### **Campaign Finance Report**

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

| Filer Identificati<br>Number :                                     | on 9300  | 0017       |                      |           | Rep<br>File |       |        | CANE             | DID      | ATE    |       | СОМ        | 4ITTEE               | <b>✓</b>       | LOB      | BYIST   |          |          |
|--|--|------------|----------------------|-----------|-------------|-------|--------|------------------|----------|--------|-------|------------|----------------------|----------------|----------|---------|----------|----------|
| Name of Filing C   | ommittee, Candid                               | late or L  | obbyist:             |           | HOU         | ISE   | REPU   | BLICAN           | I CA     | MPA    | GN (  | COMMI      | TTEE                 |                |          |         |          |          |
| Street Address:  | 500 N. THIRI                                   | ) STREE    | T, 4TH FLO           | OOR,P.    | О. В        | ОХ    | 1178   | 7                |          |        |       |            |                      |                |          |         |          |          |
| City:  | HARRISBURG                                     | ;          |                      |           |             |       |        | State:           | F        | PA     |       |            | Zip Cod              | <b>ie:</b> 17  | 108      |         |          |          |
| TYPE OF<br>REPORT  | 6TH TUESDAY<br>PRE-PRIMARY                     | 1.         | 2ND FRIDA<br>PRIMARY | AY PRE    | - 2         | 2.    | 30 DA  |                  | POST- 3. |        |       |            | AMENDMENT<br>REPORT? |                | Yes      | N       | 0        | <b>\</b> |
| (place X to<br>the right of  | 6TH TUESDAY<br>PRE-ELECTION                    | 4.         | 2ND FRIDA            | AY PRE    | Ē- 5        | 5.    | 30 DA  |                  | РО       | ST-    | 6.    |            | TERMINA<br>REPORT    |                | Yes      | N       | O        | <b>√</b> |
| report type)   | ANNUAL REPORT                                  | 7.         | <b>Year</b> 2017     | 7         |             |       |        | NG METI<br>CHECK |          |        |       |            | PAPER                |                | <b>\</b> | DISK    | ETTE     |          |
| Name of Office S   | ought by Candida                               | ate:       | -                    |           |             |       |        | DATE             | OF       | ELEC   | TIO   | N          | District<br>Number   | Office<br>Code | Par      | ty Code | Cour     |          |
|  |  |            |                      |           |             |       |        | МО               | C        | DAY    | YE    | AR         |                      |                | REF      | )       | 22       |          |
|  |  |            |                      |           |             |       |        | 1                | .1       |        | 7     | 2017       |                      | (SEE IN        | STRUCTI  | ONS FOR | CODES    | )        |
| Summary of   |  | МО         | DAY                  | YEAR      | 2           |       |        | МО               | [        | DAY    | YE    | AR         | FO                   | R OFFIC        | E USE    | ONLY    |          |          |
| Expenditures   | from:  |            | 1                    | 1         | 1           | T     | 0      |                  | 1        |        | 1     | 1          |                      |                |          |         |          |          |
| A. Amount Bro  | ught Forward Fro                               | m Last R   | eport                |           | ·           |       | \$     |                  |          | 2      | 243,8 | 364.28     |                      |                |          |         |          |          |
| B. Total Moneta  | ary Contributions                              | And Rec    | eipts (Fro           | m Sche    | dule        | I)    | \$     |                  |          |        | 49,2  | 259.78     |                      |                |          |         |          |          |
| C. Total Funds Available (Sum Of Lines A and B) \$ 293,124.06      |  |            |                      |           |             |       |        |                  |          |        |       |            |                      |                |          |         |          |          |
| D. Total Expenditures (From Schedule III) \$ 115,750.58            |  |            |                      |           |             |       |        |                  |          |        |       |            |                      |                |          |         |          |          |
| E. Ending Cash Balance (Subtract Line D From Line C) \$ 177,373.48 |  |            |                      |           |             |       |        |                  |          |        |       |            |                      |                |          |         |          |          |
| F. Value Of In-  | Kind Contribution                              | s Receiv   | ed (From S           | Schedu    | le II       | )     | \$     |                  |          |        |       | 0.00       |                      |                |          |         |          |          |
| G. Unpaid Debt   | s And Obligations                              | (From S    | Schedule I           | V)        |             |       | \$     |                  |          |        |       | 0.00       |                      |                |          |         |          |          |
|  |  |            |                      | AFF       | IDA         | VI    | T SE   | CTIO             | ١        |        |       |            |                      |                |          |         |          |          |
| PART I - If this is  | a Committee rep                                | ort, trea  | surer sign           | here.     | If thi      | is is | a Car  | ndidate          | rep      | ort, c | andi  | date sig   | ın here.             |                |          |         |          |          |
| I swear (or affirm) correct and comple                             | that this report, inc<br>ete.                  | luding the | e attached s         | chedules  | s filed     | l on  | paper  | or by ele        | ctro     | nic me | dium  | , are to t | he best o            | f my knov      | vledge   | and bel | ief , tr | ue       |
| Sworn to and subs  | cribed before me thi<br>day of                 | is         | 20                   |           |             |       |        |                  | -        |        | s     | ignature   | of Perso             | n Submitt      | ing Re   | oort    |          | _        |
|  | Signati  | ure        |                      |           |             |       | -<br>- |                  | -        |        |       |            | Prin                 | ted Name       | ı        |         |          |          |
| My Commission Ex   | pires  |            |                      |           |             |       | _      |                  | _        |        |       |            | Ema                  | il             |          |         |          |          |
|  | МО   | D          | AY                   | YR        |             |       |        |                  |          | Are    | a Cod | le         | Daytim               | e Teleph       | one Nu   | mber    |          |          |
| Part II- If this is  | a report of a can                              | didate's   | authorized           | d Comn    | nitte       | e, C  | andid  | ate sha          | II si    | gn he  | re.   |            |                      |                |          |         |          |          |
| I swear (or affirm)<br>No 320) as amende                           | that to the best of                            | my knowle  | edge and be          | lief this | polit       | ical  | comm   | ittee has        | not      | violat | ed an | y provis   | ions of th           | e act of Ju    | ıne 3,1  | 937 (P. | L. 133   | з,       |
| Sworn to and subsc   |  | i          |                      |           |             |       |        |                  | -        |        |       | s          | ignature o           | of Candida     | ite      |         |          | -        |
|  | day of<br>———————————————————————————————————— |            |                      |           |             |       | _      |                  | -        |        |       |            | Printe               | d Name         |          |         |          | -        |
|  | Signature                                      |            |                      |           |             |       | -      |                  | _        |        |       |            |                      | -              |          |         |          | _        |
| My Commission Exp  | ires   |            |                      |           |             |       |        |                  |          |        |       |            | Ema                  | il             |          |         |          |          |
|  | мо   | D          | AY                   | YR        |             |       | -      |                  | _        | Area ( | Code  |            | Da                   | aytime To      | elephor  | e Num   | ber      | _        |

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

| Name of Filing Committee or Candidate  | Reporting Period |     |           |
|--|------------------|-----|-----------|
| HOUSE REPUBLICAN CAMPAIGN COMMITTEE  | From:            | То: |           |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor  |                  |     |           |
| TOTAL for the Reporting  | Period (1)       | \$  | 75.00     |
| 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)  |                  |     |           |
| Contributions Received From Political Committees (Part A)  | -                | \$  | 2,350.00  |
| All Other Contributions (Part B)   |                  | \$  | 377.39    |
| TOTAL for the Reporting  | Period (2)       | \$  | 2,727.39  |
| 3. Contributions Received Over \$250.00 (From Part C and Part D)   |                  |     |           |
| Contributions Received From Political Committees (Part C)  |                  | \$  | 31,757.39 |
| All Other Contributions (Part D)   |                  | \$  | 14,700.00 |
| TOTAL for the Reporting  | Period (3)       | \$  | 46,457.39 |
| 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 |                  | \$  | 49,259.78 |

#### 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 |     |      |      |                  |        |
|---|--------------------|-----------------------------------|------------------|-----|------|------|------------------|--------|
| HOUSE REPUBLICAN CAMPAIGN COM   | MITTEE             |                                   | Fro              | om: |      | To:  | <u>:</u>         |        |
|   |                    | I.                                |                  |     | DATE |      |                  | AMOUNT |
| Full Name of Contributing Committee VERIZON PA STATE PAC              |                    |                                   |                  | мо  | DAY  | YEAR |                  |        |
| Mailing Address 417 WALNUT STF  | REET 1ST FLOOR     |                                   |                  | 3   | 21   | 2017 | \$               | 250.00 |
| City HARRISBURG   | <b>State</b><br>PA | Zip Code (Plus 4<br>17101         | 4)               |     |      |      |                  |        |
| Full Name of Contributing Committee PPL PEOPLE FOR GOOD GOV'T STATE A | CCOUNT             |                                   |                  | МО  | DAY  | YEAR |                  |        |
| Mailing Address TWO N. NINTH S  |                    |                                   |                  | 3   | 13   | 2017 | <b> </b><br>  \$ | 250.00 |
| City ALLENTOWN  | <b>State</b><br>PA | Zip Code (Plus 4                  | 4)               | 3   | 13   | 2017 |                  |        |
| Full Name of Contributing Committee PA CABLE PAC                      |                    |                                   |                  | МО  | DAY  | YEAR |                  |        |
| Mailing Address 127 STATE STRE  | ĒΤ                 |                                   |                  | 3   | 15   | 2017 | <b>\$</b>        | 250.00 |
| City HARRISBURG   | <b>State</b><br>PA | Zip Code (Plus 4                  | 4)               | J   | 13   | 2017 |                  |        |
| Full Name of Contributing Committee HIGHMARK HEALTH PAC               |                    |                                   |                  | МО  | DAY  | YEAR |                  |        |
| Mailing Address 1800 CENTER ST  | REET               |                                   |                  | 3   | 8    | 2017 | \$               | 250.00 |
| City CAMP HILL  | <b>State</b><br>PA | <b>Zip Code (Plus</b> 4 170890089 | 4)               | -   |      |      |                  |        |
| Full Name of Contributing Committee FRIENDS OF TOM MEHAFFIE           |                    |                                   |                  | мо  | DAY  | YEAR |                  |        |
| Mailing Address P O BOX 414   |                    |                                   |                  | 3   | 21   | 2017 | <b> </b><br>  \$ | 250.00 |
| City HARRISBURG   | <b>State</b><br>PA | Zip Code (Plus 4<br>17108         | 4)               | 3   | 21   | 2017 |                  |        |
| Full Name of Contributing Committee COMM. TO RE- ELECT SANDRA MAJOR   | REPRESENTATIVE     |                                   |                  | МО  | DAY  | YEAR |                  |        |
| Mailing Address 361 S SHORE LAI                                       | NE                 |                                   |                  | 3   | 21   | 2017 | <b> </b> \$      | 250.00 |
| City BRACKNEY   | <b>State</b><br>PA | Zip Code (Plus 4                  | 4)               | 3   | 21   | 2017 |                  |        |
| Full Name of Contributing Committee CITIZENS FOR JASON ORTITAY        |                    |                                   |                  | мо  | DAY  | YEAR |                  |        |
| Mailing Address 228 OSTOP ROAD  |                    |                                   | 3                | 21  | 2017 | \$   | 100.00           |        |
| City BURGETTSTOWN   | <b>State</b><br>PA | Zip Code (Plus 4                  | 4)               | 5   | 21   | 2017 |                  |        |

