

# 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>   |                          | 20160290 |                         | <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> MEDIA DEMOCRATIC COMMITTEE |                          |          |                         |                          |                                    |                         |            |  |                                     |                                     |                            |                    |
| <b>Street Address:</b> PO BOX 284  |                          |          |                         |                          |                                    |                         |            |  |                                     |                                     |                            |                    |
| <b>City:</b> MEDIA   |                          |          |                         |                          |                                    | <b>State:</b> PA        |            |  | <b>Zip Code:</b> 19063-0284         |                                     |                            |                    |
| <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 PRIMARY                     | POST-PRIMARY            | 3.         | AMENDMENT REPORT?                                    | Yes                                 | <input checked="" type="checkbox"/> | No                         |                    |
|  | 6TH TUESDAY PRE-ELECTION | 4.       | 2ND FRIDAY PRE-ELECTION | 5.X                      | 30 DAY ELECTION                    | POST-ELECTION           | 6.         | TERMINATION REPORT?                                  | Yes                                 |                                     | No                         |                    |
|  | 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>  | DEM 23                              |                                     |                            |                    |
|  |                          |          |                         |                          |                                    | 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> |                    |
|  |                          |          |                         | 5                        | 17                                 | 2016                    |            | 10   | 24                                  | 2016                                |                            |                    |
| <b>A. Amount Brought Forward From Last Report</b>                                  |                          |          |                         |                          |                                    | \$ 1,874.39             |            |  |                                     |                                     |                            |                    |
| <b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>              |                          |          |                         |                          |                                    | \$ 3,513.71             |            |  |                                     |                                     |                            |                    |
| <b>C. Total Funds Available (Sum Of Lines A and B)</b>                             |                          |          |                         |                          |                                    | \$ 5,388.10             |            |  |                                     |                                     |                            |                    |
| <b>D. Total Expenditures (From Schedule III)</b>                                   |                          |          |                         |                          |                                    | \$ 1,448.81             |            |  |                                     |                                     |                            |                    |
| <b>E. Ending Cash Balance (Subtract Line D From Line C)</b>                        |                          |          |                         |                          |                                    | \$ 3,939.29             |            |  |                                     |                                     |                            |                    |
| <b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>               |                          |          |                         |                          |                                    | \$ 5,176.00             |            |  |                                     |                                     |                            |                    |
| <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>                      |
| MEDIA DEMOCRATIC COMMITTEE                   | From: <u>5/17/2016</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>                                      | \$ 850.00 |

|  |             |
|--|-------------|
| <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>  | \$ 1,310.00 |
| <b>TOTAL for the Reporting Period (2)</b>  | \$ 1,310.00 |

|   |             |
|---|-------------|
| <b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b> |             |
| <b>Contributions Received From Political Committees (Part C)</b>        | \$ 1,353.71 |
| <b>All Other Contributions (Part D)</b>                                 | \$ 0.00     |
| <b>TOTAL for the Reporting Period (3)</b>                               | \$ 1,353.71 |

|  |         |
|--|---------|
| <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> | \$ 3,513.71 |
|---|-------------|

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 |
|                                       | 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 A on Schedule I, Detailed Summary Page, Section 2.

|            |
|------------|
| PAGE TOTAL |
| \$0.00     |

## 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>                                    |
| MEDIA DEMOCRATIC COMMITTEE                   | <b>From:</b> <u>5/17/2016</u> <b>To:</b> <u>10/24/2016</u> |

