

# 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>   |                          | 2006131   |                         | <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> FRIENDS OF DUANE MILNE |                          |           |                         |                          |                                    |                         |  |  |                              |                                     |                   |                    |
| <b>Street Address:</b> 43 STONEHENGE LANE                                      |                          |           |                         |                          |                                    |                         |  |  |                              |                                     |                   |                    |
| <b>City:</b> MALVERN   |                          |           |                         |                          |                                    | <b>State:</b> PA        |  |  | <b>Zip Code:</b> 19355       |                                     |                   |                    |
| <b>TYPE OF REPORT</b><br><br>(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> |
| REPRESENTATIVE IN THE GENERAL ASSEMBLY   |                          |           |                         |                          |                                    | <b>MO</b>               | <b>DAY</b>                                       | <b>YEAR</b>  | 167                          | STH                                 | REP               | 15                 |
|  |                          |           |                         |                          |                                    | 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>                              |                          |           |                         |                          |                                    | \$                      |  | 9,876.11   |                              |                                     |                   |                    |
| <b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>          |                          |           |                         |                          |                                    | \$                      |  | 64,720.00  |                              |                                     |                   |                    |
| <b>C. Total Funds Available (Sum Of Lines A and B)</b>                         |                          |           |                         |                          |                                    | \$                      |  | 74,596.11  |                              |                                     |                   |                    |
| <b>D. Total Expenditures (From Schedule III)</b>                               |                          |           |                         |                          |                                    | \$                      |  | 55,821.05  |                              |                                     |                   |                    |
| <b>E. Ending Cash Balance (Subtract Line D From Line C)</b>                    |                          |           |                         |                          |                                    | \$                      |  | 18,775.06  |                              |                                     |                   |                    |
| <b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>           |                          |           |                         |                          |                                    | \$                      |  | 0.00   |                              |                                     |                   |                    |
| <b>G. Unpaid Debts And Obligations (From Schedule IV)</b>                      |                          |           |                         |                          |                                    | \$                      |  | 20,000.00  |                              |                                     |                   |                    |

## 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>                      |
| FRIENDS OF DUANE MILNE                       | 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>                                      | \$ 520.00 |

|  |             |
|--|-------------|
| <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>                 | \$ 500.00   |
| <b>All Other Contributions (Part B)</b>  | \$ 1,200.00 |
| <b>TOTAL for the Reporting Period (2)</b>  | \$ 1,700.00 |

|   |              |
|---|--------------|
| <b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b> |              |
| <b>Contributions Received From Political Committees (Part C)</b>        | \$ 33,350.00 |
| <b>All Other Contributions (Part D)</b>                                 | \$ 29,150.00 |
| <b>TOTAL for the Reporting Period (3)</b>                               | \$ 62,500.00 |

|  |         |
|--|---------|
| <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> | \$ 64,720.00 |
|---|--------------|

**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.**

|  |   |             |               |
|--|---|-------------|---------------|
| <b>Name of Filing Committee or Candidate</b><br><br>FRIENDS OF DUANE MILNE   | <b>Reporting Period</b><br><br>From: <u>9/20/2016</u> To: <u>10/24/2016</u> |             |               |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"><b>DATE</b></td> <td style="width: 40%; border: none;"><b>AMOUNT</b></td> </tr> </table> |   | <b>DATE</b> | <b>AMOUNT</b> |
| <b>DATE</b>  | <b>AMOUNT</b>   |             |               |

|   |                    |                                   |           |            |             |           |
|---|--------------------|-----------------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributing Committee</b><br>GENESIS HEALTHCARE CORP PAC |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 250.00 |
| <b>Mailing Address</b> 101 E. STATE STREET                                |                    |                                   | 10        | 11         | 2016        |           |
| <b>City</b> KENNETT SQUARE  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19348 |           |            |             |           |

|  |                    |                                   |           |            |             |           |
|--|--------------------|-----------------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributing Committee</b><br>NFIB PAC |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 250.00 |
| <b>Mailing Address</b> 1201 F STREET NW SUITE 200      |                    |                                   | 10        | 7          | 2016        |           |
| <b>City</b> WASHINGTON                                 | <b>State</b><br>DC | <b>Zip Code (Plus 4)</b><br>20004 |           |            |             |           |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 500.00         |

**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)**

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                                    |
| FRIENDS OF DUANE MILNE                       | <b>From:</b> <u>9/20/2016</u> <b>To:</b> <u>10/24/2016</u> |

