### **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 :	<b>on</b> 20	140011				Repo			CA	NDII	DATE		СОМ	MITTEE	<b>✓</b>	LOB	BYIST		
Name of Filing C	ommittee, Cand	lidate or L	.obbyi	st:	1	AUME	ENT	FOR	SEN	ATE									
Street Address: PO BOX 194																			
City:	LANDISVILI	E							State	e:	PA			Zip Cod	<b>de:</b> 17	538-0	194		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND PRIM	FRIDAY ARY	PRE-	2		30 DA PRIMA		Р	OST-	3.		AMENDM REPORT		Yes	١	lo	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		FRIDAY TION	PRE-	- 5		30 DA		Р	OST-	6. <b>&gt;</b>	(	TERMINA REPORT		Yes	١	lo	<b>/</b>
report type)	ANNUAL REPOR	<b>RT</b> 7.	Year	2016					NG ME		_			PAPER		<b>√</b>	DISK	ETTE	
Name of Office S	ought by Candi	date:	•						DAT	ΈO	F ELE	CTI	ON	District Number	Office Code	Pai	ty Cod	e Cou Code	
SENATOR IN TH	HE GENERAL AS	SEMBLY							МО		DAY		/EAR	36	STS	REF		36	
										11		8	2016		(SEE INS	TRUCTI	ONS FO	R CODES	5)
Summary of Expenditures		МО	DA		YEAR		T	^	МО		DAY		YEAR		R OFFIC	E USE	ONLY	<b>f</b>	
-		om Last F	10	25	20	016		1		11		28	2016						
	ught Forward Fr		-		Sched	dule 1	I)	\$					,755.80 ,450.00	-					
C. Total Funds Available (Sum Of Lines A and B) \$ 44,205.80  D. Total Expenditures (From Schedule III) \$ 20,210.14																			
E. Ending Cash	Balance (Subtr	act Line D	From	Line C	;)			\$				23,	,995.66	1					
F. Value Of In-	Kind Contribution	ns Receiv	ed (Fi	rom Sc	hedul	e II)		\$					0.00	1					
G. Unpaid Debt	s And Obligatio	ns (From	Sched	ule IV)	)			\$					0.00						
					AFFI	IDA'	VI	ΓSE	CTI	NC									
PART I - If this is	a Committee r	eport, trea	asurer	sign h	ere. I	f this	s is	a Car	ndida	te re	port, c	cand	lidate sig	jn here.					
I swear (or affirm) correct and comple		ncluding th	e attac	hed sch	edules	filed	on	paper	or by e	electr	onic m	ediur	m, are to t	the best o	f my knov	vledge	and be	lief , tı	ue
Sworn to and subs	cribed before me t day of	his	20							,			Signature	of Perso	n Submitt	ing Re <sub>l</sub>	ort		_
	Signa	nture	_					-						Prin	ted Name				
My Commission Ex	pires									•				Ema	il				_
	мо	D	AY		YR						Are	ea Co	ode	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	autho	orized (	Comm	ittee	, Ca	andid	ate sl	halls	sign he	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge a	nd belie	f this	politio	cal	comm	ittee h	as no	ot viola	ted a	ny provis	ions of the	e act of Ju	ıne 3,1	937 (P	.L. 133	3,
Sworn to and subsc		iis											s	ignature o	of Candida	ite			-
-	day of		_ 20 _					-						Printe	d Name				-
	Signatuı	·e						-							:.				_
My Commission Exp	ires													Ema					
	мо	D	AY		YR			•			Area	Code	9	Da	aytime Te	lephor	e Num	ber	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

	-			
Name of Filing Committee or Candidate	Reporting	Period		
AUMENT FOR SENATE	From:	10/25/201	<u>.6</u> To:	11/28/2016
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	250.00
All Other Contributions (Part B)			\$	200.00
TOTAL for the Reporting	Period	(2)	\$	450.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	24,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	24,000.00
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 Page 1			\$	24,450.00