|   |  |          |                         | DATE |     | AMOUNT |           |
|---|--|----------|-------------------------|------|-----|--------|-----------|
| Full Name of Contributor                    |  |          |                         | MO   | DAY | YEAR   | \$ 70.00  |
| Kathlyne K. Birdsall                        |  |          |                         |      |     |        |           |
| Mailing Address 601 N Providence Rd Apt 213 |  |          |                         | 8    | 7   | 2016   |           |
| City Media                                  |  | State PA | Zip Code (Plus 4) 19063 |      |     |        |           |
| Full Name of Contributor                    |  |          |                         | MO   | DAY | YEAR   | \$ 100.00 |
| Adeline C. Ciannella                        |  |          |                         |      |     |        |           |
| Mailing Address 417 S Edgemont St           |  |          |                         | 8    | 19  | 2016   |           |
| City Media                                  |  | State PA | Zip Code (Plus 4) 19063 |      |     |        |           |
| Full Name of Contributor                    |  |          |                         | MO   | DAY | YEAR   | \$ 175.00 |
| Celia Chen                                  |  |          |                         |      |     |        |           |
| Mailing Address 117 N Edgemont St           |  |          |                         | 8    | 31  | 2016   |           |
| City Media                                  |  | State PA | Zip Code (Plus 4) 19063 |      |     |        |           |
| Full Name of Contributor                    |  |          |                         | MO   | DAY | YEAR   | \$ 70.00  |
| Michael Mullen                              |  |          |                         |      |     |        |           |
| Mailing Address 1005 Bryan St               |  |          |                         | 8    | 30  | 2016   |           |
| City Drexel Hill                            |  | State PA | Zip Code (Plus 4) 19026 |      |     |        |           |
| Full Name of Contributor                    |  |          |                         | MO   | DAY | YEAR   | \$ 70.00  |
| James A. Ziegelhoffer                       |  |          |                         |      |     |        |           |
| Mailing Address 402 W 3rd St                |  |          |                         | 9    | 10  | 2016   |           |
| City Media                                  |  | State PA | Zip Code (Plus 4) 19063 |      |     |        |           |
| Full Name of Contributor                    |  |          |                         | MO   | DAY | YEAR   | \$ 70.00  |
| Evelyn Blair                                |  |          |                         |      |     |        |           |
| Mailing Address 510 N Lemon St C13          |  |          |                         | 8    | 7   | 2016   |           |
| City Media                                  |  | State PA | Zip Code (Plus 4) 19063 |      |     |        |           |

|                                   |  |           |         |    |     |      |          |
|-----------------------------------|--|-----------|---------|----|-----|------|----------|
| Full Name of Contributor          |  |           |         | MO | DAY | YEAR | \$70.00  |
| David Krull                       |  |           |         | 8  | 6   | 2016 |          |
| Mailing Address702 Centennial Ave |  | CityMedia | StatePA |    |     |      |          |
| Full Name of Contributor          |  |           |         | MO | DAY | YEAR | \$105.00 |
| Carolynne Lever Glover            |  |           |         | 9  | 10  | 2016 |          |
| Mailing Address306 South Ave      |  | CityMedia | StatePA |    |     |      |          |
| Full Name of Contributor          |  |           |         | MO | DAY | YEAR | \$100.00 |
| Paul M. Robinson                  |  |           |         | 9  | 12  | 2016 |          |
| Mailing Address133 E 5th St       |  | CityMedia | StatePA |    |     |      |          |
| Full Name of Contributor          |  |           |         | MO | DAY | YEAR | \$70.00  |
| Robert Dimond                     |  |           |         | 9  | 5   | 2016 |          |
| Mailing Address134 E 3rd St       |  | CityMedia | StatePA |    |     |      |          |
| Full Name of Contributor          |  |           |         | MO | DAY | YEAR | \$70.00  |
| Frank W. Daly                     |  |           |         | 9  | 6   | 2016 |          |
| Mailing Address110 W Front St     |  | CityMedia | StatePA |    |     |      |          |
| Full Name of Contributor          |  |           |         | MO | DAY | YEAR | \$170.00 |
| Robert A. McMahon                 |  |           |         | 9  | 10  | 2016 |          |
| Mailing Address10 Oakmont Pl      |  | CityMedia | StatePA |    |     |      |          |
| Full Name of Contributor          |  |           |         | MO | DAY | YEAR | \$100.00 |
| Mary Beth Lauer                   |  |           |         | 9  | 8   | 2016 |          |
| Mailing Address429 Vernon St      |  | CityMedia | StatePA |    |     |      |          |
| Full Name of Contributor          |  |           |         | MO | DAY | YEAR | \$70.00  |
| Eric Stein                        |  |           |         | 9  | 10  | 2016 |          |
| Mailing Address228 E 3rd St       |  | CityMedia | StatePA |    |     |      |          |

