## **Campaign Finance Report**

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

Filer Identificat	ion	20041	127			Report		CANDI	DATE	СОМ	MITTEE	$\checkmark$	LOBE	BYIST	
Number :		20041	127			Filed B	y:					Ĭ.			
Name of Filing (	Committee, C	andida	ite or Lo	bbyist:		QUIGLE	(, то	м сом т	O ELEC	Т					
Street Address:	560 PIN	E ST													
City:	ROYERS	FORD						State:	PA		Zip Co	<b>de:</b> 19	468		
TYPE OF REPORT	6TH TUESDA		1.	2ND FRIDA PRIMARY	Y PRE		30 DA PRIM		POST-	3.	AMENDI REPORT		Yes	No	$\checkmark$
(place X to the right of	6TH TUESDA PRE-ELECTIO		4.	2ND FRIDA ELECTION	Y PRE		30 DA		POST-	6.	TERMIN REPORT		Yes	No	$\checkmark$
report type)	ANNUAL RE	PORT	7. <b>X</b>	<b>Year</b> 2017				NG METHO			PAPER		$\checkmark$	DISKE	TTE
Name of Office S	± Sought by Ca	ndidat	e:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
								мо	DAY	YEAR			REP		
								11		7 2017	7	(SEE INS	STRUCTIO	ONS FOR (	ODES)
Summary of		nd	мо	DAY	YEAR	2		мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY	
Expenditures	s from:		1	.1 28	2	017 <b>T</b>	0	12	3	1 2017	7				
A. Amount Bro	ught Forwar	d From	Last Re	eport			\$			4,145.88	3				
B. Total Monet	ary Contribu	tions A	nd Rece	eipts (From	1 Sche	dule I)	\$			17,100.00	)				
C. Total Funds	Available (S	um Of	Lines A	and B)			\$			21,245.88	3				
D. Total Expen	ditures (Fror	n Sche	dule III	:)			\$			1,319.18	3				
E. Ending Cash	Balance (Su	btract	Line D l	From Line (	C)		\$			19,926.70					
F. Value Of In-	Kind Contrib	utions	Receive	ed (From S	chedu	le II)	\$			0.00	)				
G. Unpaid Deb	ts And Obliga	ations	(From S	chedule IV	')		\$			30,250.00					
					AFF	IDAVI	<sup>-</sup> SE	CTION							
PART I - If this i		-	•	-							-				
I swear (or affirm correct and compl		ort, inclu	uding the	attached sc	hedules	s filed on p	aper	or by elect	ronic me	dium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and subs	scribed before ı day of	me this		20						Signatu	re of Perso	on Submitt	ing Rep	oort	
	- <u> </u>	ignatur	e	·							Prii	nted Name	1		
My Commission E		<b>.</b>									Ema	ail			
	мо		DA	Y	YR				Area	a Code	Daytir	ne Teleph	one Nu	mber	
Part II- If this is	a report of	a cand	idate's a	authorized	Comn	nittee, Ca	ndid	ate shall	sign he	re.					
I swear (or affirm) No 320) as amend		est of m	y knowle	dge and beli	ef this	political	comm	ittee has n	ot violate	ed any provi	sions of th	e act of Ju	ıne 3,19	937 (P.L	. 1333,
Sworn to and subse	cribed before m day of	ne this		20							Signature	of Candida	ate		
											Print	ed Name			
My Commission For	-	ature									Ema	ail			
My Commission Exp															
	Μ	10	DA	Y	YR				Area C	ode	C	aytime To	elephon	e Numb	er

## SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
QUIGLEY, TOM COM TO ELECT	From:	<u>11/28/20</u>	<u>17</u> <b>To:</b>	<u>12/31/2017</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)			\$	250.00
All Other Contributions (Part B)			\$	250.00
TOTAL for the Reporting	J Period	(2)	\$	500.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	11,100.00
All Other Contributions (Part D)			\$	5,500.00
TOTAL for the Reporting	J Period	(3)	\$	16,600.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	J 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			\$	17,100.00

## 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						
QUIGLEY, TOM COM TO ELECT Fr				From: <u>11/28/2017</u> To: <u>12/</u>							
		DATE			AMOUNT						
Full Name of Contributing Committee H-TECH PAC				мо	DAY	YEAR					
Mailing Address 200 S. THE BELL	EVUE SUITE 850 BRO	AD STREET					\$	250.00			
City PHILADELPHIA	<b>State</b> PA	Zip Code (Plus 4	4)	11	24	2017					
							Г	PAGE TOTAL			