|  |          |                         |  | DATE |     | AMOUNT |           |
|--|----------|-------------------------|--|------|-----|--------|-----------|
| Full Name of Contributor<br>LYDIA BARTHOLOMEW  |          |                         |  | MO   | DAY | YEAR   | \$ 100.00 |
| Mailing Address 145 LUCKY HILL ROAD            |          |                         |  | 6    | 22  | 2016   |           |
| City WEST CHESTER                              | State PA | Zip Code (Plus 4) 19382 |  |      |     |        |           |
| Full Name of Contributor<br>JOHN B. STETSON IV |          |                         |  | MO   | DAY | YEAR   | \$ 100.00 |
| Mailing Address 7 DRUID LN                     |          |                         |  | 8    | 11  | 2016   |           |
| City MALVERN                                   | State PA | Zip Code (Plus 4) 19355 |  |      |     |        |           |
| Full Name of Contributor<br>JOSEPH F. LOUGHRAN |          |                         |  | MO   | DAY | YEAR   | \$ 100.00 |
| Mailing Address 1097 YELLOW SPRINGS RD         |          |                         |  | 8    | 9   | 2016   |           |
| City CHESTER SPRINGS                           | State PA | Zip Code (Plus 4) 19425 |  |      |     |        |           |
| Full Name of Contributor<br>JOHN MCGOWAN       |          |                         |  | MO   | DAY | YEAR   | \$ 250.00 |
| Mailing Address 149 GRUBB ROAD                 |          |                         |  | 9    | 27  | 2016   |           |
| City MALVERN                                   | State PA | Zip Code (Plus 4) 19355 |  |      |     |        |           |
| Full Name of Contributor<br>A. JOSEPH RUBINO   |          |                         |  | MO   | DAY | YEAR   | \$ 200.00 |
| Mailing Address 1 RAFFAELA DRIVE               |          |                         |  | 9    | 22  | 2016   |           |
| City MALVERN                                   | State PA | Zip Code (Plus 4) 19355 |  |      |     |        |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>FRANCIS GOLEN |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 16 ROGERS WAY             |          |                         | 10 | 4   | 2016 |           |
| City MALVERN                              | State PA | Zip Code (Plus 4) 19355 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>GERALD SWDYER |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 735 MONUMENT RD           |          |                         | 10 | 20  | 2016 |           |
| City MALVERN                              | State PA | Zip Code (Plus 4) 19355 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>EVAN J. KELLY |          |                         | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 1312 PENNS FORD DR        |          |                         | 10 | 17  | 2016 |           |
| City DOWNINGTOWN                          | State PA | Zip Code (Plus 4) 19335 |    |     |      |           |

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

**PAGE TOTAL**

\$ 1,200.00

# 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.**

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                                    |
| FRIENDS OF DUANE MILNE                       | <b>From:</b> <u>9/20/2016</u> <b>To:</b> <u>10/24/2016</u> |

|   |          |                         |  | DATE |     | AMOUNT |             |
|---|----------|-------------------------|--|------|-----|--------|-------------|
| Full Name of Contributing Committee<br>PA OPHTHALMOLOGY PAC             |          |                         |  | MO   | DAY | YEAR   | \$ 300.00   |
| Mailing Address 200 N. THIRD STREET SUITE 1500                          |          |                         |  | 7    | 8   | 2016   |             |
| City HARRISBURG   | State PA | Zip Code (Plus 4) 17101 |  |      |     |        |             |
| Full Name of Contributing Committee<br>PA MANUFACTURED HOUSING PAC      |          |                         |  | MO   | DAY | YEAR   | \$ 300.00   |
| Mailing Address 315 LIMEKILN ROAD                                       |          |                         |  | 7    | 6   | 2016   |             |
| City NEW CUMBERLAND   | State PA | Zip Code (Plus 4) 17070 |  |      |     |        |             |
| Full Name of Contributing Committee<br>PILOTS ASSN. FOR BAY & RIVER PAC |          |                         |  | MO   | DAY | YEAR   | \$ 500.00   |
| Mailing Address 800 S. COLUMBUS BLVD                                    |          |                         |  | 8    | 17  | 2016   |             |
| City PHILADELPHIA   | State PA | Zip Code (Plus 4) 19141 |  |      |     |        |             |
| Full Name of Contributing Committee<br>PA REALTORS PAC                  |          |                         |  | MO   | DAY | YEAR   | \$ 1,000.00 |
| Mailing Address 500 N. 12TH STREET                                      |          |                         |  | 8    | 24  | 2016   |             |
| City LEMOYNE  | State PA | Zip Code (Plus 4) 17043 |  |      |     |        |             |
| Full Name of Contributing Committee<br>CHESTER COUNTY CHAMBER PAC       |          |                         |  | MO   | DAY | YEAR   | \$ 500.00   |
| Mailing Address 1600 PAOLI PIKE   |          |                         |  | 10   | 3   | 2016   |             |
| City MALVERN  | State PA | Zip Code (Plus 4) 19355 |  |      |     |        |             |