#### **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		
AUMENT FOR SENATE	From:	10/25/2016	То:	11/28/2016
		DATE		AMOUNT

Full Name of Contributing Committee PENNSYLVANIA SCHOOL BOARDS ASSOCIATION ED					DAY	YEAR	
Mailing Address	Mailing Address 400 BENT CREEK BLVD						\$ 250.00
City MECHANICSBU	G	te	Zip Code (Plus 4)	11	16	2016	
PA 17050							

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

**PAGE TOTAL \$** 250.00

### 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	Name of Filing Committee or Candidate					Reporting Period						
AUMENT FOR SENATE			From: <u>10/25/2016</u> To			<u>11/28/2016</u>						
				DATE		AMOUNT						
Full Name of Contributor Alexander Munro			МО	DAY	YEAR							
Mailing Address 6722 River	<sup>-</sup> Road		2.5	2016	\$ 100.00							
<b>City</b> Conestoga	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17516	10	25	2016							
Full Name of Contributor Alexander Munro			МО	DAY	YEAR							
Mailing Address 6722 River	Road					<b>\$</b> 100.00						
<b>City</b> Conestoga	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17516	11	25	2016							

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

**PAGE TOTAL \$** 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.

Name of Filing Committee or Candidate	Reporting	Period					
AUMENT FOR SENATE			From:	10/2	<u>5/2016</u>	То:	11/28/2016
				DA	TE		AMOUNT
Full Name of Contributing Committee Stradley Ronon Stevens & Young, LLP				МО	DAY	YEAR	
Mailing Address 2005 Market Street							\$ 5,000.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code</b> 19103	e (Plus 4)	10	27	2016	
Full Name of Contributing Committee  EXCELLENT SCHOOLS PA				МО	DAY	YEAR	
Mailing Address 150 S INDEPENDENCE  City PHILADELPHIA	CE MALL WEST, STE 1.  State PA		e (Plus 4)	10	27	2016	\$ 5,000.00
Full Name of Contributing Committee STUDENTS FIRST PAC				МО	DAY	YEAR	
Mailing Address PO BOX 416  City WYNNEWOOD	<b>State</b> PA	<b>Zip Code</b> 19096	e (Plus 4)	10	27	2016	\$ 5,000.00
Full Name of Contributing Committee TALEN ENERGY CORPORATION PAC				мо	DAY	YEAR	
Mailing Address FLLOR 2 - GOVERNM ST	ENT RELATIONS 835	HAMILTO	N ST,				\$ 1,000.00
<b>City</b> ALLENTOWN	<b>State</b> PA	<b>Zip Code</b> 18101	e (Plus 4)	10	27	2016	
Full Name of Contributing Committee  EDUCATION OPPORTUNITY PAC					DAY	YEAR	
Mailing Address 120 S WARNER RD,	STE 200						\$ 5,000.00
City KING OF PRUSSIA	<b>State</b> PA	<b>Zip Code</b> 19406	e (Plus 4)	10	28	2016	

Full Name of Contributing Committee  ABBOTT LABORATORIES EMPL PAC (AE	BOTT LABORATORIES EMPL PAC (AEPAC)					
Mailing Address 100 ABBOTT PK RD [	D-312 AP6D-2					\$ 1,000.00
City ABBOTT PARK	<b>State</b> IL	<b>Zip Code (Plus 4)</b> 60064	10	28	2016	
Full Name of Contributing Committee ENERGY TRANSFER EMPLOYEE MANAGE	МО	DAY	YEAR			
Mailing Address 400 W 15TH ST, STE	Mailing Address 400 W 15TH ST, STE 720					\$ 1,000.00
City AUSTIN	State TX	<b>Zip Code (Plus 4)</b> 78701-1661	11	18	2016	
Full Name of Contributing Committee PHA HOME PAC	-					
Mailing Address 600 N 12TH ST, STE				\$ 1,000.00		
City LEMOYNE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17043	11	21	2016	