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

AGE TOTAL

\$

250.00

PART B ALL OTHER CONTRIBUTIONS \$50.01 TO \$250.00 Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part A)								
Name of Filing Committee or Candid	ate		Rep	oorting Po	eriod			
QUIGLEY, TOM COM TO ELECT			Fro	m:	<u>12/31/2017</u>			
			1		DATE			AMOUNT
Full Name of Contributor RICHARD D. LEWIS				мо	DAY	YEAR		
Mailing Address 1176 MARCUS DF							\$	250.00
City POTTTOWN	State	Zip Code (Plus 4)	)	12	2	2017		
	PA	19465						
								PAGE TOTAL
Enter Grand Total of Part A on	Schedule I,	Detailed Summary Pa	ge, S	ection 2			\$	250.00

## PART C Contributions Received From Political Committees

OVER \$250.00

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

Name of Filing Committee or Candidate			Reporting	Period			
QUIGLEY, TOM COM TO ELECT			From:	<u>11/2</u>	<u>8/2017</u>	То:	<u>12/31/2017</u>
				DA	TE		AMOUNT
Full Name of Contributing Committee PA INSURANCE FEDERATION PAC				мо	DAY	YEAR	
Mailing Address 1720 MARKET ST 16	00 SUITE						<b>\$</b> 300.00
City PHILADELPHIA	<b>State</b> PA	<b>Zip Code</b> 19103	e (Plus 4)	5	25	2017	
Full Name of Contributing Committee NISOURCE INC. PAC				мо	DAY	YEAR	
Mailing Address 290 W NATIONWIDE	BLVD State OH	<b>Zip Code</b> 43215	e (Plus 4)	6	7	2017	\$ 300.00
Full Name of Contributing Committee AQUA AMERICA INC. H2O PAC		-		мо	DAY	YEAR	
Mailing Address 762 W. LANCASTER A	AVE State PA	<b>Zip Code</b> 19010	e (Plus 4)	6	7	2017	\$ 300.00
Full Name of Contributing Committee BIKEPAC		•		мо	DAY	YEAR	
Mailing Address PO BOX 564 MECHA	NICSBURG PA 19705 State		e (Plus 4)	6	7	2017	\$ 300.00
Full Name of Contributing Committee PMA PAC				мо	DAY	YEAR	
Mailing Address 225 STATE ST City HARRISBURG	<b>State</b> PA	Zip Code	e (Plus 4)	6	7	2017	\$ 300.00

