Campaign Finance Report

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

| Filer Identificati Number : | on 2002 | 365 | | | Rep File | oort | | CANE | DIDA | ATE | С | ОММ | ITTEE | | LOB | BYIST | ✓ | |
|--|---|-------------|------------------------|---------|-------------|-------|--------|------------------|--------------|---------|----------|--------|--------------------|----------------|----------|----------|----------|----------|
| Name of Filing C | Committee, Candid | ate or Lo | obbyist: | | DAN | IIEL | J. RE | ISTETE | R | | | | | | | | | |
| Street Address: | 3897 N. FRON | IT ST. | | | | | | | | | | | | | | | | |
| City: | HARRISBURG | | | | | | | State: | P | Α | | | Zip Cod | le: 17 | 7110 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. X | 2ND FRIDA' PRIMARY | Y PRE | - 2 | 2. | 30 DA | | POS | ST- 3 | | | AMENDM REPORT? | | Yes V | | | |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDA' ELECTION | y pre | =- ! | 5. | 30 DA | | POS | ST- 6 | | | TERMINA REPORT? | | Yes | No | | \ |
| report type) | ANNUAL REPORT | 7. | Year 2017 | | | | | NG METI CHECK | | | | | PAPER | | \ | DISKE | TTE | |
| Name of Office S | - Sought by Candida | te: | | | | | | DATE | OF I | ELECT | ΓΙΟΝ | | District Number | Office Code | Pa | rty Code | Coun | |
| | | | | | | | | МО | D | AY | YEAR | ≀ | Number | Touc | | | Louis | |
| | | | | | | | | 1 | 1 | 7 | 2 | 017 | | (SEE IN | STRUCTI | ONS FOR | CODES |) |
| | Receipts and | МО | DAY | YEAR | ł | | | МО | D. | AY | YEAR | 2 | FO | R OFFI | CE USE | ONLY | | |
| Expenditures | from: | | 1 1 | 2 | 017 | Т | 0 | | 3 | 27 | 2 | 017 | | | | | | |
| A. Amount Bro | ught Forward Fron | n Last R | eport | | | | \$ | | | | 0 | 0.00 | | | | | | |
| B. Total Monet | ary Contributions | And Rec | eipts (From | Sche | dule | 1) | \$ | | | | 0 | 0.00 | | | | | | |
| C. Total Funds | C. Total Funds Available (Sum Of Lines A and B) \$ 0.00 | | | | | | | | | | | | | | | | | |
| D. Total Expen | ditures (From Scho | edule II | I) | | | | \$ | | | | 425 | 5.00 | | | | | | |
| E. Ending Cash | Balance (Subtract | Line D | From Line (| C) | | | \$ | | | | 0 | .00 | | | | | | |
| F. Value Of In- | Kind Contributions | Receiv | ed (From So | chedu | le II |) | \$ | | | | 0 | .00 | | | | | | |
| G. Unpaid Debt | ts And Obligations | (From S | Schedule IV |) | | | \$ | | | | 0 | 0.00 | | | | | | |
| | | | | AFF | IDA | ١٧٧ | T SE | CTION | 1 | | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, trea | surer sign l | here. I | If thi | is is | a Car | ndidate | repo | ort, ca | ndidat | e sig | n here. | | | | | |
| I swear (or affirm) correct and comple |) that this report, incl ete. | uding the | attached sch | nedules | s filed | d on | paper | or by ele | ctron | nic med | ium, ar | e to t | he best of | f my kno | wledge | and beli | ef , tr | ue. |
| Sworn to and subs | cribed before me this day of | i | 20 | | | | | | | | Sign | ature | of Persor | 1 Submit | ting Re | port | | _ |
| | - Cianatu | | | | | | - - | | _ | | | | Print | ted Name | • | | | - |
| My Commission Ex | Signatu kpires | ie | | | | | | | Email | | | | | | | | - | |
| | мо | D | AY | YR | | | | | | Area | Code | | Daytim | e Teleph | ione Nu | mber | | _ |
| Part II- If this is | a report of a cand | lidate's | authorized | Comn | nitte | e, C | andid | ate sha | ll sig | n her | e. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of n | ny knowle | edge and beli | ef this | polit | ical | comm | ittee has | not v | violate | d any pi | rovisi | ons of the | e act of J | une 3,1 | 937 (P.L | . 1333 | 3, |
| Sworn to and subsc | ribed before me this | | | | | | | | _ | | | Si | gnature o | f Candid | ate | | | - |
| | day of | | | | | | _ | | Printed Name | | | | | | | | - | |
| | Signature | | | | | | - | | _ | | | | | | | | | _ |
| My Commission Exp | _ | | | | | | | | | | | | Emai | il | | | | |
| | МО | D | AY | YR | l | | - | | - | Area Co | ode | | Da | ytime T | elepho | ne Numb | er | - |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | g Period | | |
|--|-----------|----------|--------------|-----------|
| DANIEL J. REISTETER | From: | 1/1/201 | <u>7</u> To: | 3/27/2017 |
| 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) | _ | | \$ | 0.00 |
| All Other Contributions (Part B) | | | \$ | 0.00 |
| TOTAL for the Reporting | Period | (2) | \$ | 0.00 |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 0.00 |
| All Other Contributions (Part D) | | | \$ | 0.00 |
| TOTAL for the Reporting |) Period | (3) | \$ | 0.00 |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) | | | | |
| TOTAL for the Reporting |) Period | (4) | \$ | 0.00 |
| | | | | |
| Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa | | | \$ | 0.00 |

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

| | this Part to itemize onl with an aggregate value | | \$2 | |) in the | | | |
|---------------------------------------|--|-------------------|-------|----|----------|------|----|------------|
| Name of Filing Committee or Candidate | | | From: | | | То | : | |
| | | | | | DATE | | | AMOUNT |
| Full Name of Contribut | ing Committee | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) |) | | | | | |
| | ! | I | ! | | <u> </u> | | | DAGE TOTAL |

