Item D	•			\$	2,860.00