

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		2003196		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> Killion Victory Committee												
<b>Street Address:</b> 50 S. Providence Road												
<b>City:</b> Media						<b>State:</b> PA			<b>Zip Code:</b> 19063			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2017	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>				
						11	7	2017				
									(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		10	24	2017		11	27	2017				
<b>A. Amount Brought Forward From Last Report</b>						\$ 14,599.70						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 14,151.32						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 28,751.02						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 5,897.06						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 22,853.96						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 0.00						

## AFFIDAVIT SECTION

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

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

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

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

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

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
Detailed Summary Page

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Killion Victory Committee	From: <u>10/24/2017</u> To: <u>11/27/2017</u>

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

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

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 13,151.32
<b>All Other Contributions (Part D)</b>	\$ 1,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 14,151.32

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

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 14,151.32
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

<b>PAGE TOTAL</b>	
\$	0.00

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

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

<b>PAGE TOTAL</b>	
\$	0.00

## PART C

# Contributions Received From Political Committees

### OVER \$250.00

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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Killion Victory Committee	<b>From:</b> <u>10/24/2017</u> <b>To:</b> <u>11/27/2017</u>

				DATE		AMOUNT	
Full Name of Contributing Committee Pfizer PAC - State				MO	DAY	YEAR	\$ 400.00
Mailing Address 235 East 42nd Street				11	6	2017	
City New York	State NY	Zip Code (Plus 4) 10017					
Full Name of Contributing Committee Energy Transfer Partners PAC				MO	DAY	YEAR	\$ 2,500.00
Mailing Address 400 W. 15th Street - Ste. 720				11	9	2017	
City Austin	State TX	Zip Code (Plus 4) 78701					
Full Name of Contributing Committee Energy Transfer Partners PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 400 W. 15th Street - Ste. 720				11	9	2017	
City Austin	State TX	Zip Code (Plus 4) 78701					
Full Name of Contributing Committee Killion for Lt. Governor				MO	DAY	YEAR	\$ 751.32
Mailing Address 50 S. Providence Road				11	9	2017	
City Media	State PA	Zip Code (Plus 4) 19063					
Full Name of Contributing Committee PA Orthopaedic Society PAC				MO	DAY	YEAR	\$ 4,000.00
Mailing Address 510 N. 3rd Street - 3rd Floor				11	20	2017	
City Harrisburg	State PA	Zip Code (Plus 4) 171011111					

Full Name of Contributing Committee				MO	DAY	YEAR	\$5,000.00
Z PAC Pennsylvania Anesthesiologists' PAC							
Mailing Address				11	27	2017	
50 S. Providence Road							
City	Media	State	Zip Code (Plus 4)				
		PA	19063				

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

<b>PAGE TOTAL</b>	
\$	13,151.32

**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.)**

<b>Name of Filing Committee or Candidate</b>  Killion Victory Committee	<b>Reporting Period</b>  <b>From:</b> <u>10/24/2017</u> <b>To:</b> <u>11/27/2017</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
James T. Guille							
<b>Mailing Address</b> 390 Ring Road				11	20	2017	\$ 1,000.00
<b>City</b> Chadds Ford	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  19317					
<b>Employer Name</b> Brandywine Institute of Ortho				<b>Occupation</b> Surgeon			
<b>Employer Mailing Address/Principal Place of Business</b>  1561 Medical Drive			<b>City</b>  Pottstown	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  19464		

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

<b>PAGE TOTAL</b>
\$ 1,000.00

## 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
	<div style="display: flex; justify-content: space-between;"> <span>From:</span> <span>To:</span> </div>

				DATE	AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

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

<b>PAGE TOTAL</b>
\$ 0.00



## SCHEDULE II

**IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

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

**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
Killion Victory Committee		From: <u>10/24/2017</u> To: <u>11/27/2017</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 0.00

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

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

				DATE		AMOUNT	
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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Killion Victory Committee	From <u>10/24/2017</u> To: <u>11/27/2017</u>

DATE				AMOUNT		
To Whom Paid Barsz Gowie Amon & Fultz LLC			MO	DAY	YEAR	\$ 1,500.00
Mailing Address 50 S. Providence Road			11	1	2017	
City Media	State PA	Zip Code (Plus 4) 19063	Description of Expenditure Accounting Services			
To Whom Paid CMC Consulting LLC			MO	DAY	YEAR	\$ 2,500.00
Mailing Address P.O. Box 764			11	1	2017	
City West Chester	State PA	Zip Code (Plus 4) 19381	Description of Expenditure Consulting			
To Whom Paid Upper Chichester Republican Party			MO	DAY	YEAR	\$ 100.00
Mailing Address P.O. Box 2106			11	1	2017	
City Upper Chichester	State PA	Zip Code (Plus 4) 19061	Description of Expenditure Contribution			
To Whom Paid Verizon Wireless			MO	DAY	YEAR	\$ 184.73
Mailing Address P.O. Box 25505			11	13	2017	
City Lehigh Valley	State PA	Zip Code (Plus 4) 180025505	Description of Expenditure Telephone			
To Whom Paid TD Bank			MO	DAY	YEAR	\$ 67.84
Mailing Address Baltimore Pike			11	13	2017	
City Media	State PA	Zip Code (Plus 4) 19063	Description of Expenditure Storage			

To Whom Paid TD Bank			MO	DAY	YEAR	\$ 245.50
Mailing Address     Baltimore Pike			11	13	2017	
City     Media	State PA	Zip Code (Plus 4) 19063	Description of Expenditure Meeting Expense			

To Whom Paid TD Bank			MO	DAY	YEAR	\$ 98.00
Mailing Address     Baltimore Pike			11	13	2017	
City     Media	State PA	Zip Code (Plus 4) 19063	Description of Expenditure Postage			

To Whom Paid TD Bank			MO	DAY	YEAR	\$ 75.00
Mailing Address     Baltimore Pike			11	13	2017	
City     Media	State PA	Zip Code (Plus 4) 19063	Description of Expenditure Postage			

To Whom Paid TD Bank			MO	DAY	YEAR	\$ 10.00
Mailing Address     Baltimore Pike			11	13	2017	
City     Media	State PA	Zip Code (Plus 4) 19063	Description of Expenditure Advertising			

To Whom Paid TD Bank			MO	DAY	YEAR	\$ 15.99
Mailing Address     Baltimore Pike			11	13	2017	
City     Media	State PA	Zip Code (Plus 4) 19063	Description of Expenditure Postage			

To Whom Paid TD Bank			MO	DAY	YEAR	\$ 1,000.00
Mailing Address     Baltimore Pike			11	13	2017	
City     Media	State PA	Zip Code (Plus 4) 19063	Description of Expenditure Event Expenses			

<b>To Whom Paid</b> Brookhaven Fire Company			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 2 Cambridge Road Ste. 52			11	13	2017	
<b>City</b> Brookhaven	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19015	<b>Description of Expenditure</b> Advertising			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 5,897.06