|  |          |                             |    |     |      |              |
|--|----------|-----------------------------|----|-----|------|--------------|
| Full Name of Contributing Committee<br>SAUL EWING PAC                      |          |                             | MO | DAY | YEAR | \$ 500.00    |
| Mailing Address 1500 MARKET ST. 38TH FLOOR                                 |          |                             | 9  | 29  | 2016 |              |
| City PHILADELPHIA  | State PA | Zip Code (Plus 4) 19102     |    |     |      |              |
| Full Name of Contributing Committee<br>REPUBLICAN COMMITTEE CHESTER COUNTY |          |                             | MO | DAY | YEAR | \$ 10,000.00 |
| Mailing Address 15 SOUTH CHURCH ST.  |          |                             | 10 | 6   | 2016 |              |
| City WEST CHESTER  | State PA | Zip Code (Plus 4) 19382     |    |     |      |              |
| Full Name of Contributing Committee<br>REPUBLICAN COMMITTEE WEST WHITELAND |          |                             | MO | DAY | YEAR | \$ 1,000.00  |
| Mailing Address 100 TWIN OAKS LN   |          |                             | 10 | 14  | 2016 |              |
| City WEST CHESTER  | State PA | Zip Code (Plus 4) 19380     |    |     |      |              |
| Full Name of Contributing Committee<br>PSEA PACE                           |          |                             | MO | DAY | YEAR | \$ 15,000.00 |
| Mailing Address 400 N. THIRD ST PO BOX 1724                                |          |                             | 10 | 18  | 2016 |              |
| City HARRISBURG  | State PA | Zip Code (Plus 4) 171051724 |    |     |      |              |
| Full Name of Contributing Committee<br>EXELON PAC                          |          |                             | MO | DAY | YEAR | \$ 500.00    |
| Mailing Address 101 CONSTITUTION AVE NW                                    |          |                             | 10 | 13  | 2016 |              |
| City WASHINGTON  | State DC | Zip Code (Plus 4) 20001     |    |     |      |              |
| Full Name of Contributing Committee<br>EXELON PAC                          |          |                             | MO | DAY | YEAR | \$ 500.00    |
| Mailing Address 101 CONSTITUTION AVE NW                                    |          |                             | 8  | 12  | 2016 |              |
| City WASHINGTON  | State DC | Zip Code (Plus 4) 20001     |    |     |      |              |

|   |                    |                                   |           |            |             |                                   |
|---|--------------------|-----------------------------------|-----------|------------|-------------|-----------------------------------|
| <b>Full Name of Contributing Committee</b><br>FRIENDS OF WARREN KAMPF               |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 2,500.00                       |
| <b>Mailing Address</b> 216 MORGAN ST  |                    |                                   | 10        | 17         | 2016        |                                   |
| <b>City</b> PHOENIXVILLE  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19460 |           |            |             |                                   |
| <b>Full Name of Contributing Committee</b><br>AREA 9 REPUBLICAN COM.                |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 500.00                         |
| <b>Mailing Address</b>  |                    |                                   | 10        | 21         | 2016        |                                   |
| <b>City</b>   | <b>State</b>       | <b>Zip Code (Plus 4)</b>          |           |            |             |                                   |
| <b>Full Name of Contributing Committee</b><br>JOHNSON & JOHNSON PAC                 |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 250.00                         |
| <b>Mailing Address</b> 1350 "I" STREET SUITE 1210                                   |                    |                                   | 10        | 17         | 2016        |                                   |
| <b>City</b> WASHINGTON  | <b>State</b><br>DC | <b>Zip Code (Plus 4)</b><br>20005 |           |            |             |                                   |
| <b>Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.</b> |                    |                                   |           |            |             | <b>PAGE TOTAL</b><br>\$ 33,350.00 |



**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.)**

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b><br><br>FRIENDS OF DUANE MILNE | <b>Reporting Period</b><br><br><b>From:</b> <u>9/20/2016</u> <b>To:</b> <u>10/24/2016</u> |
|--|---|

|  |          |                         |      | DATE               |       |                   | AMOUNT      |
|--|----------|-------------------------|------|--------------------|-------|-------------------|-------------|
| Full Name of Contributor                             |          |                         |      | MO                 | DAY   | YEAR              |             |
| VIVIAN W. PLASECKI                                   |          |                         |      |                    |       |                   |             |
| Mailing Address 26 TUNBRIDGE RD                      |          |                         |      | 6                  | 29    | 2016              | \$ 1,000.00 |
| City HAVERFORD                                       | State PA | Zip Code (Plus 4) 19041 |      |                    |       |                   |             |
| Employer Name RETIRED                                |          |                         |      | Occupation RETIRED |       |                   |             |
| Employer Mailing Address/Principal Place of Business |          |                         | City |                    | State | Zip Code (Plus 4) |             |

|  |          |                         |      |                    |       |                   |             |
|--|----------|-------------------------|------|--------------------|-------|-------------------|-------------|
| Full Name of Contributor                             |          |                         |      | MO                 | DAY   | YEAR              |             |
| VIVIAN W. PLASECKI                                   |          |                         |      |                    |       |                   |             |
| Mailing Address 26 TUNBRIDGE RD                      |          |                         |      | 10                 | 11    | 2016              | \$ 1,000.00 |
| City HAVERFORD                                       | State PA | Zip Code (Plus 4) 19041 |      |                    |       |                   |             |
| Employer Name RETIRED                                |          |                         |      | Occupation RETIRED |       |                   |             |
| Employer Mailing Address/Principal Place of Business |          |                         | City |                    | State | Zip Code (Plus 4) |             |

