

Campaign Finance Report

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

Filer Identification Number : 20140011		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: AUMENT FOR SENATE											
Street Address: PO BOX 194											
City: LANDISVILLE					State: PA		Zip Code: 17538-0194				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2017	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO	DAY	YEAR	REP 36			
					11	7	2017	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		5	2	2017		6	5	2017			
A. Amount Brought Forward From Last Report					\$ 42,481.92						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 2,500.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 44,981.92						
D. Total Expenditures (From Schedule III)					\$ 8,104.00						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 36,877.92						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 0.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
AUMENT FOR SENATE	From: <u>5/2/2017</u> To: <u>6/5/2017</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 0.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 0.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 0.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 2,000.00
All Other Contributions (Part D)	\$ 500.00
TOTAL for the Reporting Period (3)	\$ 2,500.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.00

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 2,500.00
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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 AUMENT FOR SENATE	Reporting Period From: <u>5/2/2017</u> To: <u>6/5/2017</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee PA Committee for Affordable Housing				MO	DAY	YEAR	\$ 500.00
Mailing Address 2509 N. Front Street				5	30	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110					
Full Name of Contributing Committee MALADY & WOOTEN PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 604 N THIRD ST				5	30	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101-0000					
Full Name of Contributing Committee FIRSTENERGY PAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 76 S MAIN ST				5	30	2017	
City AKRON	State OH	Zip Code (Plus 4) 443080000					

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

PAGE TOTAL
\$ 2,000.00

PART D
ALL OTHER CONTRIBUTIONS
OVER \$250.00

**Use this Part to itemize all other contributions with an aggregate value of
over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C.)**

Name of Filing Committee or Candidate AUMENT FOR SENATE	Reporting Period From: <u>5/2/2017</u> To: <u>6/5/2017</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Robert Taylor							
Mailing Address Box 220				5	30	2017	\$ 500.00
City Solebury	State PA	Zip Code (Plus 4) 18963					
Employer Name The Cameron Companies				Occupation CEO			
Employer Mailing Address/Principal Place of Business Box 220			City Solebury	State PA	Zip Code (Plus 4) 18963		

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

PAGE TOTAL
\$ 500.00

PART E
OTHER RECEIPTS

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

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

DATE				AMOUNT
Full Name				
Mailing Address				
City				
State				
Zip Code (Plus 4)				
Receipt Description				

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS
DURING THE REPORTING PERIOD.**

Detailed Summary Page

Name of Filing Committee or Candidate		Reporting Period	
AUMENT FOR SENATE		From: <u>5/2/2017</u> To: <u>6/5/2017</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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 Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period From: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
AUMENT FOR SENATE	From <u>5/2/2017</u> To: <u>6/5/2017</u>

DATE				AMOUNT
To Whom Paid CAM Notary	MO	DAY	YEAR	
Mailing Address 3626 Columbia Ave.	5	8	2017	\$ 15.00
City Lancaster	State PA	Zip Code (Plus 4) 17603	Description of Expenditure Administrative	
To Whom Paid Phoenix Fundraising Partners	MO	DAY	YEAR	
Mailing Address 2601 N. Front St.	5	9	2017	\$ 1,000.00
City Harrisburg	State PA	Zip Code (Plus 4) 17110	Description of Expenditure Administrative	
To Whom Paid Phoenix Fundraising Partners	MO	DAY	YEAR	
Mailing Address 2601 N. Front St.	6	5	2017	\$ 1,000.00
City Harrisburg	State PA	Zip Code (Plus 4) 17110	Description of Expenditure Administrative	
To Whom Paid Garden Spot Village	MO	DAY	YEAR	
Mailing Address 433 S. Kinzer Ave	5	9	2017	\$ 89.00
City New Holland	State PA	Zip Code (Plus 4) 17557	Description of Expenditure Advertising	
To Whom Paid Friends of Craig Stedman	MO	DAY	YEAR	
Mailing Address Box 431	5	30	2017	\$ 5,000.00
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Contribution	

To Whom Paid Friends of Sallie Mundy			MO	DAY	YEAR	
Mailing Address Box 412			5	30	2017	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Contribution			\$ 1,000.00
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 8,104.00