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

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

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 Filling Committee of Candidate | | | | Reporting Period From: To: | | | | |
|--|-------|-------------------|---|----------------------------|------|------|----|--------|
| | | | l | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| 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 C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

| Name of Filing Committee or Candidate | | | Reporting | Period | | | | |
|---------------------------------------|-----------------------|----------|-------------|--------|-----|------|----|------------|
| | | | From: | | | То: | | |
| | | | | DA | TE | | А | MOUNT |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Cod | e (Plus 4) | | | | | |
| | | | | | | | | PAGE TOTAL |
| Enter Grand Total of Part C on Scho | edule I, Detailed Sun | nmary Pa | age, Sectio | n 3. | | | \$ | 0.00 |

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

| Name of Filing Committee or Candidate | | | Reporting Period | | | | | |
|---------------------------------------|----------------|--------------|-------------------------|---------------------------------|--|--|---|--|
| | | Fron | n: | | То | То: | | |
| | | | D/ | ATE | | АМ | OUNT | |
| | | | МО | DAY | YEAR | | | |
| | | | | | | \$ | 0.00 | |
| State | Zip Code (Plus | s 4) | | | | | | |
| | | | Occupat | tion | | | | |
| e of | City | | | State | | Zip Code | (Plus 4) | |
| dule I, Detailed Su | ımmary Page, | Section | on 3. | | | | GE TOTAL 0.00 | |
| | e of | e of City | State Zip Code (Plus 4) | State Zip Code (Plus 4) Occupat | State Zip Code (Plus 4) Occupation Other State | State Zip Code (Plus 4) Occupation Occupation Other State Occupation Output Outp | DATE AM MO DAY YEAR \$ State Zip Code (Plus 4) Occupation City State Zip Code | |

OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

| Name of Filing Committee or | Candidate | | Report | ing Perio | od | | | | |
|-----------------------------|-------------------------|-----------------|---------|-----------|-----|------|----|---------|------|
| | | | From: | | | To: | | | |
| | | | | D | ATE | | | AMOUNT | |
| Full Name | | | | мо | DAY | YEAR | 1 | | |
| Mailing Address | | | | | | | \$ | | 0.00 |
| City | State | Zip Code (| Plus 4) | | | | | | |
| Receipt Description | · | · | | • | | | • | | |
| Enter Grand Total of Part E | on Schedule I. Detailer | l Summary Page. | Section | 4. | | | | PAGE TO | ΓAL |
| - Communication of the Ex | Januara 1/ Betained | . Jaai y 1 ago, | Section | •• | | | \$ | | 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 Period | I | |
|--|------------------|----------------------------|-----------|
| DANIEL J. REISTETER | From: | <u>1/1/2017</u> To: | 3/27/2017 |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | PER CONTRIBUTOR | | |
| TOTAL for the Reporting Pe | eriod (1) | \$ | 0.00 |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR | T F) | | |
| TOTAL for the Reporting Pe | eriod (2) | \$ | 0.00 |
| 3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G) | | | |
| TOTAL for the Reporting Pe | eriod (3) | \$ | 0.00 |
| TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, | • | \$ | 0.00 |

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Candidat | me of Filing Committee or Candidate | | | | | | |
|--------------------------------------|---|----------------------|----------|----------|-------|-----------|------------|
| | | | From: | | | To: | |
| | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | |
| Description of Contribution: | | | | | | | |
| Enter Grand Total of Part F on Sch | edule II, In-Kin | d Contributions Deta | iled Sum | mary Pac | ie, F | | PAGE TOTAL |
| Section 2. | , | | | , | | \$ | 0.00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | | | | | Reporting | Period | | | |
|---|-------------|--------|---------------|------|-----------|-----------|--------|-------|-----------------|
| | | | | | From: | | То: | | |
| | | | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 0.00 |
| City | State | | Zip Code(Plus | 4) | | | | | |
| Employer of Contributor | | | | | Occupa | ation | | | |
| Employer Mailing Address/Principal Plad Business | ce of | City | Sta | ite | Zip 4) | Code(Plus | Descri | ption | of Contribution |
| Enter Grand Total of Part G on Sch | edule II, I | n-Kind | Contributions | Deta | ailed | | | | PAGE TOTAL |
| Summary Page, Section 3. | | | | | | | | | 0.00 |

STATEMENT OF EXPENDITURES

| Name of Filing Committee or C | andidate | | Reporting Period | | | | | |
|--|--------------------|--------------------------------|------------------|--------------------------|------|----|--------|--|
| DANIEL J. REISTETER | | | | From <u>1/1/2017</u> To: | | | | |
| | | | | DATE | | | AMOUNT | |
| To Whom Paid ED MARSICO FOR JUDGE | | | | DAY | YEAR | | | |
| Mailing Address P.O. BOX 1 | 1581 | | 1 | 30 | 2017 | \$ | 400.00 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 17109 | - I | otion of Exp | | | | |
| To Whom Paid PA BANKERS PUBLIC AFFAIRS COMMITTEE | | | МО | DAY | YEAR | | | |

| THE BRITAIN OF THE PROPERTY OF | | | | | | | |
|--|-------|-------------------|----------------------------|---------|------|----|-------|
| Mailing Address 3987 NORTH FRONT STREET | | | 3 | 10 | 2017 | \$ | 25.00 |
| City HARRISBURG | State | Zip Code (Plus 4) | Description of Expenditure | | | | |
| | ΙDΛ | 17110 | I CONTR | TRUTTON | | | |

| | PAGE TOTAL |
|---|--------------|
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | \$ 425.00 |
| | |