| Full Name of Contri CERTIFIED PUBLIC                        | buting Committee<br>ACCOUNTANTS PAC |                   |                                   | МО | DAY  | YEAR             |                  |
|---|-------------------------------------|-------------------|-----------------------------------|----|------|------------------|------------------|
| Mailing Address   | 500 NORTH 3RD                       | STREET SUITE 600A | 1                                 | 3  | 21   | 2017             | <b>\$</b> 250.00 |
| City HARRISBUR  | RG                                  | State             | Zip Code (Plus 4)                 | ]  | 21   | 2017             |                  |
|   |                                     | PA                | 17101                             |    |      |                  |                  |
| Full Name of Contributing Committee BRAVO PAC               |                                     |                   |                                   |    | DAY  | YEAR             |                  |
| Mailing Address 20 NORTH MARKET STREET SUITE 800            |                                     |                   | 3                                 | 15 | 2017 | <b>\$</b> 250.00 |                  |
| City HARRISBUR  | RG                                  | State<br>PA       | <b>Zip Code (Plus 4)</b><br>17101 | 3  | 13   | 2017             |                  |
| Full Name of Contributing Committee BETTER PENNSYLVANIA PAC |                                     |                   |                                   | МО | DAY  | YEAR             |                  |
| Mailing Address 121 STATE STREET                            |                                     |                   | 3                                 | 15 | 2017 | <b>\$</b> 250.00 |                  |
| City HARRISBUR  | RG                                  | State             | Zip Code (Plus 4)                 |    | 15   |                  |                  |
|   |                                     | PA                | 17101                             |    |      |                  |                  |

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

**PAGE TOTAL**\$ 2,350.00

### 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 Cand    | ne of Filing Committee or Candidate |                  |             |    |     | Reporting Period |                  |  |  |  |  |
|-------------------------------------|-------------------------------------|------------------|-------------|----|-----|------------------|------------------|--|--|--|--|
| HOUSE REPUBLICAN CAMPAIGN           | COMMITTEE                           |                  | Fro         | m: |     | То               | <b>)</b> :       |  |  |  |  |
|                                     |                                     |                  | DATE AMOUNT |    |     |                  |                  |  |  |  |  |
| Full Name of Contributor            |                                     |                  |             | МО | DAY | YEAR             |                  |  |  |  |  |
| JONATHAN A. FRITZ                   | NATHAN A. FRITZ                     |                  |             |    |     |                  |                  |  |  |  |  |
| Mailing Address 101 BEECHNUT ROAD   |                                     |                  |             |    |     |                  | <b>\$</b> 250.00 |  |  |  |  |
| City HONESDALE                      | State                               | Zip Code (Plus 4 | 1)          | 3  | 8   | 2017             |                  |  |  |  |  |
|                                     | PA                                  | 18431            |             |    |     |                  |                  |  |  |  |  |
| Full Name of Contributor            |                                     |                  |             | мо | DAY | YEAR             |                  |  |  |  |  |
| RYAN STEVENS                        |                                     |                  |             |    |     | 1 27 11 1        |                  |  |  |  |  |
| Mailing Address 2216 BUCKHORN DRIVE |                                     |                  |             |    |     |                  | <b>\$</b> 127.39 |  |  |  |  |
| City EAST STROUDSBURG               | State                               | Zip Code (Plus 4 | 1)          | 3  | 17  | 2017             |                  |  |  |  |  |
|                                     | PA                                  | 18302            |             |    |     |                  |                  |  |  |  |  |
|                                     |                                     |                  |             |    |     |                  | PAGE TOTAL       |  |  |  |  |

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

377.39

#### **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           | me of Filing Committee or Candidate Repo |                   |            |      |      | orting Period |                    |  |  |  |
|---|--|-------------------|------------|------|------|---------------|--------------------|--|--|--|
| HOUSE REPUBLICAN CAMPAIGN COMMI                 | TTEE                                     |                   | From:      |      |      | То:           |                    |  |  |  |
|   |  |                   |            | DA   | TE   |               | AMOUNT             |  |  |  |
| Full Name of Contributing Committee             |  |                   |            | мо   | DAY  | YEAR          |                    |  |  |  |
| BENNINGHOFF FOR REPRESENTATIVE                  |  |                   |            |      | 2711 |               | \$ 2,000.00        |  |  |  |
| Mailing Address 328 E. LAMB STREET              | -  |                   |            | 3    | 27   | 2017          | ·                  |  |  |  |
| City BELLEFONTE                                 | State                                    | Zip Cod           | e (Plus 4) |      |      |               |                    |  |  |  |
|   | PA                                       | 16823             |            |      |      |               |                    |  |  |  |
| Full Name of Contributing Committee             |  |                   |            | мо   | DAY  | YEAR          |                    |  |  |  |
| COMMITTEE TO ELECT BRIAN ELLIS                  |  |                   |            |      |      |               | <b>\$</b> 5,000.00 |  |  |  |
| Mailing Address 103 DEER RUN DRIV               | g Address 103 DEER RUN DRIVE             |                   |            |      | 29   | 2017          | ·                  |  |  |  |
| City BUTLER                                     | State                                    | Zip Code (Plus 4) |            | . 3  |      |               |                    |  |  |  |
|   | PA                                       | 16001             |            |      |      |               |                    |  |  |  |
| Full Name of Contributing Committee             |  | мо                | DAY        | YEAR |      |               |                    |  |  |  |
| COMMONWEALTH GAMING PAC                         |  |                   |            |      |      | 12711         | <b>\$</b> 1,000.00 |  |  |  |
| Mailing Address 40 E. HINSDALE AVENUE SUITE 204 |  |                   |            | 3    | 15   | 2017          | ·                  |  |  |  |
| City HINSDALE                                   | State                                    | Zip Cod           | e (Plus 4) |      |      |               |                    |  |  |  |
|   | IL                                       | 60521             |            |      |      |               |                    |  |  |  |
| Full Name of Contributing Committee             |  |                   |            | мо   | DAY  | YEAR          |                    |  |  |  |
| EXELONPAC                                       |  |                   |            | 140  | DAI  | ILAK          | <b>\$</b> 500.00   |  |  |  |
| Mailing Address 200 EXELON WAY S                | UITE 340                                 |                   |            | 3    | 29   | 2017          |                    |  |  |  |
| City KENNETT SQUARE                             | State                                    | Zip Cod           | e (Plus 4) |      | -5   |               |                    |  |  |  |
|   | PA                                       | 19348             |            |      |      |               |                    |  |  |  |
| Full Name of Contributing Committee             |  |                   |            | мо   | DAY  | YEAR          |                    |  |  |  |
| FRIENDS OF DAVE REED                            |  |                   |            |      |      | 12/11         | <b>\$</b> 1,000.00 |  |  |  |
| Mailing Address P O BOX 1440                    |  |                   |            | 3    | 8    | 2017          | ·                  |  |  |  |
| City INDIANA                                    | State                                    | Zip Cod           | e (Plus 4) |      |      |               |                    |  |  |  |
|   | PA                                       | 15701             |            |      |      |               |                    |  |  |  |
| Full Name of Contributing Committee             |  |                   |            | МО   | DAY  | YEAR          |                    |  |  |  |
| FRIENDS OF JEFF PYLE                            | FRIENDS OF JEFF PYLE                     |                   |            | 1.10 |      | ILAK          | <b>\$</b> 457.39   |  |  |  |
| Mailing Address P O BOX 347                     |  |                   |            | 3    | 13   | 2017          |                    |  |  |  |
| City FORD CITY                                  | State                                    | Zip Cod           | e (Plus 4) | ]    | "    | 2017          |                    |  |  |  |
|   | PA                                       | 162260            | 227        |      |      |               |                    |  |  |  |

