Campaign Finance Report

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

Filer Identificati Number :	on 2013	0096				port		CANDI	DATE		СОМ	1ITTEE	✓	LOBE	SYIST	
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		ALL	IAN	CE FO	R A BET	TER PE	NNS	LVANI.	<u>——</u> - А				
Street Address:	500 NORTH 1	2TH STI	REET,SUITE	100												
City:	LEMOYNE							State:	PA			Zip Cod	de: 17	7043		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	/ PRE	- 2	2.	30 DA		POST-	3.		AMENDM REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	/ PRE	≣- !	5. X	30 DA		POST-	6.		TERMINA REPORT		Yes	No	~
report type)	ANNUAL REPORT	7.	Year 2019					NG METH				PAPER		/	DISKE	ГТЕ
Name of Office S	Sought by Candida	te:	•					DATE C	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
	, , , , , , , , , , , , , , , , , , ,							МО	DAY	YE	AR	Number	Code			Code
								11		5	2019		(SEE IN	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures	Expenditures from: 9 17					Т	0	10		21	2019					
A. Amount Brought Forward From Last Report							\$			62,	107.20					
B. Total Monetary Contributions And Receipts (From Schedule							\$		128,425.00							
C. Total Funds Available (Sum Of Lines A and B)							\$			190,5	523.20					
D. Total Expenditures (From Schedule III)							\$			82,2	200.00					
E. Ending Cash	Balance (Subtract	Line D	From Line C	:)			\$:	108,3	32.20					
F. Value Of In-	Kind Contributions	Receiv	ed (From Sc	hedu	le II	:)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			1		
				AFF	IDA	\VI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign h	nere.	If th	is is	a Car	ndidate r	eport, o	andi	date sig	ın here.				
I swear (or affirm) correct and complete) that this report, incl ete.	uding the	e attached sch	edule	s filed	d on	paper	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , true
Sworn to and subs	cribed before me this	;	20							S	ignature	of Perso	n Submit	ting Rep	ort	
							-					Prin	ted Name	e		_
My Commission Ex	Signatu opires	re										Ema	il			
	мо	D	AY	YR			-		Are	ea Coc	le		e Telepi	none Nu	mber	
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and belie	ef this	polit	tical	comm	ittee has r	ot viola	ted an	y provisi	ions of the	e act of J	une 3,1	937 (P.L.	1333,
Sworn to and subsc	ribed before me this										Si	ignature o	of Candid	ate		
	day of		_ 20				_					Dulmt-	d Name			
	Signature						-					Printe	d Name			
My Commission Exp	_											Ema	il			
	МО	D	AY	YR	l		-		Area	Code		Da	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
ALLIANCE FOR A BETTER PENNSYLVANIA	From:	<u>9/17/201</u>	<u>9</u> То	: <u>10/21/2019</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	(2)	\$	0.00	
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	128,425.00
TOTAL for the Reporting	Period	(3)	\$	128,425.00
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			\$	128,425.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
		From: To) :		
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•			•	•		PAGE TOTAL

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

0.00

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee or Candidate			Reporting Period From: To:					
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	1					

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

PAGE TOTAL \$0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

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

Name of Filing Committee or Candi	date		Reporting Period					
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

ALL OTHER CONTRIBUTIONS

OVER \$250.00

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

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

Name of Filing Committee or Candidate			Rep	orting Pe	riod		
ALLIANCE FOR A BETTER PENNSYLVAI	NIA		Fror	m:	9/17/2	<u>019</u> To:	10/21/2019
				D	ATE		AMOUNT
Full Name of Contributor NATIONAL ASSOCIATION OF REALTOR	S			мо	DAY	YEAR	
dress 430 N. MICHIGAN AVENUE State Zip Code (Plus 4)						2010	\$ 128,425.00
City CHICAGO	State IL	Zip Code (Plus	5 4)	10	11	2019	
Employer Name SAME				Occupa	tion	RADE AS	SSOCIATION
Employer Mailing Address/Principal Place Business SAME	ce of	City		•	State		Zip Code (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page,	Section	on 3.		\$	PAGE TOTAL 128,425.00