|  |          |                         |              |                          |       |                   |             |
|--|----------|-------------------------|--------------|--------------------------|-------|-------------------|-------------|
| Full Name of Contributor                             |          |                         |              | MO                       | DAY   | YEAR              |             |
| PETER J MOTEL  |          |                         |              |                          |       |                   |             |
| Mailing Address 1191 PEBBLE SPRING DR                |          |                         |              | 8                        | 12    | 2016              | \$ 1,000.00 |
| City BERWYN  | State PA | Zip Code (Plus 4) 19312 |              |                          |       |                   |             |
| Employer Name DERMATOLOGY ASSOCIATES                 |          |                         |              | Occupation DERMATOLOGIST |       |                   |             |
| Employer Mailing Address/Principal Place of Business |          |                         | City         |                          | State | Zip Code (Plus 4) |             |
| 1260 VALLEY FORGE RD                                 |          |                         | PHOENIXVILLE |                          | PA    | 19460             |             |

|  |                    |                                   |                              |                                   |             |           |
|--|--------------------|-----------------------------------|------------------------------|-----------------------------------|-------------|-----------|
| <b>Full Name of Contributor</b><br>GERALD PARSONS                                    |                    |                                   | <b>MO</b>                    | <b>DAY</b>                        | <b>YEAR</b> | \$ 500.00 |
| <b>Mailing Address</b> 47 COLLINS MILL RD  |                    |                                   | 9                            | 16                                | 2016        |           |
| <b>City</b> CHESTER SPRINGS  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19425 |                              |                                   |             |           |
| <b>Employer Name</b> C T D I GLOBAL  |                    |                                   | <b>Occupation</b> OWNER - CO |                                   |             |           |
| <b>Employer Mailing Address/Principal Place of Business</b><br>1373 ENTERPRISE DRIVE |                    | <b>City</b><br>WEST CHESTER       | <b>State</b><br>PA           | <b>Zip Code (Plus 4)</b><br>19380 |             |           |

|   |                    |                                   |                             |                                   |             |           |
|---|--------------------|-----------------------------------|-----------------------------|-----------------------------------|-------------|-----------|
| <b>Full Name of Contributor</b><br>KEVIN C. QUINN                               |                    |                                   | <b>MO</b>                   | <b>DAY</b>                        | <b>YEAR</b> | \$ 300.00 |
| <b>Mailing Address</b> 1330 CHISWICK DR   |                    |                                   | 9                           | 14                                | 2016        |           |
| <b>City</b> WEST CHESTER  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19380 |                             |                                   |             |           |
| <b>Employer Name</b> QUINN WEALTH ADVISORS LLC                                  |                    |                                   | <b>Occupation</b> PRESIDENT |                                   |             |           |
| <b>Employer Mailing Address/Principal Place of Business</b><br>1330 CHISWICK DR |                    | <b>City</b><br>WEST CHESTER       | <b>State</b><br>PA          | <b>Zip Code (Plus 4)</b><br>19380 |             |           |

|   |                    |                                   |                                       |                                   |             |             |
|---|--------------------|-----------------------------------|---------------------------------------|-----------------------------------|-------------|-------------|
| <b>Full Name of Contributor</b><br>EDWARD J. BREINER        |                    |                                   | <b>MO</b>                             | <b>DAY</b>                        | <b>YEAR</b> | \$ 1,000.00 |
| <b>Mailing Address</b> 223 SAGE HILL LANE                   |                    |                                   | 9                                     | 7                                 | 2016        |             |
| <b>City</b> WEST CHESTER                                    | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19382 |                                       |                                   |             |             |
| <b>Employer Name</b> CHESTER COUNTY ECONOMIC COUNCIL        |                    |                                   | <b>Occupation</b> RETIRED - VOLUNTEER |                                   |             |             |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    | <b>City</b><br>WEST CHESTER       | <b>State</b><br>PA                    | <b>Zip Code (Plus 4)</b><br>19380 |             |             |

|  |                    |                                   |                             |                                   |             |           |
|--|--------------------|-----------------------------------|-----------------------------|-----------------------------------|-------------|-----------|
| <b>Full Name of Contributor</b><br>VINCENT J. MILANO                               |                    |                                   | <b>MO</b>                   | <b>DAY</b>                        | <b>YEAR</b> | \$ 500.00 |
| <b>Mailing Address</b> 301 WOODMERE WAY  |                    |                                   | 9                           | 19                                | 2016        |           |
| <b>City</b> PHOENIXVILLE   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19460 |                             |                                   |             |           |
| <b>Employer Name</b> IDERA PHARMACEUTICALS   |                    |                                   | <b>Occupation</b> PRESIDENT |                                   |             |           |
| <b>Employer Mailing Address/Principal Place of Business</b><br>505 EAGLE VIEW BLVD |                    | <b>City</b><br>EXTON              | <b>State</b><br>PA          | <b>Zip Code (Plus 4)</b><br>19341 |             |           |

|  |                    |                                   |                             |                                       |                    |                                   |             |
|--|--------------------|-----------------------------------|-----------------------------|---------------------------------------|--------------------|-----------------------------------|-------------|
| <b>Full Name of Contributor</b><br>DALLAS KPAPF                                  |                    |                                   |                             | <b>MO</b>                             | <b>DAY</b>         | <b>YEAR</b>                       | \$ 1,000.00 |
| <b>Mailing Address</b> 407 JACOBS COURT  |                    |                                   |                             | 10                                    | 4                  | 2016                              |             |
| <b>City</b> EXTON  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19341 |                             |                                       |                    |                                   |             |
| <b>Employer Name</b> KPAPF BUS COMPANY   |                    |                                   |                             | <b>Occupation</b> SCHOOL BUS OPERATOR |                    |                                   |             |
| <b>Employer Mailing Address/Principal Place of Business</b><br>1030 ANDREW DRIVE |                    |                                   | <b>City</b><br>WEST CHESTER |                                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19380 |             |