PAGE TOTAL

\$ 1,310.00

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

**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><br><br>MEDIA DEMOCRATIC COMMITTEE | <b>Reporting Period</b><br><br><b>From:</b> <u>5/17/2016</u> <b>To:</b> <u>10/24/2016</u> |
|--|---|

|  |          |                                 |  | DATE | AMOUNT |      |             |
|--|----------|---------------------------------|--|------|--------|------|-------------|
| Full Name of Contributing Committee<br>MID COUNTY DEMOCRATIC COMMITTEE |          |                                 |  | MO   | DAY    | YEAR | \$ 192.71   |
| Mailing Address PO BOX 487   |          |                                 |  | 9    | 21     | 2016 |             |
| City LIMA  | State PA | Zip Code (Plus 4)<br>19037-0487 |  |      |        |      |             |
| Full Name of Contributing Committee<br>MID COUNTY DEMOCRATIC COMMITTEE |          |                                 |  | MO   | DAY    | YEAR | \$ 54.00    |
| Mailing Address PO BOX 487   |          |                                 |  | 9    | 21     | 2016 |             |
| City LIMA  | State PA | Zip Code (Plus 4)<br>19037-0487 |  |      |        |      |             |
| Full Name of Contributing Committee<br>MID COUNTY DEMOCRATIC COMMITTEE |          |                                 |  | MO   | DAY    | YEAR | \$ 19.00    |
| Mailing Address PO BOX 487   |          |                                 |  | 9    | 21     | 2016 |             |
| City LIMA  | State PA | Zip Code (Plus 4)<br>19037-0487 |  |      |        |      |             |
| Full Name of Contributing Committee<br>MID COUNTY DEMOCRATIC COMMITTEE |          |                                 |  | MO   | DAY    | YEAR | \$ 1,088.00 |
| Mailing Address PO BOX 487   |          |                                 |  | 9    | 21     | 2016 |             |
| City LIMA  | State PA | Zip Code (Plus 4)<br>19037-0487 |  |      |        |      |             |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 1,353.71       |

**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="margin-left: 100px;">To:</span> |

|  |       |                   | DATE              | AMOUNT  |
|--|-------|-------------------|-------------------|---------|
| Full Name of Contributor                             |       |                   | MO                | DAY     |
| Mailing Address                                      |       |                   | YEAR              | \$ 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 |
|                                       | 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.

|            |
|------------|
| PAGE TOTAL |
| \$ 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>                      |             |
| MEDIA DEMOCRATIC COMMITTEE   |  | From: <u>5/17/2016</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)  | \$ 86.00    |
| <b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>  |  |  |             |
| TOTAL for the Reporting Period   |  | (2)  | \$ 1,390.00 |
| <b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>  |  |  |             |
| TOTAL for the Reporting Period   |  | (3)  | \$ 3,700.00 |
| 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.) |  |  | \$ 5,176.00 |

**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                                    |
| MEDIA DEMOCRATIC COMMITTEE                   | <b>From:</b> <u>5/17/2016</u> <b>To:</b> <u>10/24/2016</u> |

