

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		8100237		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> PENNSYLVANIA APARTMENT ASSOCIATION												
<b>Street Address:</b> ONE BALA PLAZA STE 515												
<b>City:</b> BALA CYNWYD						<b>State:</b> PA			<b>Zip Code:</b> 19004-0000			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2016		<b>FILING METHOD ( ) CHECK ONE</b>		<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>				
						11	8	2016				
									(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		9	20	2016		10	24	2016				
<b>A. Amount Brought Forward From Last Report</b>						\$ 141,553.59						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 0.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 141,553.59						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 15,603.00						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 125,950.59						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 0.00						

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
PENNSYLVANIA APARTMENT ASSOCIATION	From: <u>9/20/2016</u> To: <u>10/24/2016</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 0.00
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**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:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

<b>PAGE TOTAL</b>
\$ 0.00

**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	Reporting Period
	From: <span style="float: right;">To:</span>

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

<b>PAGE TOTAL</b>
\$ 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 Candidate	Reporting Period
	<div style="display: flex; justify-content: space-between;"> <span>From:</span> <span>To:</span> </div>

			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
PENNSYLVANIA APARTMENT ASSOCIATION		From: <u>9/20/2016</u> To: <u>10/24/2016</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 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: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
PENNSYLVANIA APARTMENT ASSOCIATION	From <u>9/20/2016</u> To: <u>10/24/2016</u>

DATE				AMOUNT		
To Whom Paid House Republican Campaign Committee			MO	DAY	YEAR	\$ 2,500.00
Mailing Address   POB 161			9	26	2016	
City   Richboro	State PA	Zip Code (Plus 4) 18954	Description of Expenditure contribution			
To Whom Paid Friends of Warren Kampf			MO	DAY	YEAR	\$ 250.00
Mailing Address   POB 1439			9	26	2016	
City   Paoli	State PA	Zip Code (Plus 4) 19301	Description of Expenditure fundraiser			
To Whom Paid DiSanto for Senate			MO	DAY	YEAR	\$ 500.00
Mailing Address   POB 126638			9	27	2016	
City   Harrisburg	State PA	Zip Code (Plus 4) 17112	Description of Expenditure fundraiser			
To Whom Paid Bobby 11			MO	DAY	YEAR	\$ 250.00
Mailing Address   POB 22602			10	6	2016	
City   Philadelphia	State PA	Zip Code (Plus 4) 19110	Description of Expenditure fundraiser			
To Whom Paid Citizens for Kenyatta Johnson			MO	DAY	YEAR	\$ 100.00
Mailing Address   pob 7466			10	6	2016	
City   Philadelphia	State PA	Zip Code (Plus 4) 19101	Description of Expenditure fundraiser			

To Whom Paid Friends of Thomas Caltagirone			MO	DAY	YEAR	\$ 500.00
Mailing Address   POB 391			10	6	2016	
City   Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure fundraiser			

To Whom Paid Committee to Elect John Sabatina, Jr			MO	DAY	YEAR	\$ 500.00
Mailing Address   7718 Castor Ave 2d Flr			10	6	2016	
City   Philadelphia	State PA	Zip Code (Plus 4) 19152	Description of Expenditure fundraiser			

To Whom Paid Alan Domb for City Council			MO	DAY	YEAR	\$ 1,000.00
Mailing Address   POB 58986			10	20	2016	
City   Philadelphia	State PA	Zip Code (Plus 4) 19110	Description of Expenditure fundraiser			

To Whom Paid Tom Wolf for Governor			MO	DAY	YEAR	\$ 1,000.00
Mailing Address   POB 615			10	6	2016	
City   Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure fundraiser			

To Whom Paid Friends of Madfeleine Dean			MO	DAY	YEAR	\$ 500.00
Mailing Address   POB 381			10	17	2016	
City   Glenside	State PA	Zip Code (Plus 4) 19038	Description of Expenditure fundraiser			

To Whom Paid Citizens for David Oh			MO	DAY	YEAR	\$ 250.00
Mailing Address   5813 Thomas Ave			10	6	2016	
City   Philadelphia	State PA	Zip Code (Plus 4) 19143	Description of Expenditure fundraiser			

To Whom Paid Friends of Frank Dermody			MO	DAY	YEAR	\$ 1,000.00
Mailing Address POB 274			10	6	2016	
City Tarentum	State PA	Zip Code (Plus 4) 15084	Description of Expenditure fundraiser			

To Whom Paid Senate Republican Campaign Committee			MO	DAY	YEAR	\$ 1,000.00
Mailing Address POB 792			10	23	2016	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure fundraiser			

To Whom Paid Friends of Frank Farry			MO	DAY	YEAR	\$ 250.00
Mailing Address POB 231			10	11	2016	
City Langhorne	State PA	Zip Code (Plus 4) 19047	Description of Expenditure fundraiser			

To Whom Paid Friends of Darrell L. Clarke			MO	DAY	YEAR	\$ 1,000.00
Mailing Address POB 60093			10	11	2016	
City Philadelphia	State PA	Zip Code (Plus 4) 19102	Description of Expenditure fundraiser			

To Whom Paid Friends of Maria			MO	DAY	YEAR	\$ 500.00
Mailing Address POB 60811			10	11	2016	
City Philadelphia	State PA	Zip Code (Plus 4) 19133	Description of Expenditure fundraiser			

To Whom Paid Citizens to Re-Elect John Taylor			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1600 Walnut St Suite 305			10	11	2016	
City Philadelphia	State PA	Zip Code (Plus 4) 19103	Description of Expenditure fundraiser			

<b>To Whom Paid</b> Citizens for Pat Browne			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> POB 90307			10	14	2016	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18109	<b>Description of Expenditure</b> fundraiser			

  

<b>To Whom Paid</b> Volunteers for Argall			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,500.00
<b>Mailing Address</b> POB 241			10	14	2016	
<b>City</b> Tamaqua	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18252	<b>Description of Expenditure</b> contribution			

  

<b>To Whom Paid</b> Citizens Bank			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 3.00
<b>Mailing Address</b> POB 7000			9	30	2016	
<b>City</b> Providence	<b>State</b> RI	<b>Zip Code (Plus 4)</b> 02940	<b>Description of Expenditure</b> checking account service charge			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 15,603.00