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 or	Candidate		Report	ing Perio	od				
			From:			To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	1		
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description	·	·		•			•		
Enter Grand Total of Part E	on Schedule I. Detailer	l Summary Page.	Section	4.				PAGE TO	ΓAL
- Communication of the Ex	Januara 1/ Betained	. Jaai y 1 ago,	Dection	••			\$		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	d						
ALLIANCE FOR A BETTER PENNSYLVANIA	From:	<u>9/17/2019</u> To:	10/21/2019					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR							
TOTAL for the Reporting Pe	eriod (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, 1		\$	0.00					

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

lailing Address			Reporting Period				
ull Name of Contributor lailing Address ity State Zip Code (Plus 4)			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	1				Re	porting l	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									- \$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candida	te		Reporti	ng Period			
ALLIANCE FOR A BETTER PENNSYLV	ANIA		From	9/17	7/2019	То:	10/21/2019
				DATE			AMOUNT
To Whom Paid SGS, INC			мо	DAY	YEAR		
Mailing Address 6211 NW 132ND 9	ST.		10	1	2019	\$	17,500.00
City GAINESVILLE	State FL	Zip Code (Plus 4) 32653	DIRECT	otion of Exp MAIL IN S HESTER C			ANCE FARREL
To Whom Paid SGS, INC			мо	DAY	YEAR		
Mailing Address 6211 NW 132ND 9	ST.		10	14	2019	\$	17,500.00
City GAINESVILLE	State FL	Zip Code (Plus 4) 32653	DIRECT	Description of Expenditure DIRECT MAIL - SUPPORT OF TERRAN FOR CHESTER CO			
To Whom Paid SGS, INC			мо	DAY	YEAR		
Mailing Address 6211 NW 132ND 9	ST.		10	14	2019	\$	4,075.00
City GAINESVILLE	State FL	Zip Code (Plus 4) 32653	1 -				EL RIVERA FOR
To Whom Paid SGS, INC			мо	DAY	YEAR		
Mailing Address 6211 NW 132ND 5	ST.		10	18	2019	\$	2,950.00
City GAINESVILLE	State FL	Zip Code (Plus 4) 32653	DIRECT	otion of Exp MAIL - SU WRENC			TA SPIELVOGEL
To Whom Paid SGS, INC			МО	DAY	YEAR		
Mailing Address 6211 NW 132ND ST.		10	21	2019	\$	17,500.00	
City GAINESVILLE State Zip Code (Plus 4) FL 32653			Description of Expenditure DIRECT MAIL - SUPPORT OF TERRANCE FARRELL FOR CHESTER C				

To Whom Paid SGS, INC			мо	DAY	YEAR			
363, INC								
Mailing Address 6211 NW 132	≥ND ST.		10	21	2019	\$	8,500.00	
City GAINESVILLE	State	Zip Code (Plus 4)	Descri	tion of Exp	enditure			
GAINESVILLE	FL	32653	DIREC	-			T DUNN FOR	
To Whom Paid SGS, INC			МО	DAY	YEAR			
Mailing Address 6211 NW 132	2ND ST.		10	21	2019	\$	7,000.00	
City GAINESVILLE	State	Zip Code (Plus 4)	Description of Expenditure					
FL 32653				-			TTA SPIELVOGEL	
To Whom Paid SGS, INC			мо	DAY	YEAR			
Mailing Address 6211 NW 132	2ND ST.		10	21	2019	\$	3,100.00	
City GAINESVILLE	State	Zip Code (Plus 4)	Descri	tion of Exp	enditure			
GAINESVIEE	FL	32653	DIRECT	-			AN BOYD FOR	
To Whom Paid SGS, INC			МО	DAY	YEAR			
Mailing Address 6211 NW 132	2ND ST.		10	21	2019	\$	4,075.00	
City GAINESVILLE	State	Zip Code (Plus 4)	Descri	tion of Exp	enditure	1		
FL 32653			· ·	Γ MAIL - Sl			AEL RIVERA FOR	
	·	·	-		ĺ		PAGE TOTAL	
Enter Grand Total of Expendit	tures on Page 1, Re	eport Cover Page, Item D	•			\$	82,200.00	