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

**PAGE TOTAL \$** 24,000.00

## 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.)

ame of Filing Committee or Candidate			Reporting Period							
				Fror	n:		То:			
					D	ATE			AMOUNT	
Full Name of Contributor					МО	DAY	YEAR			
Mailing Address								\$		0.00
City	State Zip Code (Plus 4)									
Employer Name	•	•			Occupation					
Employer Mailing Address/Principal Pla Business	ce of		City		•	State		Zip C	ode (Plus	4)
Enter Grand Total of Part C on Sch	edule I, Detai	iled Sumr	mary Page,	Section	on 3.			\$	PAGE TO	0.00

## 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		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•		•	•	
Enter Grand Total of Part E o	on Schedule I. Detailed	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 1, Betanet	. Jammar y r uge,	500.011				\$	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 Per	iod							
AUMENT FOR SENATE	From:	<u>10/25/2016</u> <b>To:</b>	<u>11/28/2016</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	1. 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 Candid	ate		Reporting	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II, In-Kir	nd Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate				Re	porting	Period				
					From:			То:	То:		
					•		DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(I	Plus 4)							
Employer of Contributor	-1		•		Occupation						
Employer Mailing Address/Principal Place of Business City State				State		Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00					

## STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period			
AUMENT FOR SENATE				From <u>10/25/2016</u> To:			11/28/2016
				DATE			
<b>To Whom Paid</b> Wells Fargo				DAY	YEAR		
Mailing Address PO Box 6995				25	2016	\$	37.41
City Portland	<b>State</b> OR	<b>Zip Code (Plus 4)</b> 97228	Description of Expenditure Bank Fees				
<b>To Whom Paid</b> SRCC			МО	DAY	YEAR		
Mailing Address Box 792				21	2016	\$	20,000.00
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	Description of Expenditure Contribution				
<b>To Whom Paid</b> CAM Notary			мо	DAY	YEAR		
Mailing Address 3626 Columbia Ave.				27	2016	\$ \$	5.00
City Lancaster	<b>State</b> PA	Description of Expenditure Administrative					
<b>To Whom Paid</b> CAM Notary		·	мо	DAY	YEAR		
Mailing Address 3626 Columbia Ave.				1	2016	\$	5.00
City Lancaster	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17603	1	Description of Expenditure Administrative			
To Whom Paid Coalition of Home Schoolers Across Lancaster County				DAY	YEAR		
Mailing Address Box 480	11	7	2016	\$	12.50		
City Leola	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17540	1	Description of Expenditure Advertising			

To Whom F Wells Farge						мо	DAY	YEAR		
wells raig	,0									
Mailing Add	illing Address PO Box 6995				10	27	2016	\$	35.00	
City Por	rtland	State         Zip Code (Plus 4)           OR         97228				Description of Expenditure Bank Fees				
	-									
To Whom F GoDaddy.c						мо	DAY	YEAR		
Mailing Address 14747 N. Northside Blvd				10	25	2016	\$	35.34		
City Sco	ottsdale		State	[:	Zip Code (Plus 4)	Description of Expenditure				
550	Jugare		AZ		85260	Adverti				
To Whom F				<u> </u>		МО	DAY	YEAR		
Isaac's Del	li									
Mailing Address 245 Centerville Road			10	27	2016	\$	16.29			
City Lar	ncaster	State Zip Code (Plus 4)			Description of Expenditure					
			PA		17603	Meals				
To Whom F		•				МО	DAY	YEAR		
Mailing Address 1601 Trapelo Road				10	28	2016	\$	63.60		
City Waltham		State Zip Code (Plus 4)			Descrip	tion of Exp	enditure			
114	nam					Advertising				
	_			•		•				PAGE TOTAL
Enter Gra	ınd Tota	l of Expenditures o	n Page 1, R	Report Co	ver Page, Item D	•			\$	20,210.14