|  |             |                   |      |       |      | 17102 /            |
|--|-------------|-------------------|------|-------|------|--------------------|
| Full Name of Contributing Comm               | nittee      |                   | МО   | DAY   | YEAR | 2,000,00           |
| Mailing Address 409 UPPER                    | DEMUND ROAD |                   | 2    | 22    | 2017 | \$ 2,000.00        |
| City DALLAS                                  | State       | Zip Code (Plus 4) | 3    | 22    | 2017 |                    |
|  | PA          | 18612             |      |       |      |                    |
| Full Name of Contributing Comm               | nittee      | -                 | мо   | DAY   | YEAR |                    |
| FRIENDS OF KURT MASSER                       |             |                   | 140  | J DAI | IZAK | \$ 2,000.00        |
| Mailing Address 57 MOUNTA                    | AIN RD      |                   | 3    | 29    | 2017 |                    |
| City SHAMOKIN                                | State       | Zip Code (Plus 4) |      |       |      |                    |
|  | PA          | 17872             |      |       |      |                    |
| Full Name of Contributing Comm               | nittee      |                   | мо   | DAY   | YEAR |                    |
| FRIENDS OF KURT MASSER                       |             |                   |      |       |      | <b>\$</b> 1,000.00 |
| Mailing Address 57 MOUNTA                    | AIN RD      |                   | 3    | 29    | 2017 |                    |
| City SHAMOKIN                                | State       | Zip Code (Plus 4) |      | -     |      |                    |
|  | PA          | 17872             |      |       |      |                    |
| Full Name of Contributing Comm               | nittee      |                   | МО   | DAY   | YEAR |                    |
| FRIENDS OF MARCY TOEPEL                      |             |                   |      |       | ILAN | <b>\$</b> 1,000.00 |
| Mailing Address 923 KULP R                   | OAD         |                   | 3    | 13    | 2017 |                    |
| City PERKIOMENVILLE                          | State       | Zip Code (Plus 4) |      |       |      |                    |
|  | PA          | 18074             |      |       |      |                    |
| Full Name of Contributing Comm               | мо          | DAY               | YEAR |       |      |                    |
| FRIENDS OF MARCY TOEPEL                      |             |                   | 140  | DAI   | ILAK | <b>\$</b> 250.00   |
| Mailing Address 923 KULP R                   | OAD         |                   | 3    | 29    | 2017 |                    |
| City PERKIOMENVILLE                          | State       | Zip Code (Plus 4) |      | -     |      |                    |
|  | PA          | 18074             |      |       |      |                    |
| Full Name of Contributing Comm               | nittee      |                   | мо   | DAY   | YEAR |                    |
| FRIENDS OF STEPHEN BARRAF                    | र           |                   | 1-10 | DAI   | ILAK | <b>\$</b> 500.00   |
| Mailing Address P O BOX 58                   | 5           |                   | 3    | 10    | 2017 |                    |
| City CHADDS FORD                             | State       | Zip Code (Plus 4) | ]    |       | 2017 |                    |
|  | PA          | 19317             |      |       |      |                    |
| Full Name of Contributing Comm               | nittee      |                   | МО   | DAY   | YEAR |                    |
| GREENLEE PARTNERS STATE P                    | PAC         |                   | 1-10 | DAI   | ILAK | <b>\$</b> 1,000.00 |
| Mailing Address P.O. BOX 29                  | 91          |                   | 3    | 15    | 2017 | ,                  |
| City HARRISBURG                              | State       | Zip Code (Plus 4) |      |       |      |                    |
|  | PA          | 17108             |      |       |      |                    |
| Full Name of Contributing Committee          |             |                   | МО   | DAY   | YEAR |                    |
| HAPAC  |             |                   | 140  | DAT   | ILAK | <b>\$</b> 5,000.00 |
| Mailing Address 30 N. THIRD STREET SUITE 600 |             |                   | 3    | 22    | 2017 |                    |
| City HARRISBURG                              | State       | Zip Code (Plus 4) | ]    |       |      |                    |
|  | PA          | 17101             |      |       |      |                    |
|  |             |                   |      |       |      |                    |

|                                      |                                   |                   |      |     |      | PAGL 8                                  |
|--------------------------------------|-----------------------------------|-------------------|------|-----|------|---|
| Full Name of Contributing Com        | mittee                            |                   | мо   | DAY | YEAR |   |
| INT'L UNION OF OPERATING E           | ENGINEERS LOCAL 542 PA            | AC .              |      |     |      | <b>\$</b> 500.00                        |
| Mailing Address 1375 VIRG            | INIA DRIVE SUITE 100              |                   | 3    | 8   | 2017 |   |
| City FORT WASHINGTON                 | State                             | Zip Code (Plus 4) |      |     |      |   |
|                                      | PA                                | 19034             |      | 1   |      |   |
| Full Name of Contributing Com        | mittee                            |                   | мо   | DAY | YEAR |   |
| LAWPAC                               |                                   |                   | -10  |     |      | <b>\$</b> 1,500.00                      |
| Mailing Address 212 N. THI           | RD ST SUITE 203                   |                   | 3    | 21  | 2017 | ·                                       |
| City HARRISBURG                      | State                             | Zip Code (Plus 4) |      |     |      |   |
|                                      | PA                                | 17101             |      |     |      |   |
| Full Name of Contributing Com        | mittee                            |                   | МО   | DAY | YEAR |   |
| LAWPAC                               |                                   |                   | 140  | DAI | IEAK | <b>\$</b> 1,000.00                      |
| Mailing Address 212 N. THI           | RD ST SUITE 203                   |                   | 3    | 21  | 2017 | ,                                       |
| City HARRISBURG                      | State                             | Zip Code (Plus 4) |      | 21  | 2017 |   |
|                                      | PA                                | 17101             |      |     |      |   |
| Full Name of Contributing Com        | mittee                            |                   | МО   | DAY | YEAR |   |
| MCA OF EASTERN PA PAC                |                                   |                   |      | DAI | ILAK | <b>\$</b> 500.00                        |
| Mailing Address 21 ARBOR             | WAY SUITE 50                      |                   | 3    | 13  | 2017 |   |
| City BLUE BELL                       | State                             | Zip Code (Plus 4) |      |     | -01/ |   |
|                                      | PA                                | 19422             |      |     |      |   |
| Full Name of Contributing Com        | МО                                | DAY               | YEAR |     |      |   |
| PA AUTOMOTIVE ASSN. PAC              |                                   |                   | MO   | DAT | TEAR | <b>\$</b> 1,000.00                      |
| Mailing Address P.O. BOX 2           | 955                               |                   | 3    | 10  | 2017 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| City HARRISBURG                      | State                             | Zip Code (Plus 4) |      |     | 2017 |   |
|                                      | PA                                | 17105             |      |     |      |   |
| Full Name of Contributing Com        | mittee                            |                   | МО   | DAY | YEAR |   |
| PA CEMETERY CREMATION FU             | NERAL ASSOC PAC                   |                   | MO   | DAT | TEAR | <b>\$</b> 375.00                        |
| Mailing Address 3051 GREE            | N POND ROAD                       |                   | 3    | 21  | 2017 |   |
| City EASTON                          | State                             | Zip Code (Plus 4) |      |     | 2017 |   |
|                                      | PA                                | 18045             |      |     |      |   |
| Full Name of Contributing Com        | mittee                            |                   | МО   | DAY | YEAR |   |
| PENN HY-PAC                          |                                   |                   | 140  | DAI | ILAK | <b>\$</b> 125.00                        |
| Mailing Address 3717 BLUE            | iling Address 3717 BLUE HILL ROAD |                   | 3    | 21  | 2017 |   |
| City HANOVER                         | State                             | Zip Code (Plus 4) |      |     |      |   |
|                                      | PA                                | 17331             |      |     |      |   |
| Full Name of Contributing Committee  |                                   |                   | МО   | DAY | YEAR |   |
| PENN HY-PAC                          |                                   |                   | 1-10 | DAT | ILAK | <b>\$</b> 250.00                        |
| Mailing Address 3717 BLUE HILL ROAD  |                                   |                   | 3    | 21  | 2017 |   |
| City HANOVER State Zip Code (Plus 4) |                                   |                   | ]    |     | -31/ |   |
|                                      | PA 17331                          |                   |      |     |      |   |
|                                      | 1                                 |                   | I    | 1   | •    | 1                                       |