|   |          |                         |  | DATE |     | AMOUNT |           |
|---|----------|-------------------------|--|------|-----|--------|-----------|
| Full Name of Contributor  |          |                         |  | MO   | DAY | YEAR   | \$ 80.00  |
| Salsa in the Suburbs  |          |                         |  | 9    | 1   | 2016   |           |
| Mailing Address 1245 N Providence Rd                                      |          |                         |  |      |     |        |           |
| City Media  | State PA | Zip Code (Plus 4) 19063 |  |      |     |        |           |
| Description of Contribution: Dance/Fitness Lessons                        |          |                         |  |      |     |        |           |
|   |          |                         |  |      |     |        |           |
| Full Name of Contributor  |          |                         |  | MO   | DAY | YEAR   | \$ 150.00 |
| Jeanne Wordley  |          |                         |  | 9    | 8   | 2016   |           |
| Mailing Address 402 W 3rd St  |          |                         |  |      |     |        |           |
| City Media  | State PA | Zip Code (Plus 4) 19063 |  |      |     |        |           |
| Description of Contribution: Framed Original Oil Painting                 |          |                         |  |      |     |        |           |
|   |          |                         |  |      |     |        |           |
| Full Name of Contributor  |          |                         |  | MO   | DAY | YEAR   | \$ 175.00 |
| Michele Daly  |          |                         |  | 9    | 8   | 2016   |           |
| Mailing Address 110 W Front St  |          |                         |  |      |     |        |           |
| City Media  | State PA | Zip Code (Plus 4) 19063 |  |      |     |        |           |
| Description of Contribution: Irish Basket of Cheer                        |          |                         |  |      |     |        |           |
|   |          |                         |  |      |     |        |           |
| Full Name of Contributor  |          |                         |  | MO   | DAY | YEAR   | \$ 200.00 |
| David J. Palmer   |          |                         |  | 9    | 8   | 2016   |           |
| Mailing Address 402 N Olive St  |          |                         |  |      |     |        |           |
| City Media  | State PA | Zip Code (Plus 4) 19063 |  |      |     |        |           |
| Description of Contribution: Framed Mosaic Portrait                       |          |                         |  |      |     |        |           |
|   |          |                         |  |      |     |        |           |
| Full Name of Contributor  |          |                         |  | MO   | DAY | YEAR   | \$ 150.00 |
| Media Veterinary Hospital   |          |                         |  | 8    | 31  | 2016   |           |
| Mailing Address 695 S Ridley Creek Rd                                     |          |                         |  |      |     |        |           |
| City Media  | State PA | Zip Code (Plus 4) 19063 |  |      |     |        |           |
| Description of Contribution: Pet Care Basket                              |          |                         |  |      |     |        |           |
|   |          |                         |  |      |     |        |           |
| Full Name of Contributor  |          |                         |  | MO   | DAY | YEAR   | \$ 30.00  |
| Fergy's Hair Salon  |          |                         |  | 9    | 2   | 2016   |           |
| Mailing Address 25 S Jackson St   |          |                         |  |      |     |        |           |
| City Media  | State PA | Zip Code (Plus 4) 19063 |  |      |     |        |           |
| Description of Contribution: Gift Certificate for Process Color Treatment |          |                         |  |      |     |        |           |

|  |                    |                                   |           |            |             |                                  |
|--|--------------------|-----------------------------------|-----------|------------|-------------|----------------------------------|
| <b>Full Name of Contributor</b><br>Fergy's Hair Salon  |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 14.00                         |
| <b>Mailing Address</b> 25 S Jackson St   |                    |                                   | 9         | 2          | 2016        |                                  |
| <b>City</b> Media  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19063 |           |            |             |                                  |
| <b>Description of Contribution:</b> Gift Certificate for Man's Haircut                                     |                    |                                   |           |            |             |                                  |
| <b>Full Name of Contributor</b><br>Fergy's Hair Salon  |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 35.00                         |
| <b>Mailing Address</b> 25 S Jackson St   |                    |                                   | 9         | 2          | 2016        |                                  |
| <b>City</b> Media  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19063 |           |            |             |                                  |
| <b>Description of Contribution:</b> Gift Certificate for Haircut with Color Service                        |                    |                                   |           |            |             |                                  |
| <b>Full Name of Contributor</b><br>Fergy's Hair Salon  |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 20.00                         |
| <b>Mailing Address</b> 25 S Jackson St   |                    |                                   | 9         | 2          | 2016        |                                  |
| <b>City</b> Media  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19063 |           |            |             |                                  |
| <b>Description of Contribution:</b> Gift Certificate for Kid's Haircut                                     |                    |                                   |           |            |             |                                  |
| <b>Full Name of Contributor</b><br>Emily Farrell   |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 200.00                        |
| <b>Mailing Address</b> 973 Oak Crest La  |                    |                                   | 9         | 6          | 2016        |                                  |
| <b>City</b> Media  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19063 |           |            |             |                                  |
| <b>Description of Contribution:</b> Gift Certificate for 2 hour session "Writing the College Essay"        |                    |                                   |           |            |             |                                  |
| <b>Full Name of Contributor</b><br>Sayre Dixon   |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 136.00                        |
| <b>Mailing Address</b> 22 E. 6th St  |                    |                                   | 9         | 8          | 2016        |                                  |
| <b>City</b> Media  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19063 |           |            |             |                                  |
| <b>Description of Contribution:</b> 4 Tickets to Hedgerow Theater  |                    |                                   |           |            |             |                                  |
| <b>Full Name of Contributor</b><br>David Krull   |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 200.00                        |
| <b>Mailing Address</b> 702 Centennial Ave  |                    |                                   | 9         | 9          | 2016        |                                  |
| <b>City</b> Media  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19063 |           |            |             |                                  |
| <b>Description of Contribution:</b> A round of golf for 3 at Springhaven County Club                       |                    |                                   |           |            |             |                                  |
| <b>Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.</b> |                    |                                   |           |            |             | <b>PAGE TOTAL</b><br>\$ 1,390.00 |