|   |                    |                                   |             |                           |              |                          |           |
|---|--------------------|-----------------------------------|-------------|---------------------------|--------------|--------------------------|-----------|
| <b>Full Name of Contributor</b><br>JOHN O. SCHUELER         |                    |                                   |             | <b>MO</b>                 | <b>DAY</b>   | <b>YEAR</b>              | \$ 500.00 |
| <b>Mailing Address</b> 1108 KILDARE AVENUE                  |                    |                                   |             | 10                        | 6            | 2016                     |           |
| <b>City</b> LIBERTYVILLE                                    | <b>State</b><br>IL | <b>Zip Code (Plus 4)</b><br>60048 |             |                           |              |                          |           |
| <b>Employer Name</b>  |                    |                                   |             | <b>Occupation</b> RETIRED |              |                          |           |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                   | <b>City</b> |                           | <b>State</b> | <b>Zip Code (Plus 4)</b> |           |

|   |                    |                                   |             |                            |              |                          |           |
|---|--------------------|-----------------------------------|-------------|----------------------------|--------------|--------------------------|-----------|
| <b>Full Name of Contributor</b><br>RICHARD FRAZIER          |                    |                                   |             | <b>MO</b>                  | <b>DAY</b>   | <b>YEAR</b>              | \$ 500.00 |
| <b>Mailing Address</b> 2045 GRANTHAM AVE                    |                    |                                   |             | 9                          | 30           | 2016                     |           |
| <b>City</b> BERWYN  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19312 |             |                            |              |                          |           |
| <b>Employer Name</b> SAUL EWING                             |                    |                                   |             | <b>Occupation</b> ATTORNEY |              |                          |           |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                   | <b>City</b> |                            | <b>State</b> | <b>Zip Code (Plus 4)</b> |           |

|   |                    |                                   |                        |                             |                    |                                   |           |
|---|--------------------|-----------------------------------|------------------------|-----------------------------|--------------------|-----------------------------------|-----------|
| <b>Full Name of Contributor</b><br>THOMAS A. FILLIPPO                         |                    |                                   |                        | <b>MO</b>                   | <b>DAY</b>         | <b>YEAR</b>                       | \$ 300.00 |
| <b>Mailing Address</b> 245 MINE ROAD  |                    |                                   |                        | 10                          | 14                 | 2016                              |           |
| <b>City</b> MALVERN   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19355 |                        |                             |                    |                                   |           |
| <b>Employer Name</b> DEVAULT FOODS  |                    |                                   |                        | <b>Occupation</b> PRESIDENT |                    |                                   |           |
| <b>Employer Mailing Address/Principal Place of Business</b><br>1 DEVAULT LANE |                    |                                   | <b>City</b><br>DEVAULT |                             | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19432 |           |

|  |                 |                                |                       |                             |                 |                                |           |
|--|-----------------|--------------------------------|-----------------------|-----------------------------|-----------------|--------------------------------|-----------|
| <b>Full Name of Contributor</b><br>KEVIN JOHNSON                               |                 |                                |                       | <b>MO</b>                   | <b>DAY</b>      | <b>YEAR</b>                    | \$ 500.00 |
| <b>Mailing Address</b> 1759 HAMILTON DR  |                 |                                |                       | 10                          | 14              | 2016                           |           |
| <b>City</b> PHOENIXVILLE   | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 19460 |                       |                             |                 |                                |           |
| <b>Employer Name</b> TRAFFIC PLANNING & DESIGN INC                             |                 |                                |                       | <b>Occupation</b> PRESIDENT |                 |                                |           |
| <b>Employer Mailing Address/Principal Place of Business</b><br>2500 E. HIGH ST |                 |                                | <b>City</b> POTTSTOWN |                             | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 19464 |           |

|  |                 |                                |                     |                          |                 |                                |           |
|--|-----------------|--------------------------------|---------------------|--------------------------|-----------------|--------------------------------|-----------|
| <b>Full Name of Contributor</b><br>SUSAN & NORMAN CALLAHAN                     |                 |                                |                     | <b>MO</b>                | <b>DAY</b>      | <b>YEAR</b>                    | \$ 300.00 |
| <b>Mailing Address</b> 2415 WAYLAND RD   |                 |                                |                     | 10                       | 4               | 2016                           |           |
| <b>City</b> BERWYN   | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 19312 |                     |                          |                 |                                |           |
| <b>Employer Name</b> MAIN LINE HEALTH  |                 |                                |                     | <b>Occupation</b> DOCTOR |                 |                                |           |
| <b>Employer Mailing Address/Principal Place of Business</b><br>325 CENTRAL AVE |                 |                                | <b>City</b> MALVERN |                          | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 19355 |           |