Full Name of Contributing Commi	ttee			DAY	VEAD	
UGI STATE PAC			мо	DAY	YEAR	
Mailing Address 2525 N 11TH	ST PO BOX 12677					<b>\$</b> 300.00
City READING	State	Zip Code (Plus 4)	6	9	2017	
	PA	19612				
Full Name of Contributing Commi AT&T PAC PA	ttee		мо	DAY	YEAR	
Mailing Address 192 W. STATE	ST					<b>\$</b> 300.00
City TRENTON	State	Zip Code (Plus 4)	6	16	2017	
INCLUION .	NJ	08608				
Full Name of Contributing Commi PAW-PAC	ttee		мо	DAY	YEAR	
Mailing Address 800 W HERSHEYPARK DR.						<b>\$</b> 300.00
City HERSHEY	State	Zip Code (Plus 4)	6	21	2017	
	PA	17033				
Full Name of Contributing Commi						
Full Name of Contributing Commi COALITION FOR PENNSYLVANIA			мо	DAY	YEAR	
	FUTURE		мо	DAY	YEAR	<b>\$</b> 600.00
COALITION FOR PENNSYLVANIA Mailing Address PO BOX 1209	FUTURE	Zip Code (Plus 4)	<b>мо</b> 6	<b>DAY</b> 21	<b>YEAR</b> 2017	\$ 600.00
COALITION FOR PENNSYLVANIA Mailing Address PO BOX 1209	FUTURE	<b>Zip Code (Plus 4)</b> 17108				\$ 600.00
COALITION FOR PENNSYLVANIA Mailing Address PO BOX 1209	FUTURE 0 State PA					\$ 600.00
COALITION FOR PENNSYLVANIA Mailing Address PO BOX 1209 City HARRISBURG Full Name of Contributing Commi	FUTURE 0 State PA ttee		- 6	21	2017	
COALITION FOR PENNSYLVANIA Mailing Address PO BOX 12094 City HARRISBURG Full Name of Contributing Commi CHAMBER PAC Mailing Address 417 WALNUT	FUTURE 0 State PA ttee		- 6	21	2017	
COALITION FOR PENNSYLVANIA Mailing Address PO BOX 12094 City HARRISBURG Full Name of Contributing Commi CHAMBER PAC Mailing Address 417 WALNUT	FUTURE 0 State PA ttee ST	17108	- 6 мо	21 DAY	2017 YEAR	
COALITION FOR PENNSYLVANIA Mailing Address PO BOX 12094 City HARRISBURG Full Name of Contributing Commi CHAMBER PAC Mailing Address 417 WALNUT	FUTURE 0 ST ST State PA State PA	17108 Zip Code (Plus 4)	- 6 мо	21 DAY	2017 YEAR	
COALITION FOR PENNSYLVANIA Mailing Address PO BOX 12094 City HARRISBURG Full Name of Contributing Commi CHAMBER PAC Mailing Address 417 WALNUT City HARRIBURG Full Name of Contributing Commi	FUTURE 0 State PA ST State PA ttee	17108 Zip Code (Plus 4)	б мо 6	21 DAY 21	2017 YEAR 2017	\$ 300.00
COALITION FOR PENNSYLVANIA Mailing Address PO BOX 12094 City HARRISBURG Full Name of Contributing Commi CHAMBER PAC Mailing Address 417 WALNUT City HARRIBURG Full Name of Contributing Commi CUPAC Mailing Address 4309 N. FROM	FUTURE 0 State PA ST State PA ttee	17108 Zip Code (Plus 4)	б мо 6	21 DAY 21	2017 YEAR 2017	\$ 300.00
COALITION FOR PENNSYLVANIA Mailing Address PO BOX 12094 City HARRISBURG Full Name of Contributing Commi CHAMBER PAC Mailing Address 417 WALNUT City HARRIBURG Full Name of Contributing Commi CUPAC Mailing Address 4309 N. FRON	FUTURE 0 State PA ttee ST State PA ttee INT ST	17108 Zip Code (Plus 4) 17101	6 мо 6 мо	21 DAY 21 DAY	2017 YEAR 2017 YEAR	\$ 300.00

Full Name of Contributing Committe	e			DAY	VEAD		
PECOPAC			мо	DAY	YEAR		
Mailing Address 2301 MARKET S	T. SUITE 14-2					<b>\$</b> 1	,000.00
City PHILADELPHIA	State	Zip Code (Plus 4)	6	26	2017		
	PA	19103					
Full Name of Contributing Committee	e		мо	DAY	YEAR		
Mailing Address 1800 CENTER S	Г					\$	300.00
City CAMP HILL	State	Zip Code (Plus 4)	6	26	2017		
	РА	17089					
Full Name of Contributing Committee	e		мо	DAY	YEAR		
Mailing Address 2949 N. FRONT ST.						\$	300.00
City HARRISBURG	State	Zip Code (Plus 4)	6	26	2017		
	PA	17110					
Full Name of Contributing Committee PPL PEOPLE FOR GOOD GOVERNME			мо	DAY	YEAR		
Mailing Address 2 N. NINTH ST						\$	300.00
City ALLENTOWN	State	Zip Code (Plus 4)	7	10	2017		
	PA	18101					
Full Name of Contributing Committee	e		мо	DAY	YEAR		
Mailing Address	ION AVE NW SUITE 4	100 FAST				<b>\$</b> 1	000.00
							,000.00
	State	Zip Code (Plus 4)	7	10	2017		,000.00
101 CONSTITUT			7	10	2017		,000.00
	State DC	Zip Code (Plus 4)	- 7 мо	10 DAY	2017 YEAR		,000.00
City WASHINGTON Full Name of Contributing Committee EXELON PAC	State DC	<b>Zip Code (Plus 4)</b> 20001		DAY	YEAR	\$ 2	,000.00
City WASHINGTON Full Name of Contributing Committee EXELON PAC Mailing Address 101 CONSTITUT	State DC	<b>Zip Code (Plus 4)</b> 20001				\$ 2	
City WASHINGTON Full Name of Contributing Committee EXELON PAC Mailing Address 101 CONSTITUT	State DC Se ION AVE NW SUITE 4	<b>Zip Code (Plus 4)</b> 20001	мо	DAY	YEAR	<b>\$</b> 2	