| Mailing Address   904 N. 2ND STREET   State   Zip Code (Plus 4)   17102   | Full Na                             |                                     |                    |                   |           |               |                  | PAGE 9                                  |
|---|-------------------------------------|-------------------------------------|--------------------|-------------------|-----------|---------------|------------------|---|
| POLITICAL LABOR ACTION - NOW (PLAN) PAC   Mailing Address   904 N. 2ND STREET   |                                     | ame of Contributing Committee       |                    |                   | МО        | DAY           | VEAR             |   |
| Mailing Address   904 N. 2ND STREET   State   Zip Code (Plus 4)   17102   | POLIT                               | TCAL LABOR ACTION - NOW (PLA        | N) PAC             |                   | 110       |               | ILAK             | <b>\$</b> 500.00                        |
| State   PA  | Mailin                              | g Address 904 N. 2ND STREET         | -                  |                   | 3         | 22            | 2017             |   |
| Full Name of Contributing Committee PSEA PACE  Mo DAY YEAR PSEA PACE  Mailing Address P O BOX 1724  State Zip Code (Plus 4) 17105  Full Name of Contributing Committee PUGLIESE-PAC  Mailing Address 2205 STRAWBERRY SQUARE  City HARRISBURG  State Zip Code (Plus 4) 17101  Full Name of Contributing Committee PA 17101  Full Name of Contributing Committee STATE STREET ADVISORS PAC  Mo DAY YEAR STATE STREET ADVISORS PAC  Mailing Address STATE STREET BLDG 500 N. THIRD STREET, 11TH FLOOR City HARRISBURG  State Zip Code (Plus 4) 17101  Full Name of Contributing Committee STATE STREET ADVISORS PAC  Mailing Address STATE STREET BLDG 500 N. THIRD STREET, 11TH FLOOR 21 2017  Full Name of Contributing Committee State Zip Code (Plus 4) 17101  Full Name of Contributing Committee  Full Name of Contributing Committee  Mo DAY YEAR  \$ 500.00  A500.00  A500.00 | City                                | HARRISBURG                          | State              | Zip Code (Plus 4) | ]         |               | 2017             |   |
| PSEA PACE   |                                     |                                     | PA                 | 17102             |           |               |                  |   |
| PSEA PACE   | Full Na                             | ame of Contributing Committee       |                    |                   | МО        | DAY           | VFΔR             |   |
| Mailing Address P O BOX 1724  City HARRISBURG State PA 17105  Full Name of Contributing Committee PUGLIESE-PAC  Mailing Address 2205 STRAWBERRY SQUARE  City HARRISBURG State Zip Code (Plus 4) 17101  Full Name of Contributing Committee STATE STREET ADVISORS PAC  Mailing Address STATE STREET BLDG 500 N. THIRD STREET, 11TH FLOOR City HARRISBURG State PA 17101  Full Name of Contributing Committee SUE HELM FOR STATE HOUSE COMMITTEE  MO DAY YEAR \$ 500.00  A 2017  Full Name of Contributing Committee SUE HELM FOR STATE HOUSE COMMITTEE  Mo DAY YEAR SUE HELM FOR STATE HOUSE COMMITTEE  Mo DAY YEAR SUE HELM FOR STATE HOUSE COMMITTEE  Milling Address 3537 ATHENA AVENUE  City HARRISBURG State Zip Code (Plus 4) 17110  Mo DAY YEAR SUE HELM FOR STATE HOUSE COMMITTEE  Milling Address 3537 ATHENA AVENUE  City HARRISBURG State Zip Code (Plus 4) 17110  Mo DAY YEAR SUE HELM FOR STATE HOUSE COMMITTEE  Mailing Address 3537 ATHENA AVENUE  City HARRISBURG State Zip Code (Plus 4) 17110  Mo DAY YEAR  A 450.00   | PSEA                                | PACE                                |                    |                   | 1-10      |               | ILAK             | <b>\$</b> 1,000.00                      |
| State PARRISBURG State PA   | Mailin                              | g Address P O BOX 1724              |                    |                   | 3         | 15            | 2017             | , |
| Full Name of Contributing Committee PUGLIESE-PAC  Mailing Address 2205 STRAWBERRY SQUARE  City HARRISBURG  State Zip Code (Plus 4) 17101  Full Name of Contributing Committee STATE STREET ADVISORS PAC  Mailing Address STATE STREET BLDG 500 N. THIRD STREET, 11TH FLOOR City HARRISBURG  State Zip Code (Plus 4) 17101  Full Name of Contributing Committee SUE HELM FOR STATE HOUSE COMMITTEE  Mailing Address 3537 ATHENA AVENUE  City HARRISBURG  State Zip Code (Plus 4) 17110  MO DAY YEAR  \$ 500.00  A  | City                                | HARRISBURG                          | State              | Zip Code (Plus 4) | ]         |               | 2017             |   |
| PUGLIESE-PAC  |                                     |                                     | PA                 | 17105             |           |               |                  |   |
| ## Action of Contributing Committee    State   PA   | Full Na                             | ame of Contributing Committee       | мо                 | DAY               | YEAR      |               |                  |   |
| City HARRISBURG  State PA    PA   17101   | PUGLIESE-PAC                        |                                     |                    |                   |           |               |                  | <b>\$</b> 350.00                        |
| Full Name of Contributing Committee STATE STREET ADVISORS PAC  Mailing Address STATE STREET BLDG 500 N. THIRD STREET, 11TH FLOOR City HARRISBURG State PA DVISORS PAC  Full Name of Contributing Committee SUE HELM FOR STATE HOUSE COMMITTEE  Mailing Address 3537 ATHENA AVENUE City HARRISBURG State PA DVISOR PA T1110  Full Name of Contributing Committee  Sue HELM FOR STATE HOUSE COMMITTEE  Mailing Address 3537 ATHENA AVENUE Full Name of Contributing Committee  Full Name of Contributing Committee  Full Name of Contributing Committee  TAVEDN PAG  MO DAY YEAR  \$ 450.00   | Mailin                              | g Address 2205 STRAWBERRY           | SQUARE             |                   | 3         | 15            | 2017             |   |
| Full Name of Contributing Committee  STATE STREET ADVISORS PAC  Mailing Address STATE STREET BLDG 500 N. THIRD STREET, 11TH FLOOR  City HARRISBURG State Zip Code (Plus 4) PA 17101  Full Name of Contributing Committee  SUE HELM FOR STATE HOUSE COMMITTEE  Mailing Address 3537 ATHENA AVENUE  City HARRISBURG State Zip Code (Plus 4) PA 17110  Full Name of Contributing Committee  State Zip Code (Plus 4) PA 17110  Full Name of Contributing Committee  MO DAY YEAR  \$ 450.00  | City                                | HARRISBURG                          | State              | Zip Code (Plus 4) |           |               |                  |   |
| STATE STREET ADVISORS PAC  Mailing Address STATE STREET BLDG 500 N. THIRD STREET, 11TH FLOOR  City HARRISBURG  State Zip Code (Plus 4) 17101  Full Name of Contributing Committee  SUE HELM FOR STATE HOUSE COMMITTEE  Mailing Address 3537 ATHENA AVENUE  City HARRISBURG  State Zip Code (Plus 4) 17110  Full Name of Contributing Committee  TAVERNUAGE  MO DAY YEAR  \$ 450.00  |                                     |                                     | PA                 | 17101             |           |               |                  |   |
| STATE STREET ADVISORS PAC  Mailing Address STATE STREET BLDG 500 N. THIRD STREET, 11TH FLOOR  City HARRISBURG State Zip Code (Plus 4) PA 17101  Full Name of Contributing Committee  SUE HELM FOR STATE HOUSE COMMITTEE  Mailing Address 3537 ATHENA AVENUE  City HARRISBURG State PA 17110  Full Name of Contributing Committee  TAVERNA PAC   | Full Name of Contributing Committee |                                     |                    |                   |           | DAY           | ΥΕΔR             |   |
| City HARRISBURG  State PA  2ip Code (Plus 4) 17101  Full Name of Contributing Committee SUE HELM FOR STATE HOUSE COMMITTEE  Mailing Address 3537 ATHENA AVENUE  City HARRISBURG  State PA  27  2017  450.00  August 10  DAY  Full Name of Contributing Committee TAVERN DAG  MO DAY  YEAR  450.00  TAVERN DAG  MO DAY  YEAR  YEAR   | STATE                               | STREET ADVISORS PAC                 |                    |                   |           |               | 1 = 1 111        | <b>\$</b> 500.00                        |
| City HARRISBURG  State   Zip Code (Plus 4)   17101  Full Name of Contributing Committee   SUE HELM FOR STATE HOUSE COMMITTEE   MO DAY YEAR   450.00  Mailing Address   3537 ATHENA AVENUE   2017  City HARRISBURG   State   PA   17110   MO DAY YEAR   450.00  Full Name of Contributing Committee   MO DAY YEAR   70 PA   70   | Mailin                              | g Address STATE STREET BLD          | G 500 N. THIRD STR | EET, 11TH FLOOR   | 3         | 27            | 2017             |   |
| Full Name of Contributing Committee SUE HELM FOR STATE HOUSE COMMITTEE  Mailing Address 3537 ATHENA AVENUE  City HARRISBURG  State PA 17110  Full Name of Contributing Committee  TAYERN RAC  | City                                | HARRISBURG                          | State              | Zip Code (Plus 4) | ]         | -             | ====             |   |
| SUE HELM FOR STATE HOUSE COMMITTEE  Mailing Address 3537 ATHENA AVENUE  City HARRISBURG  State   Zip Code (Plus 4)   17110  Full Name of Contributing Committee  TAYERN PAG   |                                     |                                     | PA                 | 17101             |           |               |                  |   |
| SUE HELM FOR STATE HOUSE COMMITTEE  Mailing Address 3537 ATHENA AVENUE  City HARRISBURG  State Zip Code (Plus 4) PA 17110  Full Name of Contributing Committee  TAYEDN DAG  MO DAY YEAR   | Full Na                             | ame of Contributing Committee       |                    | -                 | МО        | DAY           | VEAD             |   |
| Mailing Address 3537 ATHENA AVENUE  City HARRISBURG  State   Zip Code (Plus 4)   17110  Full Name of Contributing Committee  TAVERN RAC   | SUE H                               | HELM FOR STATE HOUSE COMMIT         | TEE                |                   | 140       | DAI           | ILAK             | <b>\$</b> 450.00                        |
| City HARRISBURG  State Zip Code (Plus 4) 17110  Full Name of Contributing Committee  TAYEDN DAG  MO DAY YEAR  | Mailin                              | g Address 3537 ATHENA AVEN          | IUE                |                   | 3         | 10            | 2017             | ,                                       |
| Full Name of Contributing Committee  MO DAY YEAR  | City                                | HARRISBURG                          | State              | Zip Code (Plus 4) | ]         |               | 2017             |   |
| TAVEDN DAC  |                                     |                                     | PA                 | 17110             |           |               |                  |   |
| TAVEDN DAG  |                                     | Full Name of Contributing Committee |                    |                   |           |               |                  |   |
|   | Full Na                             | ame of Contributing Committee       |                    |                   | МО        | DAY           | YFAR             |   |
| Mailing Address 121 PINF STRFFT   |                                     | _                                   |                    |                   | МО        | DAY           | YEAR             | <b>\$</b> 1,000.00                      |
| City HARRISBURG State Zip Code (Plus 4)   | TAVER                               | RN PAC                              |                    |                   |           |               |                  | \$ 1,000.00                             |
| PA 17101  | TAVEF<br><b>Mailin</b>              | RN PAC  g Address 121 PINE STREET   | State              | Zip Code (Plus 4) | <b>MO</b> | <b>DAY</b> 15 | <b>YEAR</b> 2017 | \$ 1,000.00                             |
| PA 17101  | TAVEF                               | RN PAC  g Address 121 PINE STREET   | State              | Zip Code (Plus 4) |           |               |                  | \$ 1,000.00                             |