|  |                 |                                |                   |                             |                 |                                |           |
|--|-----------------|--------------------------------|-------------------|-----------------------------|-----------------|--------------------------------|-----------|
| <b>Full Name of Contributor</b><br>GREGORY S. BENTLEY                          |                 |                                |                   | <b>MO</b>                   | <b>DAY</b>      | <b>YEAR</b>                    | \$ 750.00 |
| <b>Mailing Address</b> 101 CREEK ROAD  |                 |                                |                   | 10                          | 16              | 2016                           |           |
| <b>City</b> COATESVILLE  | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 19320 |                   |                             |                 |                                |           |
| <b>Employer Name</b> BENTLEY SYSTEMS   |                 |                                |                   | <b>Occupation</b> EXECUTIVE |                 |                                |           |
| <b>Employer Mailing Address/Principal Place of Business</b><br>685 STOCKTON DR |                 |                                | <b>City</b> EXTON |                             | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 19341 |           |

|   |                 |                                |                        |  |                 |                          |              |
|---|-----------------|--------------------------------|------------------------|--|-----------------|--------------------------|--------------|
| <b>Full Name of Contributor</b><br>DUANE MILNE              |                 |                                |                        | <b>MO</b>                              | <b>DAY</b>      | <b>YEAR</b>              | \$ 20,000.00 |
| <b>Mailing Address</b> 43 STONEHENGE LANE                   |                 |                                |                        | 10                                     | 4               | 2016                     |              |
| <b>City</b> MALVERN   | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 19355 |                        |  |                 |                          |              |
| <b>Employer Name</b> COMMONWEALTH OF PA                     |                 |                                |                        | <b>Occupation</b> STATE REPRESENTATIVE |                 |                          |              |
| <b>Employer Mailing Address/Principal Place of Business</b> |                 |                                | <b>City</b> HARRISBURG |  | <b>State</b> PA | <b>Zip Code (Plus 4)</b> |              |

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

**PAGE TOTAL**

\$ 29,150.00

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 |
|                                       | From: To:        |

|                     |       |                   |  | 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>                      |         |
| FRIENDS OF DUANE MILNE   |  | 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<br><br>From: <span style="float: right;">To:</span> |
|---------------------------------------|--|

|   |       |                   | 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><br><br>\$ 0.00 |



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

|                                       |                  |
|---------------------------------------|------------------|
| Name of Filing Committee or Candidate | Reporting Period |
|                                       | From: To:        |

|   |       |                  |       | DATE             |     | AMOUNT                      |         |
|---|-------|------------------|-------|------------------|-----|-----------------------------|---------|
| 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<br>0.00          |         |

# SCHEDULE III STATEMENT OF EXPENDITURES

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                     |
| FRIENDS OF DUANE MILNE                       | From <u>9/20/2016</u> To: <u>10/24/2016</u> |

| DATE   |          |                         |   | AMOUNT |      |             |
|--|----------|-------------------------|---|--------|------|-------------|
| To Whom Paid<br>RICHARD JOHNSON                |          |                         | MO  | DAY    | YEAR | \$ 2,500.00 |
| Mailing Address 1 PRIMROSE LANE                |          |                         | 5   | 19     | 2016 |             |
| City WEST CHESTER                              | State PA | Zip Code (Plus 4) 19380 | Description of Expenditure<br>FFS               |        |      |             |
| To Whom Paid<br>BERWYN VICTORY RUN             |          |                         | MO  | DAY    | YEAR | \$ 25.00    |
| Mailing Address P.O. BOX 201                   |          |                         | 5   | 21     | 2016 |             |
| City BERWYN                                    | State PA | Zip Code (Plus 4) 19312 | Description of Expenditure<br>DONATION          |        |      |             |
| To Whom Paid<br>CHARLESTOWN HISTORICAL SOCIETY |          |                         | MO  | DAY    | YEAR | \$ 125.00   |
| Mailing Address P.O. BOX 344                   |          |                         | 5   | 24     | 2016 |             |
| City DEVAULT                                   | State PA | Zip Code (Plus 4) 19432 | Description of Expenditure<br>DONATION          |        |      |             |
| To Whom Paid<br>MONTY MILNE                    |          |                         | MO  | DAY    | YEAR | \$ 65.00    |
| Mailing Address 946 PORT PROVIDENCE ROAD       |          |                         | 5   | 31     | 2016 |             |
| City PHOENIXVILLE                              | State PA | Zip Code (Plus 4) 19460 | Description of Expenditure<br>WEB SERVICES      |        |      |             |
| To Whom Paid<br>HALLOWELL & BRANSTETTER        |          |                         | MO  | DAY    | YEAR | \$ 325.00   |
| Mailing Address 3031 LOGAN STREET              |          |                         | 7   | 12     | 2016 |             |
| City CAMP HILL                                 | State PA | Zip Code (Plus 4) 17011 | Description of Expenditure<br>CAMPAIGN RESEARCH |        |      |             |

|  |          |                         |   |     |      |             |
|--|----------|-------------------------|---|-----|------|-------------|
| To Whom Paid<br>CAPITOL PROMOTIONS INC |          |                         | MO  | DAY | YEAR | \$ 1,892.10 |
| Mailing Address P.O. BOX 231           |          |                         | 7   | 27  | 2016 |             |
| City GLENSIDE                          | State PA | Zip Code (Plus 4) 19038 | Description of Expenditure<br>CAMPAIGN LAWN SIGNS |     |      |             |