Full Name of Contributing Com	mittee		мо	DAY	YEAR	
FIRST ENERGY PAC						
Mailing Address 76 S. MAIN	ST					\$ 300.00
City AKRON	State	Zip Code (Plus 4)	7	10	2017	
	ОН	44308				
Full Name of Contributing Com	mittee		мо	DAY	YEAR	
PHHA PAC						
Mailing Address 1001 HARRA				\$ 1,000.00		
City     CHESTER     State     Zip Code (Plus 4)				2	2017	
Full Name of Contributing Committee VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB-PA				DAY	YEAR	
Mailing Address 417 WALNU	T ST. 1ST FL.					\$ 300.00
City HARRISBURG	State	Zip Code (Plus 4)	12	23	2017	
	PA	17101				
Full Name of Contributing Com TROOPERS ASSOCIATION PAC			мо	DAY	YEAR	
Mailing Address 3625 VARTA	ANWAY					\$ 1,000.00
City HARRISBURG	State	Zip Code (Plus 4)	12	29	2017	
	PA	17110				
						PAGE TOTAL
Enter Grand Total of Part C o	_					

## 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.)

ame of Filing Committee or Candidate					Reporting Period					
QUIGLEY, TOM COM TO ELECT				Fron	n:	<u>11/28/2</u>	<u>017</u> To	: <u>12/31/2017</u>		
					DA	TE		AMOUNT		
Full Name of Contributor HARRY CITRINO					мо	DAY	YEAR			
Mailing 112 ITHAN LANE								<b>\$</b> 1,000.00		
City COLLEGEVILLE	<b>State</b> PA	<b>Zip</b> 194	<b>Code (Plus</b> 126	4)	11	10	2017			
SELF-EMPLOTED					Occupat	ion B	USINES	SS MAN		
Employer Mailing Address/Principal Place of City Business						State		Zip Code (Plus 4)		
636 E. HIGH ST POTTSTOWN					PA 1946			19464		
Full Name of Contributor CHARLES J. GULATI					мо	DAY	YEAR			
Mailing 230 JORDAN DR. Address								<b>\$</b> 500.00		
City GILBERTSVILLE	<b>State</b> PA	<b>Zip</b> 195	<b>Code (Plus</b>	4)	11	24	2017			
Employer Name SUNNYBROOK BALLR	ООМ				Occupation PRESIDENT					
Employer Mailing Address/Principal Plac Business	e of		City		State Zip Code (Plus			Zip Code (Plus 4)		
50 SUNNYBROOK RD.			POTTSTO	WN		PA		19464		
Full Name of Contributor JACOB E. DAILEY					мо	DAY	YEAR			
Mailing PO BOX 471 Address								<b>\$</b> 1,000.00		
CityGILBERTSVILLEStateZip CodPA19525				4)	11	24	2017			
Employer Name					Occupat	i <b>on</b> R	RETIRED			
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Code (Plus 4)		

Full Name of Contributor JACOB E. DAILEY				мо	DAY	YEAR		
Mailing PO BOX 471 Address							\$	500.00
City GILBERTSVILLE	State	Zip	Code (Plus 4)	12	2	201	/	
	PA	195	525					
Employer Name				Occupat	i <b>on</b>	RETIRE	D	
Employer Mailing Address/Principal Plac Business	e of		City		State		Zip (	Code (Plus 4)
Full Name of Contributor								
A. ROSS MYERS				мо	DAY	YEAR		
Mailing PO BOX 140 Address							\$	2,000.00
City SKIPPACK	State	Zip	Code (Plus 4)	11	24	201		
	PA	194	174					
Employer Name ALLAN A. MYERS INC.		•		Occupat	ion (	CEO	•	
Employer Mailing Address/Principal Plac Business	e of		City		State		Zip	Code (Plus 4)
1805 BERKS RD.			WORCESTER		PA		194	490
Full Name of Contributor KATHLEEN S. GORSKI				мо	DAY	YEAR		
Mailing 4478 PERKIOMEN CRI Address	EEK RD.						\$	500.00
City COLLEGEVILLE	State	Zip	Code (Plus 4)	12	2	201	7	
	PA	194	126					
Employer Name GORSKI ENGINEERIN	G INC.	•		Occupat	ion A	Admini	STRAT	ΓOR
Employer Mailing Address/Principal Plac Business	e of		City		State		Zip	Code (Plus 4)
1 IRON BRIDGE DR.			COLLEGEVILLE		РА		194	426
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section						ſ		PAGE TOTAL
	J		,				\$	5,500.00