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

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b><br><br>MEDIA DEMOCRATIC COMMITTEE | <b>Reporting Period</b><br><br>From: <u>5/17/2016</u> To: <u>10/24/2016</u> |
|--|---|

|   |          |                        |             |                           | DATE |  | AMOUNT      |  |
|---|----------|------------------------|-------------|---------------------------|------|--|-------------|--|
| Full Name of Contributor<br>Frank W. Daly, Esq.   |          |                        |             | MO                        | DAY  | YEAR   | \$ 500.00   |  |
| Mailing Address 110 W Front St  |          |                        |             | 9                         | 7    | 2016   |             |  |
| City Media  | State PA | Zip Code(Plus 4) 19063 |             |                           |      |  |             |  |
| Employer of Contributor Self Employed   |          |                        |             | Occupation Lawyer         |      |  |             |  |
| Employer Mailing Address/Principal Place of Business<br>110 W Front St                              |          | City<br>Media          | State<br>PA | Zip Code(Plus 4)<br>19063 |      | Description of Contribution<br>Estate Planning Documents for a Couple. |             |  |
| Full Name of Contributor<br>Wendy Richards  |          |                        |             | MO                        | DAY  | YEAR   | \$ 2,000.00 |  |
| Mailing Address 8 E Front St Suite 1  |          |                        |             | 9                         | 6    | 2016   |             |  |
| City Red Bank   | State NJ | Zip Code(Plus 4) 07701 |             |                           |      |  |             |  |
| Employer of Contributor Kramer Portraits  |          |                        |             | Occupation Administrator  |      |  |             |  |
| Employer Mailing Address/Principal Place of Business<br>8 E Front St Suite 1                        |          | City<br>Red Bank       | State<br>NJ | Zip Code(Plus 4)<br>07701 |      | Description of Contribution<br>Gift Certificate for Portrait           |             |  |
| Full Name of Contributor<br>Wendy Richards  |          |                        |             | MO                        | DAY  | YEAR   | \$ 1,200.00 |  |
| Mailing Address 8 E Front St Suite 1  |          |                        |             | 9                         | 6    | 2016   |             |  |
| City Red Bank   | State NJ | Zip Code(Plus 4) 07701 |             |                           |      |  |             |  |
| Employer of Contributor Kramer Portraits  |          |                        |             | Occupation Administrator  |      |  |             |  |
| Employer Mailing Address/Principal Place of Business<br>8 E Front St Suite 1                        |          | City<br>Red Bank       | State<br>NJ | Zip Code(Plus 4)<br>07701 |      | Description of Contribution<br>Gift Certificate for Portrait           |             |  |
| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. |          |                        |             |                           |      | PAGE TOTAL<br>3,700.00   |             |  |

# SCHEDULE III STATEMENT OF EXPENDITURES

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                     |
| MEDIA DEMOCRATIC COMMITTEE                   | From <u>5/17/2016</u> To: <u>10/24/2016</u> |