|                                       |          |                         |  |     |      |           |
|---------------------------------------|----------|-------------------------|--|-----|------|-----------|
| To Whom Paid<br>GREAT VALLEY GRIDIRON |          |                         | MO   | DAY | YEAR | \$ 150.00 |
| Mailing Address 4 CAROL LANE          |          |                         | 8  | 23  | 2016 |           |
| City MALVERN                          | State PA | Zip Code (Plus 4) 19355 | Description of Expenditure<br>PROGRAM BOOK |     |      |           |

|  |          |                         |  |     |      |           |
|--|----------|-------------------------|--|-----|------|-----------|
| To Whom Paid<br>GVHS DIRECTORY           |          |                         | MO   | DAY | YEAR | \$ 125.00 |
| Mailing Address 111 MOUNTAIL LAUREL LANE |          |                         | 8  | 23  | 2016 |           |
| City MALVERN                             | State PA | Zip Code (Plus 4) 19355 | Description of Expenditure<br>GREAT VALLEY HIGH SCHOOL DIRECTORY |     |      |           |

|   |          |                         |   |     |      |          |
|---|----------|-------------------------|---|-----|------|----------|
| To Whom Paid<br>EXTON REGION CHAMBER COMMERCE |          |                         | MO  | DAY | YEAR | \$ 95.00 |
| Mailing Address 185 EXTON SQUARE MALL         |          |                         | 9   | 25  | 2016 |          |
| City EXTON                                    | State PA | Zip Code (Plus 4) 19341 | Description of Expenditure<br>AWARDS DINNER |     |      |          |

|  |          |                         |   |     |      |             |
|--|----------|-------------------------|---|-----|------|-------------|
| To Whom Paid<br>CAPITOL PROMOTIONS INC |          |                         | MO  | DAY | YEAR | \$ 1,611.20 |
| Mailing Address PO BOX 231             |          |                         | 9   | 30  | 2016 |             |
| City GLENSIDE                          | State PA | Zip Code (Plus 4) 19038 | Description of Expenditure<br>CAMPAIGN LAWN SIGNS |     |      |             |

|   |          |                         |  |     |      |              |
|---|----------|-------------------------|--|-----|------|--------------|
| To Whom Paid<br>HOUSE REPUBLICAN CAMPAIGN COMM. |          |                         | MO                                     | DAY | YEAR | \$ 20,000.00 |
| Mailing Address 500 N. 3RD ST, #4               |          |                         | 9                                      | 30  | 2016 |              |
| City HARRISBURG                                 | State PA | Zip Code (Plus 4) 17101 | Description of Expenditure<br>DONATION |     |      |              |

|   |                    |                                   |   |            |             |             |
|---|--------------------|-----------------------------------|---|------------|-------------|-------------|
| <b>To Whom Paid</b><br>VERA NOLL        |                    |                                   | <b>MO</b>   | <b>DAY</b> | <b>YEAR</b> | \$ 1,200.00 |
| <b>Mailing Address</b> 18 LANCASTER AVE |                    |                                   | 9   | 30         | 2016        |             |
| <b>City</b> MALVERN                     | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19355 | <b>Description of Expenditure</b><br>RENT FOR CAMPAIGN OFFICE |            |             |             |

|   |                    |                                   |  |            |             |             |
|---|--------------------|-----------------------------------|--|------------|-------------|-------------|
| <b>To Whom Paid</b><br>HALLOWELL & BRANSTETER |                    |                                   | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b> | \$ 3,951.68 |
| <b>Mailing Address</b> 3031 LOGAN ST.         |                    |                                   | 9  | 30         | 2016        |             |
| <b>City</b> CAMP HILL                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17011 | <b>Description of Expenditure</b><br>CAMPAIGN PALM CARDS |            |             |             |

|  |                    |                                   |   |            |             |           |
|--|--------------------|-----------------------------------|---|------------|-------------|-----------|
| <b>To Whom Paid</b><br>UNITED STATES POST OFFICE |                    |                                   | <b>MO</b>   | <b>DAY</b> | <b>YEAR</b> | \$ 564.00 |
| <b>Mailing Address</b> 1050 AIRPORT ROAD         |                    |                                   | 10  | 1          | 2016        |           |
| <b>City</b> WEST CHESTER                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19380 | <b>Description of Expenditure</b><br>POSTAGE LABELS |            |             |           |

|  |                    |                                   |   |            |             |          |
|--|--------------------|-----------------------------------|---|------------|-------------|----------|
| <b>To Whom Paid</b><br>RICHARD JOHNSON |                    |                                   | <b>MO</b>   | <b>DAY</b> | <b>YEAR</b> | \$ 12.66 |
| <b>Mailing Address</b> 1 PRIMROSE LANE |                    |                                   | 10  | 1          | 2016        |          |
| <b>City</b> WEST CHESTER               | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19380 | <b>Description of Expenditure</b><br>CAMPAIGN OFFICE KEYS |            |             |          |