### 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	2		Report	ting Perio	od				
			From:			То:	:		
				D	ATE			AMOUNT	ſ
Full Name				мо	DAY	YEAR			
Mailing Address							\$	5	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description	·					•	•		
Enter Grand Total of Part E on Sched	ule T. Detailed Sum	mary Page	Section	4				PAGE TO	TAL
			20000				\$		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 Perio	d	
QUIGLEY, TOM COM TO ELECT	From:	<u>11/28/2017</u> <b>то:</b>	<u>12/31/2017</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ΓF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	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					
F			From:			То:		
				DATE		AMOU	NT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)	,					
Description of Contribution:								
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Sumr Section 2.				mary Pag	je,	PAGE 1	OTAL	
					4		0.00	

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

Name of Filing Committee or Candidate			Reporting Period							
					Fro	om: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(P	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business			State		Zip 4)	Code(Plus	Descri	ption of	Contribution	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period						
QUIGLEY, TOM COM TO ELECT			From <u>11/28/2017</u>			То:	<u>12/31/2017</u>		
				DATE			AMOUNT		
To Whom Paid RED MARERICK MEDIA LLC				DAY	YEAR				
Mailing Address 403 NORTH SECO	ND ST. FL. 2		5	3	2017	\$	155.00		
CityHARRISBURGStateZip Code (Plus 4)PA17101				Description of Expenditure URL RENEWAL					
To Whom Paid HRCC			мо	DAY	YEAR				
Mailing Address 500 NORTH THIRE	O ST. 4TH FL.		6	21	2017	\$	160.88		
City HARRISBURG	CityHARRISBURGStateZip Code (Plus 4)PA17108			Description of Expenditure INVITATIONS					
To Whom Paid HRCC			мо	DAY	YEAR				
Mailing Address 500 NORTH THIRE	O ST. 4TH FL.		8	29	2017	\$	650.00		
City     HARRISBURG     State     Zip Code (Plus 4)       PA     17108			Description of Expenditure CONTRIBUTION						
<b>To Whom Paid</b> 20/10 DESIGN			мо	DAY	YEAR				
Mailing Address 1131 DODGSON F	RD.		9	24	2017	\$	324.00		
CityWEST CHESTERStateZip Code (Plus 4)PA19382			Description of Expenditure WEB HOSTING						
<b>To Whom Paid</b> PAY PAL			мо	DAY	YEAR				
Mailing Address 2211 NORTH FIRS	ST ST.		11	10	2017	\$	29.30		
CitySAN JOSEStateZip Code (Plus 4)CA95131			Description of Expenditure FEE						
Enter Grand Total of Expenditures	s on Page 1. Re	port Cover Page. Item I	 D.				PAGE TOTAL		
						\$	1,319.18		

## SCHEDULE IV STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate Reporting				ng Period				
QUIGLEY, TOM COM TO ELECT			From:	<u>11</u>	/28/2017	То:	<u>-</u>	12/31/2017
					DATE			Outstanding Balance of Debt
Name of Creditor THOMAS J. QUIGLEY				мо	DAY	YEAR		
Mailing Address 560 PINE ST			3	17	2004	\$	50.00	
City ROYERSFORD	<b>State</b> PA	<b>Zip Code (Pl</b> 19468	us 4)	Description of Debt LOAN				
					DATE			Outstanding Balance of Debt
Name of Creditor THOMAS J. QUIGLEY				мо	DAY	YEAR		
Mailing Address 560 PINE ST				3	19	2004	\$	2,000.00
City ROYERSFORD	StateZip Code (Plus 4)PA19468			Description of Debt LOAN				
					DATE			Outstanding Balance of Debt
Name of Creditor THOMAS J. QUIGLEY				мо	DAY	YEAR		
Mailing Address 560 PINE ST				4	23	2004	\$	4,000.00
CityROYERSFORDStateZip Code (Plus 4)PA19468			Description of Debt LOAN					
			DATE				Outstanding Balance of Debt	
Name of Creditor THOMAS J. QUIGLEY				мо	DAY	YEAR		
Mailing Address 560 PINE ST				5	20	2004	\$	4,200.00
City ROYERSFORD	<b>State</b> PA	<b>Zip Code (Pl</b> 19468	us 4)	Description of Debt LOAN				

				DATE		Outstanding Balance of Debt
Name of Creditor THOMAS J. QUIGLEY			мо	DAY	YEAR	
Mailing Address 560 PINE ST			10	7	2004	\$ 20,000.00
City ROYERSFORD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19468	<b>Descri</b> p LOAN	otion of De	bt	
	•	•				PAGE TOTAL
Enter Grand Total of Unpaid Deb	Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.					\$ 30,250.00