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

**PAGE TOTAL \$** 31,757.39

### 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                     | ame of Filing Committee or Candidate |            |                             |         | riod            |          |            |           |
|---|--------------------------------------|------------|-----------------------------|---------|-----------------|----------|------------|-----------|
| HOUSE REPUBLICAN CAMPAIGN COMM                            | ITTEE                                |            | Fro                         | m:      |                 | To       |            |           |
|   |                                      |            | •                           | D       | ATE             |          | АМО        | UNT       |
| Full Name of Contributor                                  |                                      |            |                             | МО      | DAY             | VEAD     |            |           |
| T. MARK MUSTIO  |                                      |            |                             | МО      | DAT             | YEAR     | \$         | 650.00    |
| Mailing Address P O BOX 1021                              |                                      |            |                             | 3       | 29              | 2017     |            |           |
| City MOON TOWNSHIP  | State                                | Zip Code ( | Plus 4)                     |         |                 |          |            |           |
|   | PA                                   | 15108      |                             |         |                 |          | <u> </u>   |           |
| Employer Name PA HOUSE OF REPS                            |                                      |            |                             | Occupat | tion            | EGISLATO | R          |           |
| Employer Mailing Address/Principal Plac                   | e of Business                        | City       |                             |         | State           |          | Zip Code ( | Plus 4)   |
| MAIN CAPITOL  |                                      | HARR:      | SBURG                       |         | PA              |          | 17120      |           |
| Full Name of Contributor                                  |                                      |            |                             | мо      | DAY             | YEAR     |            |           |
| T. MARK MUSTIO  |                                      |            |                             | 140     | DAT             | ILAK     | \$         | 750.00    |
| Mailing Address P O BOX 1021                              |                                      |            |                             |         | 29              | 2017     |            |           |
| City MOON TOWNSHIP  | State                                | Zip Code ( | Plus 4)                     | 3       |                 |          |            |           |
|   | PA                                   | A 15108    |                             |         |                 |          | <u> </u>   |           |
| Employer Name PA HOUSE OF REPS                            |                                      |            |                             |         | tion            | STATE L  | EGISLATO   | R         |
| Employer Mailing Address/Principal Plac                   | e of Business                        | City       |                             |         | State           |          | Zip Code ( | Plus 4)   |
| MAIN CAPITOL  |                                      | HARR:      | SBURG                       |         | PA              |          | 17120      |           |
| Full Name of Contributor                                  |                                      |            |                             | мо      | DAY             | YEAR     |            |           |
| T. MARK MUSTIO  |                                      |            |                             | MO      | DAT             | TEAK     | \$         | 300.00    |
| Mailing Address P O BOX 1021                              |                                      |            |                             | 3       | 29              | 2017     |            |           |
| City MOON TOWNSHIP  | State                                | Zip Code ( | Plus 4)                     |         |                 |          |            |           |
|   | PA                                   | 15108      |                             |         |                 |          | <u> </u>   |           |
| Employer Name PA HOUSE OF REPS                            |                                      |            |                             | Occupat | tion            | STATE L  | EGISLATO   | R         |
| Employer Mailing Address/Principal Plac                   | e of Business                        | City       |                             |         | State           |          | Zip Code ( | Plus 4)   |
| MAIN CAPITOL  |                                      | HARR:      | SBURG                       |         | PA              |          | 17120      |           |
| Full Name of Contributor                                  |                                      |            |                             | МО      | DAY             | VEAD     |            |           |
| T. MARK MUSTIO  |                                      |            |                             | МО      | DAY             | YEAR     | \$         | 10,000.00 |
| Mailing Address P O BOX 1021                              |                                      |            |                             | 3       | 29              | 2017     |            |           |
| City MOON TOWNSHIP  | State                                | Zip Code ( | Plus 4)                     |         |                 |          |            |           |
|   | PA                                   | 15108      |                             |         |                 |          | l          |           |
| Employer Name PA HOUSE OF REPS                            |                                      |            | Occupation STATE LEGISLATOR |         |                 |          | R          |           |
| Employer Mailing Address/Principal Place of Business City |                                      |            | State                       |         | Zip Code (      | Plus 4)  |            |           |
| MAIN CAPITOL  | AIN CAPITOL HARRISBURG               |            |                             |         | l <sub>PA</sub> |          | 17120      |           |

|   |       |       |                             |                 |      | _        |          |          |
|---|-------|-------|-----------------------------|-----------------|------|----------|----------|----------|
| Full Name of Contributor                                  |       |       |                             | мо              | DAY  | YEAR     | <b> </b> | 2 000 00 |
| BECKY CORBIN  |       |       |                             |                 | 27.1 | 12/11    | ] *      | 2,000.00 |
| Mailing Address 16 HAWK HILL RD                           |       |       |                             | 3               | 17   | 2017     | 1        |          |
| City DOWNINGTOWN  | State | Zi    | p Code (Plus 4)             | ]               | 17   | 2017     |          |          |
|   | PA    | 19335 |                             |                 |      |          |          |          |
| Employer Name PA HOUSE OF REPS                            |       |       |                             | Occupat         | ion  | STATE L  | EGISLATO | )R       |
| Employer Mailing Address/Principal Place of Business City |       |       |                             | State           |      | Zip Code | (Plus 4) |          |
| HARRISBURG  |       |       |                             | PA              |      | 17120    |          |          |
| Full Name of Contributor                                  |       |       | мо                          | DAY             | YEAR |          |          |          |
| BECKY CORBIN  |       |       |                             | MO              | DAT  | TEAR     | \$       | 1,000.00 |
| Mailing Address 16 HAWK HILL RD                           |       |       |                             | 3               | 17   | 2017     | 7        |          |
| City DOWNINGTOWN  | State | Zi    | p Code (Plus 4)             | ]               | 1,   | 2017     |          |          |
|   | PA    | 19    | 335                         |                 |      |          |          |          |
| Employer Name PA HOUSE OF REPS                            |       |       | Occupation STATE LEGISLATOR |                 |      | )R       |          |          |
| Employer Mailing Address/Principal Place of Business City |       | City  |                             | State           |      | Zip Code | (Plus 4) |          |
| HARRISBURG  |       |       |                             | l <sub>PA</sub> |      | 17120    |          |          |

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

**PAGE TOTAL \$** 14,700.00

## 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 of   | or Candidate |             | Report  | ing Peri | od  |      |      |            |
|---|--------------|-------------|---------|----------|-----|------|------|------------|
|   |              |             | From:   |          |     | To:  |      |            |
|   |              |             |         | D        | ATE |      |      | AMOUNT     |
| Full Name   |              |             |         | мо       | DAY | YEAR | \$   | 0.00       |
| Mailing Address   |              |             |         |          |     |      |      |            |
| City  | State        | Zip Code (I | Plus 4) |          |     |      |      |            |
| Receipt Description   | •            | •           |         |          | •   |      |      |            |
| Enter Crond Total of Doub E on Schodulo I. Dotailed Summary Dogo Scotion 4  |              |             |         |          |     |      |      | PAGE TOTAL |
| nter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4. |              |             |         |          |     | \$   | 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 |     |      |  |  |  |  |  |
|--|------------------|-----|------|--|--|--|--|--|
| HOUSE REPUBLICAN CAMPAIGN COMMITTEE  | From:            | To: |      |  |  |  |  |  |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P  | ER CONTRIBUTOR   |     |      |  |  |  |  |  |
| TOTAL for the Reporting Period (1) \$ 0.00   |                  |     |      |  |  |  |  |  |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candidate |                  |                       | Reporting 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 Sche   | dule II, In-Kind | d Contributions Detai | led Sum          | mary Pag | ge,  |             | PAGE TOT | AL   |
| Section 2.                            |                  |                       |                  |          |      | \$          |          | 0.00 |

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

| Name of Filing Committee or Candidate                |                |     | Re               | porting | Period            |              |       |       |                   |      |
|--|----------------|-----|------------------|---------|-------------------|--------------|-------|-------|-------------------|------|
|  |                |     |                  | Fro     | m:                |              | To:   |       |                   |      |
|  |                |     |                  |         |                   | DATE         |       |       | AMOUNT            |      |
| Full Name of Contributor                             |                |     |                  |         | мо                | DAY          | YEAR  |       |                   |      |
| Mailing Address                                      |                |     |                  |         |                   |              |       | \$    |                   | 0.00 |
| City   | State          |     | Zip Code(Plus 4) |         |                   |              |       |       |                   |      |
| Employer of Contributor                              |                |     |                  |         | Occup             | ation        |       |       |                   |      |
| Employer Mailing Address/Principal Place of Business |                | Cit | ty               | Stat    | e Zi <sub>l</sub> | Code(Plus 4) | Descr | iptio | n of Contribution | on   |
| Enter Grand Total of Part G on Sch                   | edule II. In-K | ind | Contributions D  | etaile  | ed                |              |       |       | PAGE TOT          | ΓAL  |
| Summary Page, Section 3.                             |                |     |                  |         |                   |              |       |       |                   | 0.00 |

## SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting Period |     |  |  |  |
|---------------------------------------|------------------|-----|--|--|--|
| HOUSE REPUBLICAN CAMPAIGN COMMITTEE   | From             | То: |  |  |  |

|                                       |             | DATE              | AMOUNT  |                  |          |          |          |
|---------------------------------------|-------------|-------------------|---------|------------------|----------|----------|----------|
| To Whom Paid                          |             |                   | МО      | DAY              | YEAR     |          |          |
| FULTON BANK                           |             |                   | MO      |                  | IZAK     |          |          |
| Mailing Address P.O. BOX 11           | .89         |                   | 3       | 8                | 2017     | \$       | 425.45   |
| City HARRISBURG                       | State       | Zip Code (Plus 4) | Descrip | tion of Exp      | enditure |          |          |
|                                       | PA          | 17108             | BANK F  | EES              |          |          |          |
| To Whom Paid                          |             |                   | мо      | DAY              | YEAR     |          |          |
| FORTNEY PRINTING                      |             |                   | 140     |                  | IZAK     |          |          |
| Mailing Address 512 MAIN S            | TREET       |                   | 3       | 10               | 2017     | \$       | 217.30   |
| City BRESSLER                         | State       | Zip Code (Plus 4) | Descrip | tion of Exp      | enditure |          |          |
|                                       | PA          | 17113             | PRINTI  | NG               |          |          |          |
| To Whom Paid                          |             |                   | мо      | DAY              | YEAR     |          |          |
| FRANKLIN JEFFERSON STRATEG            | GIES LLC    |                   | MO      | DAI              | ILAK     |          |          |
| Mailing Address 977 DAVID             | DRIVE       |                   | 3       | 10               | 2017     | \$       | 1,000.00 |
| City RED LION State Zip Code (Plus 4) |             |                   |         | tion of Exp      | enditure |          |          |
|                                       | PA          | 17356             | CONSU   | LTING            |          |          |          |
| To Whom Paid                          |             |                   | МО      | DAY              | YEAR     |          |          |
| VERIZON WIRELESS                      |             |                   | MO      | DAI              | ILAK     |          |          |
| Mailing Address P.O. BOX 25           | 505         |                   | 3       | 10               | 2017     | \$       | 103.93   |
| City LEHIGH VALLEY                    | State       | Zip Code (Plus 4) | Descrip | tion of Exp      | enditure |          |          |
|                                       | PA          | 18002             | CELL PH | HONE             |          |          |          |
| To Whom Paid                          |             |                   | мо      | DAY              | YEAR     |          |          |
| CHARLES LEE                           |             |                   | MO      | DAI              | ILAK     |          |          |
| Mailing Address P O BOX               |             |                   | 3       | 13               | 2017     | \$       | 200.00   |
| City HARRISBURG                       | State       | Zip Code (Plus 4) | Descrip | tion of Exp      | enditure | l        |          |
|                                       | PA          | 17108             | ENTERT  | AINMENT          |          |          |          |
| To Whom Paid                          |             |                   | МС      | DAY              | VEAD     |          |          |
| HARRISBURG MIDTOWN ARTS               |             |                   | МО      | DAY              | YEAR     |          |          |
| Mailing Address 1110 N. 3RD           | ) ST        |                   | 3       | 13               | 2017     | \$       | 1,000.00 |
| City HARRISBURG                       | State       | Zip Code (Plus 4) | Descrip | l<br>tion of Exp | enditure | <u> </u> |          |
|                                       | PA          | 17070             | RECEPT  | ION              |          |          |          |
|                                       | <del></del> |                   | •       |                  |          |          |          |