|  |                    |                                   |   |            |             |           |
|--|--------------------|-----------------------------------|---|------------|-------------|-----------|
| <b>To Whom Paid</b><br>HALLOWELL & BRANSTETTER |                    |                                   | <b>MO</b>   | <b>DAY</b> | <b>YEAR</b> | \$ 650.00 |
| <b>Mailing Address</b> 3031 LOGAN ST           |                    |                                   | 10  | 11         | 2016        |           |
| <b>City</b> CAMP HILL                          | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17011 | <b>Description of Expenditure</b><br>30 DAYS PHONE CALL |            |             |           |

|  |                    |                                   |  |            |             |           |
|--|--------------------|-----------------------------------|--|------------|-------------|-----------|
| <b>To Whom Paid</b><br>HALLOWELL & BRANSTETTER |                    |                                   | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b> | \$ 600.00 |
| <b>Mailing Address</b> 3031 LOGAN ST           |                    |                                   | 10   | 11         | 2016        |           |
| <b>City</b> CAMP HILL                          | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17011 | <b>Description of Expenditure</b><br>2016 CAMPAIGN WEBSITE |            |             |           |

|  |                    |                                   |   |            |             |  |
|--|--------------------|-----------------------------------|---|------------|-------------|--|
| <b>To Whom Paid</b><br>HALLOWELL & BRANSTETTER |                    |                                   | <b>MO</b>   | <b>DAY</b> | <b>YEAR</b> |  |
| <b>Mailing Address</b> 3031 LOGAN ST           |                    |                                   | 10  | 18         | 2016        |  |
| <b>City</b> CAMP HILL                          | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17011 | <b>Description of Expenditure</b><br>QUALITY OF LIFE BROCHURE AND MAILING |            |             |  |

  

|   |                    |                                   |   |            |             |  |
|---|--------------------|-----------------------------------|---|------------|-------------|--|
| <b>To Whom Paid</b><br>HOUSE REPUBLICAN CAMPAIGN COMM |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> |  |
| <b>Mailing Address</b> 500 N. 3RD ST. #4              |                    |                                   |   |            |             |  |
| <b>City</b> HARRISBURG                                | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17101 | <b>Description of Expenditure</b><br>DONATION |            |             |  |

  

|   |                    |                                   |  |            |             |  |
|---|--------------------|-----------------------------------|--|------------|-------------|--|
| <b>To Whom Paid</b><br>21ST CENTURY MEDIA |                    |                                   | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b> |  |
| <b>Mailing Address</b> 24 N. HANOVER ST.  |                    |                                   | 10   | 24         | 2016        |  |
| <b>City</b> POTTSTOWN                     | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19464 | <b>Description of Expenditure</b><br>NEWSPAPER ADVERTISING |            |             |  |

  

|   |                    |                                   |  |            |             |  |
|---|--------------------|-----------------------------------|--|------------|-------------|--|
| <b>To Whom Paid</b><br>DUANE MILNE        |                    |                                   | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b> |  |
| <b>Mailing Address</b> 43 STONEHENGE LANE |                    |                                   | 10   | 24         | 2016        |  |
| <b>City</b> MALVERN                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19355 | <b>Description of Expenditure</b><br>REIMBURSE FOR POSTAGE AND COPYING |            |             |  |

  

|  |                    |                                   |   |            |             |  |
|--|--------------------|-----------------------------------|---|------------|-------------|--|
| <b>To Whom Paid</b><br>STEPS 4 HOPE FOUNDATION |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> |  |
| <b>Mailing Address</b> 9 FOX RIDGE DR          |                    |                                   | 10  | 20         | 2016        |  |
| <b>City</b> MALVERN                            | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19355 | <b>Description of Expenditure</b><br>DONATION |            |             |  |

  

|  |  |  |  |  |  |                   |
|--|--|--|--|--|--|-------------------|
| <b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b> |  |  |  |  |  | <b>PAGE TOTAL</b> |
|  |  |  |  |  |  | \$ 55,821.05      |

**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**

|  |                    |                                   |   |   |  |
|--|--------------------|-----------------------------------|---|---|--|
| <b>Name of Filing Committee or Candidate</b><br><br>FRIENDS OF DUANE MILNE     |                    |                                   |   | <b>Reporting Period</b><br><br>From: <u>9/20/2016</u> To: <u>10/24/2016</u> |  |
|  |                    |                                   |   |   | <b>Outstanding<br/>Balance of Debt</b> |
|  |                    |                                   |   | <b>DATE</b>   |  |
| <b>Name of Creditor</b><br>DUANE MILNE   |                    |                                   |   | <b>MO</b>   | <b>DAY</b>                             |
|  |                    |                                   |   | <b>YEAR</b>   |  |
| <b>Mailing Address</b> 43 STONEHENGE LANE                                      |                    |                                   |   | 10  | 4                                      |
|  |                    |                                   |   | 2016  | \$ 20,000.00                           |
| <b>City</b> MALVERN  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19355 | <b>Description of Debt</b><br>FRIENDS OF DUANE MILNE CAMPAIGN LOAN TO<br>CANDIDATES COMMITTEE FILER ID #2006131 |   |  |
| <b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b> |                    |                                   |   |   | <b>PAGE TOTAL</b><br><br>\$ 20,000.00  |