|   |          |                              |   | DATE | AMOUNT |      |           |
|---|----------|------------------------------|---|------|--------|------|-----------|
| To Whom Paid<br>Jerry Ballas                    |          |                              |   | MO   | DAY    | YEAR | \$ 280.00 |
| Mailing Address 132 Traymore La                 |          |                              |   | 8    | 19     | 2016 |           |
| City Rose Valley                                | State PA | Zip Code (Plus 4) 19067      | Description of Expenditure<br>Reimbursement for Eagle Tickets       |      |        |      |           |
| To Whom Paid<br>Mid County Democratic Committee |          |                              |   | MO   | DAY    | YEAR | \$ 67.84  |
| Mailing Address PO Box 487                      |          |                              |   | 8    | 19     | 2016 |           |
| City Lima                                       | State PA | Zip Code (Plus 4) 19037-0487 | Description of Expenditure<br>Reimbursement for printing of tickets |      |        |      |           |
| To Whom Paid<br>Mid County Democratic Committee |          |                              |   | MO   | DAY    | YEAR | \$ 40.00  |
| Mailing Address PO Box 487                      |          |                              |   | 9    | 21     | 2016 |           |
| City Lima                                       | State PA | Zip Code (Plus 4) 19037-0487 | Description of Expenditure<br>Reimbursement for event band          |      |        |      |           |
| To Whom Paid<br>Deluxe Check Corporation        |          |                              |   | MO   | DAY    | YEAR | \$ 34.20  |
| Mailing Address 3680 Victoria St. North         |          |                              |   | 9    | 22     | 2016 |           |
| City Shoreview                                  | State MN | Zip Code (Plus 4) 55126      | Description of Expenditure<br>New Checks                            |      |        |      |           |
| To Whom Paid<br>David Krull                     |          |                              |   | MO   | DAY    | YEAR | \$ 240.89 |
| Mailing Address 702 Centennial Ave              |          |                              |   | 9    | 16     | 2016 |           |
| City Media                                      | State PA | Zip Code (Plus 4) 19063      | Description of Expenditure<br>Reimbursement for event insurance     |      |        |      |           |
| To Whom Paid<br>Friends of Diane Cornman-Levy   |          |                              |   | MO   | DAY    | YEAR | \$ 250.00 |
| Mailing Address PO Box 438                      |          |                              |   | 9    | 22     | 2016 |           |
| City Newtown Square                             | State PA | Zip Code (Plus 4) 19073-0438 | Description of Expenditure<br>Candidate Contribution                |      |        |      |           |

|   |                    |  |   |            |             |                  |
|---|--------------------|--|---|------------|-------------|------------------|
| <b>To Whom Paid</b><br>Friends of Martin Malloy |                    |  | <b>MO</b>   | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 250.00 |
| <b>Mailing Address</b> PO Box 1148              |                    |  | 9   | 22         | 2016        |                  |
| <b>City</b> Brookhaven                          | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19015-1148 | <b>Description of Expenditure</b><br>Candidate Contribution |            |             |                  |

|   |                    |                                   |   |            |             |                  |
|---|--------------------|-----------------------------------|---|------------|-------------|------------------|
| <b>To Whom Paid</b><br>Professional Duplicating, Inc. |                    |                                   | <b>MO</b>   | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 159.00 |
| <b>Mailing Address</b> 33 E. State St                 |                    |                                   | 7   | 11         | 2016        |                  |
| <b>City</b> Media                                     | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19063 | <b>Description of Expenditure</b><br>Sample Ballots |            |             |                  |

|  |                    |                                   |  |            |             |                 |
|--|--------------------|-----------------------------------|--|------------|-------------|-----------------|
| <b>To Whom Paid</b><br>James A. Ziegelhoffer |                    |                                   | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 32.54 |
| <b>Mailing Address</b> 402 W 3rd St          |                    |                                   | 10   | 24         | 2016        |                 |
| <b>City</b> Media                            | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19063 | <b>Description of Expenditure</b><br>US Postage Stamps & Postage for Certified Letters |            |             |                 |

|  |                    |                                   |  |            |             |                 |
|--|--------------------|-----------------------------------|--|------------|-------------|-----------------|
| <b>To Whom Paid</b><br>Matt Washlick             |                    |                                   | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 94.34 |
| <b>Mailing Address</b> 1050 Airport Rd Unit 2203 |                    |                                   | 8  | 9          | 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>Reimbursement for CD record of voters |            |             |                 |

|  |  |  |  |  |  |                    |
|--|--|--|--|--|--|--------------------|
| <b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b> |  |  |  |  |  | <b>PAGE TOTAL</b>  |
|  |  |  |  |  |  | <b>\$</b> 1,448.81 |