| TO WHOME PAIR  PAYCHEX OF NEW YORK LLC  ### 14RRISBURG   5405 PARK DRIVE SUITE 200   54 18,983.56    City   HARRISBURG   5405 PARK DRIVE SUITE 200   54 18,983.56    City   HARRISBURG   5405 PARK DRIVE SUITE 200   71110   71110    ### 17110   71110   71110   71110   71110    ### 17110   71110   71110   71110   71110   71110    ### 17110   71110   71110   71110   71110   71110    ### 17110   71110   71110   71110   71110   71110   71110   71110    ### 17110   711   |                             |                            |                   |                         |                  |               |               |          |
|--|-----------------------------|----------------------------|-------------------|-------------------------|------------------|---------------|---------------|----------|
| Mailing Address   2405 PARK DRIVE SUITE 200   3   201   3   2017   | To Whom Paid                |                            |                   | мо                      | DAY              | YEAR          |               |          |
| State  | PAYCHEX OF NEW YORK LLC     |                            |                   |                         |                  |               |               |          |
| TO WIND PAID  T  | Mailing Address 2405 PARK D | PRIVE SUITE 200            |                   | 3                       | 13               | \$            | 18,983.56     |          |
| To Whome   | City HARRISBURG             | Description of Expenditure |                   |                         |                  |               |               |          |
| RED MAVERICK   Mediting   Address    |                             | PA                         | 17110             | PAYROL                  | L SERVICE        |               |               |          |
| Mailing   Address  | To Whom Paid                |                            |                   | МО                      | DAY              | YEAR          |               |          |
| City   | RED MAVERICK MEDIA          |                            |                   |                         |                  |               |               |          |
| To WINDERSON PAIR  AD ONE PAIR  AD ONE PAIR  MAIN 3 Address 301 MARKET STREET   | Mailing Address 403 N. SECO | ND STREET 2ND FLOOF        | ₹                 | 3                       | 13               | 2017          | <del>\$</del> | 2,822.00 |
| No   | City HARRISBURG             | State                      | Zip Code (Plus 4) | Descrip                 | tion of Exp      | enditure      |               |          |
| Mailing   Address   Sun MARKET STREET   State   PA   17801   Market STREET   State   PA   17801   Market STREET   Mailing   Address   PO BOX 790408   FO BOX 790408   TA   17801   Market STREET   Mailing   Address   PO BOX 790408   TA   17801   Market STREET   Mailing   Address   PO BOX 790408   TA   Mailing       |                             | PA                         | 17101             | MAIL &a                 | amp; POST        | AGE           |               |          |
| Mailing   Address   301 MARKET STREET   State   21p Code (Plus 4)   Description of Expenditure   Market Notice   Mailing   Address   P O BOX 790408   T RAVEL   LODGING   Plus 4)   Pa   Mailing   Address   P O BOX 790408   T RAVEL   LODGING   Plus 4)   Pa   Mailing   Address   P O BOX 790408   T RAVEL   LODGING   Plus 4)   Pa   Mailing   Address   P O BOX 790408   T RAVEL   LODGING   Plus 4)   Pa   Mailing   Address   P O BOX 790408   T RAVEL   LODGING   Plus 4)   Pa   Mailing   Address   P O BOX 790408   T RAVEL   LODGING   Plus 4)   Pa   Mailing   Address   P O BOX 790408   T RAVEL   LODGING   Plus 4)   Pa   Mailing   Address   P O BOX 790408   T RAVEL   LODGING   Plus 4)   Pa   Mailing   Address   P O BOX 790408   T RAVEL   LODGING   Plus 4)   Pa   Mailing   Address   P O BOX 790408   T RAVEL   LODGING   Plus 4)   Pa   Mailing   Address   P O BOX 790408   T RAVEL   LODGING   Plus 4)   Pa   Mailing   Address   P O BOX 790408   T RAVEL   LODGING   Plus 4)   Pa   Mailing   Address   P O BOX 790408   T RAVEL   T RAVEL   LODGING   Plus 4)   Pa   Mailing   Address   P O BOX 790408   T RAVEL   LODGING   Plus 4)   Pa   Mailing   Address   P O BOX 790408   T RAVEL   LODGING   Plus 4)   Pa   Mailing   Address   P O BOX 790408   T RAVEL   LODGING   Plus 4)   Pa   Pa   Mailing   Address   P O BOX 790408   T RAVEL   LODGING   Plus 4)   Plus 79040   T RAVEL   LODGING   Plus 4)   Plus 79040   Plus 8   Plus 79040   Plu   |                             |                            |                   | мо                      | DAY              | YEAR          |               |          |
| To Whom Paid CARD MEMBER SERVICES  Mailing Address P10 BOX 790408  State 21p Code (Plus 4) BETHER HER HER HER HER HER HER HER HER HER  |                             | STREET                     |                   | 3                       | 17               | 2017          | \$            | 1,414.99 |
| To Whom Paid CARD MEMBER SERVICES  Mailing Address P10 BOX 790408  State 21p Code (Plus 4) BETHER HER HER HER HER HER HER HER HER HER  | City SUNBURY                | State                      | Zip Code (Plus 4) | Descript                | l<br>tion of Exp | l<br>enditure | <u> </u>      |          |
| To Whom Paid   CARDMEMBER SERVICES   | Jan Schizolki               |                            |                   | 1                       |                  |               |               |          |
| Mailing Address   P O BOX 790408   State   Mo   State     | To Whom Paid                | '                          |                   |                         |                  |               |               |          |
| City         ST. LOUIS         State MO         Zip Code (Plus 4) Description of Expenditure TRAVEL, LODGING, PHONES           To Whom Paid CHERYL CORSA           Mailing Address         1290 STARK ROAD         Zip Code (Plus 4) Description of Expenditure DATA, LISTS & Bamp; POSTCARDS           To Whom Paid COMCAST CABLE         State         Zip Code (Plus 4) DATA, LISTS & Bamp; POSTCARDS           Mailing Address         P.O. BOX 3001         3 17 2017         \$ 160.83           City         SOUTHEASTERN         State         Zip Code (Plus 4) Description of Expenditure DATA, LISTS & Bamp; POSTCARDS           To Whom Paid MADE TO KEEP           MADE TO KEEP         MO         DAY         YEAR           Mailing Address         5922 LINGLESTOWN RD FIRST FLOOR         3 17 2017         \$ 79.50           City         HARRISBURG         State         Zip Code (Plus 4) Description of Expenditure PROF SERVICES         PROF SERVICES           To Whom Paid RED MAVERICK MEDIA         MO         DAY         YEAR           MO         DAY <t< td=""><td>CARDMEMBER SERVICES</td><td></td><td></td><td>МО</td><td>DAY</td><td>YEAR</td><td></td><td></td></t<>  | CARDMEMBER SERVICES         |                            |                   | МО                      | DAY              | YEAR          |               |          |
| TO Whom Paid   CHERYL CORSA  | Mailing Address P O BOX 790 | 408                        |                   | 3                       | 17               | 2017          | \$            | 740.20   |
| To Whom Paid   CHERYL CORSA  | City ST. LOUIS              | State                      | Zip Code (Plus 4) | Descrip                 | tion of Exp      | enditure      |               |          |
| Mailing   Address   1290   STARK ROAD   State   PA   18017   DATA   LISTS & Bamp; POSTCARDS  |                             | МО                         | 631790408         | TRAVEL, LODGING, PHONES |                  |               |               |          |
| City   BETHLEHEM   State   PA   18017   DATA   LISTS & Bamp; POST   PA   160.83  | To Whom Paid                |                            |                   | МО                      | DAY              | YEAR          |               |          |
| City         BETHLEHEM         State         Zip Code (Plus 4)         Description of Expenditure           TO Whom Paid COMCAST CABLE         MO         DATA, LISTS & amp; POSTCARDS           Mailing Address         P.O. BOX 3001         State         Zip Code (Plus 4)         Description of Expenditure           City         SOUTHEASTEN         State         Zip Code (Plus 4)         Description of Expenditure           TO Whom Paid MADE TO KEEP         MO         DAY         YEAR           Mailing Address         5922 LINGLESTOW RD FIRST FLOOR         3         17 2017         \$ 79.50           TO Whom Paid RED MAVERICK MEDIA         MO         DAY         YEAR           Mailing Address         403 N. SECOND STREET 2ND FLOOR         3         17 2017         \$ 2,942.00           City         HARRISBURG         State         Zip Code (Plus 4)         Description of Expenditure           PA         2 in Marking Mailing Address         403  | CHERYL CORSA                |                            |                   |                         |                  |               |               |          |
| TO Whom Paid   COMCAST CABLE   State   PA   18017   DATA, LISTS & POSTCARDS   POSTCARDS   PA   PA   PA   PA   PA   PA   PA   P   | Mailing Address 1290 STARK  | ROAD                       |                   | 3                       | 17               | 2017          | \$            | 3,575.77 |
| To Whom Paid   COMCAST CABLE   Mailing Address   P.O. BOX 3001   State   PA   193983005   PA   PE   PA   PA   PE   PA   PA   PA  | City BETHLEHEM              | State                      | Zip Code (Plus 4) | Descrip                 | tion of Exp      | enditure      |               |          |
| Mo   |                             | PA                         | 18017             | DATA, L                 | ISTS &am         | p; POSTC      | CARDS         |          |
| Mailing   Address   P.O. BOX 3001   State   Zip Code (Plus 4)   Description of Expenditure   CABLE & Amp; INTERNET   |                             |                            |                   | мо                      | DAY              | YEAR          |               |          |
| City         SOUTHEASTERN         State PA         Zip Code (Plus 4) 193983005         Description of Expenditure CABLE & amp; INTERNET           To Whom Paid MADE TO KEEP         MO         DAY         YEAR           Mailing Address         5922 LINGLESTOWN RD FIRST FLOOR         3         17         2017         \$ 79.50           City HARRISBURG         State PA         Zip Code (Plus 4) 21112         Description of Expenditure PROF SERVICES         PROF SERVICES           To Whom Paid RED MAVERICK MEDIA         MO         DAY         YEAR         YEAR           Mailing Address         403 N. SECOND STREET 2ND FLOOR         3         17         2017         \$ 2,942.00           City HARRISBURG         State         Zip Code (Plus 4)         Description of Expenditure         2,942.00   |                             | 24                         |                   | 1                       | 17               | 2017          | <b>\$</b>     | 160.83   |
| TO Whom Paid MADE TO KEEP       MO DAY       YEAR         Mailing Address       5922 LINGLESTOWN RD FIRST FLOOR       3 17 2017       \$ 79.50         City HARRISBURG       State State PA       Zip Code (Plus 4)       Description of Expenditure         TO Whom Paid RED MAVERICK MEDIA       MO DAY YEAR       YEAR         Mailing Address       403 N. SECOND STREET 2ND FLOOR       3 17 2017       \$ 2,942.00         City HARRISBURG       State       Zip Code (Plus 4)       Description of Expenditure  |                             |                            |                   |                         |                  |               | *             | 100.05   |
| To Whom Paid MADE TO KEEP         MO DAY YEAR           Mailing Address         5922 LINGLESTOWN RD FIRST FLOOR         3 17 2017         \$ 79.50           City HARRISBURG         State Zip Code (Plus 4) Description of Expenditure PROF SERVICES           To Whom Paid RED MAVERICK MEDIA         MO DAY YEAR           MAD MAY REAR Address         403 N. SECOND STREET 2ND FLOOR         3 17 2017         \$ 2,942.00           City HARRISBURG         State         Zip Code (Plus 4)         Description of Expenditure   | City SOUTHEASTERN           |                            | ' ' '             | 1 -                     | -                |               |               |          |
| MADE TO KEEP         MO DAY YEAR           Mailing Address   5922 LINGLESTOWN RD FIRST FLOOR   3   17   2017   \$   79.50           City   HARRISBURG   Floor   Fl   |                             | PA                         | 193983005         | CABLE & amp; INTERNET   |                  |               |               |          |
| City HARRISBURG  State PA  To Whom Paid RED MAVERICK MEDIA  Mailing Address 403 N. SECOND STREET 2ND FLOOR  City HARRISBURG  State  Zip Code (Plus 4) PROF SERVICES  MO DAY YEAR  \$ 2,942.00  \$ 2,942.00   |                             |                            |                   | мо                      | DAY              | YEAR          |               |          |
| To Whom Paid<br>RED MAVERICK MEDIA         MO         DAY         YEAR           Mailing Address         403 N. SECOND STREET 2ND FLOOR         3         17         2017         \$ 2,942.00           City         HARRISBURG         State         Zip Code (Plus 4)         Description of Expenditure   | Mailing Address 5922 LINGLE | STOWN RD FIRST FLOO        | OR                | 3                       | 17               | 2017          | \$            | 79.50    |
| To Whom Paid  RED MAVERICK MEDIA  Mailing Address 403 N. SECOND STREET 2ND FLOOR  City HARRISBURG  State  Zip Code (Plus 4)  Description of Expenditure  | City HARRISBURG             | State                      | Zip Code (Plus 4) | Descrip                 | tion of Exp      | enditure      | <u> </u>      |          |
| RED MAVERICK MEDIA  Mo DAY YEAR  Mailing Address 403 N. SECOND STREET 2ND FLOOR  City HARRISBURG  State  Zip Code (Plus 4)  Description of Expenditure   |                             | PA                         | 17112             | PROF SERVICES           |                  |               |               |          |
| RED MAVERICK MEDIA  Mailing Address 403 N. SECOND STREET 2ND FLOOR  City HARRISBURG  State  Zip Code (Plus 4)  Description of Expenditure  | To Whom Paid                |                            |                   | MO                      | DAY              | VEAD          |               |          |
| City HARRISBURG State Zip Code (Plus 4) Description of Expenditure   | RED MAVERICK MEDIA          |                            |                   | 140                     |                  | ILAK          |               |          |
|  | Mailing Address 403 N. SECO | ND STREET 2ND FLOOF        | २                 | 3                       | 17               | 2017          | \$            | 2,942.00 |
| PA 17101 MAIL & amp: POSTAGE   | City HARRISBURG             | State                      | Zip Code (Plus 4) | Descrip                 | tion of Exp      | enditure      |               |          |
| The state of the s |                             | PA                         | 17101             | MAIL & POSTAGE          |                  |               |               |          |

| To W                                      | nom Paid                |                    |                       | мо      | DAY         | YEAR     |     |           |
|---|-------------------------|--------------------|-----------------------|---------|-------------|----------|-----|-----------|
| UNITE                                     | ED CONCORDIA LIFE &     | HEALTH INS.        |                       | 1-10    |             | 1 = Aux  |     |           |
| Mailin                                    | g Address P O BOX 8273  | 3                  | 17                    | 2017    | \$          | 124.11   |     |           |
| City PHILADELPHIA State Zip Code (Plus 4) |                         |                    |                       |         | tion of Exp | enditure |     |           |
| PA 191827399                              |                         |                    |                       |         | /1-4/30/17  | ,        |     |           |
| To W                                      | nom Paid                |                    |                       | мо      | DAY         | YEAR     |     |           |
| VERIZ                                     | ZON                     |                    |                       |         |             |          |     |           |
| Mailin                                    | g Address P.O. BOX 2800 | 00                 |                       | 3       | 17          | 2017     | \$  | 486.45    |
| City                                      | LEHIGH VALLEY           | State              | Zip Code (Plus 4)     | Descrip | tion of Exp | enditure |     |           |
|   |                         | PA                 | 18002                 | PHONES  | S HQ        |          |     |           |
|   | nom Paid                |                    |                       | мо      | DAY         | YEAR     |     |           |
|   | MASON                   |                    |                       |         | 4 7         | 2017     | \$  | 99.15     |
| Mailin                                    | g Address P O BOX 9811  | 01                 |                       | 3       | 17          | 2017     | 7   | 99.15     |
| City                                      | BOSTON                  | State              | Zip Code (Plus 4)     | Descrip | tion of Exp | enditure |     |           |
|   |                         | MA                 | 022981101             | OFC SU  | PPLIES      |          |     |           |
|   | nom Paid<br>O VEGA      |                    |                       | МО      | DAY         | YEAR     |     |           |
| Mailin                                    | g Address 2734 SW 19Th  | I STREET           |                       | 3       | 24          | 2017     | \$  | 60.00     |
| City                                      | MIAMI                   | State              | Zip Code (Plus 4)     | Descrip | tion of Exp | enditure |     |           |
|   |                         | FL                 | 33145                 | PROFES  | SIONAL S    | ERVICES  |     |           |
| To W                                      | nom Paid                |                    |                       |         | DAY         | VEAD     |     |           |
| A T &                                     | amp; T MOBILITY         |                    |                       | МО      | DAT         | YEAR     |     |           |
| Mailin                                    | g Address P O BOX 5371  | 04                 |                       | 3       | 24          | 2017     | \$  | 175.83    |
| City                                      | ATLANTA                 | State              | Zip Code (Plus 4)     | Descrip | tion of Exp | enditure |     |           |
|   |                         | GA                 | 30353                 | CELL PH | IONE        |          |     |           |
| To W                                      | nom Paid                |                    |                       | мо      | DAY         | YEAR     |     |           |
| AMER                                      | ICAN EXPRESS            |                    |                       |         |             |          |     |           |
| Mailin                                    | g Address P.O. BOX 1270 | )                  |                       | 3       | 24          | 2017     | \$  | 44,524.18 |
| City                                      | NEWARK                  | State              | Zip Code (Plus 4)     | Descrip | tion of Exp | enditure |     |           |
|   |                         | NJ                 | 07101                 | TRAVEL  | , RETREAT   | , SOFTW  | ARE |           |
| To W                                      | nom Paid                |                    |                       | мо      | DAY         | YEAR     |     |           |
| JGF F                                     | UNDING, LLC             |                    |                       | МО      | DAI         | ILAK     |     |           |
| Mailin                                    | g Address 400 NORTH BL  | LUE RIBBON AVENUE  |                       | 3       | 24          | 2017     | \$  | 730.62    |
| City                                      | HARRISBURG              | State              | Zip Code (Plus 4)     | Descrip | tion of Exp | enditure |     |           |
|   |                         | PA                 | 17112                 | OFFICE  | EQUIPMEN    | ΝΤ       |     |           |
| To W                                      | nom Paid                |                    |                       | МО      | DAY         | YEAR     |     |           |
| OBER                                      | MAYER REBMAN MAXWELL 8  | kamp; HIPPEL       |                       | МО      | DAT         | ILAK     |     |           |
| Mailin                                    | g Address CENTRE SQUA   | RE WEST 1500 MARKI | ET STREET, SUITE 3400 | 3       | 24          | 2017     | \$  | 296.00    |
| City                                      | PHILADELPHIA            | State              | Zip Code (Plus 4)     | Descrip | tion of Exp | enditure |     |           |
|   |                         | PA                 | 19102                 | PROFES  | SIONAL S    | ERVICES  |     |           |
|   |                         |                    |                       |         |             |          |     |           |

|                                    |                |                   |                              |             |          | PAGE     | 19       |
|------------------------------------|----------------|-------------------|------------------------------|-------------|----------|----------|----------|
| To Whom Paid                       |                |                   | МО                           | DAY         | YEAR     |          |          |
| PITNEY BOWES PURCHASE POWER        |                |                   |                              |             |          |          |          |
| Mailing Address P.O. BOX 371874    |                |                   | 3                            | 24          | 2017     | \$       | 109.54   |
| City PITTSBURGH                    | State          | Zip Code (Plus 4) | Descript                     | tion of Exp | enditure |          |          |
|                                    | PA             | 15250             | SHIPPIN                      | IG          |          |          |          |
| To Whom Paid                       |                |                   | мо                           | DAY         | YEAR     |          |          |
| RED MAVERICK MEDIA                 |                |                   | 110                          | J           | 1 Z/ux   |          |          |
| Mailing Address 403 N. SECOND STR  | EET 2ND FLOOR  |                   | 3                            | 24          | 2017     | \$       | 4,568.30 |
| City HARRISBURG                    | State          | Zip Code (Plus 4) | Descript                     | tion of Exp | enditure |          |          |
|                                    | PA             | 17101             | SIGNS,                       | HANDOUT     | S, MAIL, | POSTAGE  |          |
| To Whom Paid                       |                |                   | МО                           | DAY         | YEAR     |          |          |
| RKL ESOLUTIONS                     |                |                   | 1.0                          |             |          |          |          |
| Mailing Address 1800 FRUITVILLE PI | KE             |                   | 3                            | 24          | 2017     | \$       | 1,861.84 |
| City LANCASTER                     | State          | Zip Code (Plus 4) | Descript                     | tion of Exp | enditure |          |          |
|                                    | PA             | 17601             | COMPU                        | TER SYSTE   | M/OFFICI | E BACKUP |          |
| To Whom Paid                       |                |                   | мо                           | DAY         | YEAR     |          |          |
| WELLS FARGO VENDOR FINANCIAL SER   | RVICES         |                   |                              |             |          |          |          |
| Mailing Address P O BOX 70239      |                |                   | 3                            | 24          | 2017     | \$       | 254.91   |
| City PHILADELPHIA                  | State          | Zip Code (Plus 4) | Descript                     | tion of Exp | enditure |          |          |
|                                    | PA             | 19176             | OFFICE                       | EQUIPMEN    | NT       |          |          |
| To Whom Paid                       |                |                   | мо                           | DAY         | YEAR     |          |          |
| MADE TO KEEP                       |                |                   |                              |             |          |          |          |
| Mailing Address 5922 LINGLESTOWN   | RD FIRST FLOOR |                   | 3                            | 29          | 2017     | \$       | 1,707.20 |
| City HARRISBURG                    | State          | Zip Code (Plus 4) | Descript                     | tion of Exp | enditure |          |          |
|                                    | PA             | 17112             | PROF. S                      | ERVICES     |          |          |          |
| To Whom Paid                       |                |                   | МО                           | DAY         | YEAR     |          |          |
| BEST AUTHENTICS                    |                |                   |                              |             |          |          |          |
| Mailing Address 75 UTLEY DRIVE SU  | ITE 104        |                   | 3                            | 30          | 2017     | \$       | 600.00   |
| City CAMP HILL                     | State          | Zip Code (Plus 4) | Descript                     | tion of Exp | enditure |          |          |
|                                    | PA             | 17011             | MERCHA                       | ANDISE      |          |          |          |
| To Whom Paid                       |                |                   | мо                           | DAY         | YEAR     |          |          |
| FULTON BANK                        |                |                   |                              |             |          |          |          |
| Mailing Address P.O. BOX 1189      |                |                   | 3                            | 30          | 2017     | \$       | 311.74   |
| City HARRISBURG                    | State          | Zip Code (Plus 4) | Descript                     | tion of Exp | enditure |          |          |
|                                    | PA             | 17108             | BANK FI                      | EES         |          |          |          |
| To Whom Paid                       |                |                   | мо                           | DAY         | YEAR     |          |          |
| I360 LLC                           |                |                   |                              |             |          |          |          |
| Mailing Address P O BOX 37046      |                |                   | 3                            | 30          | 2017     | \$       | 500.00   |
|                                    |                |                   | ) Description of Expenditure |             |          |          |          |
| City BALTIMORE                     | State          | Zip Code (Plus 4) | Descript                     | tion of Exp | enditure |          |          |

| To Whom Paid  |                  |                        | МО                         | DAY         | YEAR     |    |            |
|---|------------------|------------------------|----------------------------|-------------|----------|----|------------|
| LIBERTY HARRISBURG R E LLC                                    |                  |                        | 140                        |             | ILAK     |    |            |
| Mailing Address 3 LEMOYNE DRIVE                               |                  |                        |                            | 30          | 2017     | \$ | 1,770.00   |
| City LEMOYNE  | State            | Zip Code (Plus 4)      | Descrip                    | tion of Exp | enditure |    |            |
|   | PA               | 17043                  | PARKIN                     | G           |          |    |            |
| To Whom Paid<br>PAYCHEX OF NEW YORK LLC                       |                  |                        | мо                         | DAY         | YEAR     |    |            |
| Mailing Address 2405 PARK DRI                                 | VE SUITE 200     |                        | 3                          | 30          | 2017     | \$ | 18,872.34  |
| City HARRISBURG   | State            | Zip Code (Plus 4)      | Descrip                    | tion of Exp | enditure |    |            |
|   | PA               | 17110                  | PAYROL                     | L SERVICE   |          |    |            |
| To Whom Paid  |                  |                        | МО                         | DAY         | YEAR     |    |            |
| STATE STREET BUILDING, INC.                                   |                  |                        |                            |             |          |    |            |
| Mailing Address 4718 OLD GET⊓                                 | TYSBURG RD SUITE | 401                    | 3                          | 30          | 2017     | \$ | 4,890.34   |
| City MECHANICSBURG  | State            | Zip Code (Plus 4)      | Description of Expenditure |             |          |    |            |
|   | PA               | 17055                  | RENT                       |             |          |    |            |
| <b>To Whom Paid</b><br>VERIZON WIRELESS                       |                  |                        | МО                         | DAY         | YEAR     |    |            |
| Mailing Address P.O. BOX 2550                                 | 5                |                        | 3                          | 30          | 2017     | \$ | 142.50     |
| City LEHIGH VALLEY State Zip Code (Plus 4) Description of Exp |                  |                        | enditure                   |             |          |    |            |
|   | PA               | 18002                  | CELL PH                    | IONE        |          |    |            |
|   |                  |                        |                            |             |          |    | PAGE TOTAL |
| Enter Grand Total of Expenditu                                | rac on Daga 1 Da | nort Cover Dage Item [ | `                          |             |          |    |            |