

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 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 2019	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				
					11	5	2019	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		10	22	2019		11	25	2019			
A. Amount Brought Forward From Last Report					\$ 88,398.76						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 10,250.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 98,648.76						
D. Total Expenditures (From Schedule III)					\$ 3,306.90						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 95,341.86						
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>10/22/2019</u> To: <u>11/25/2019</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)	\$ 250.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 250.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 10,000.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 10,000.00

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.)	\$ 10,250.00
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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 AUMENT FOR SENATE	Reporting Period From: <u>10/22/2019</u> To: <u>11/25/2019</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee HEALTH PARTNERS PLANS PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 901 MARKET ST, SUITE 500			11	8	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19107-0000				

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

PAGE TOTAL
\$ 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)					

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 Candidate AUMENT FOR SENATE	Reporting Period From: <u>10/22/2019</u> To: <u>11/25/2019</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
UGI State PAC				11	8	2019	
Mailing Address Box 12677							
City	Reading	State	PA	Zip Code (Plus 4)		19612	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PECO PAC				11	8	2019	
Mailing Address 2301 MARKET ST S14-2							
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		19103-0000	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 5,000.00
EXCELONPAC				11	8	2019	
Mailing Address 101 Constitution Ave, NW							
City	Washington	State	DC	Zip Code (Plus 4)		20001	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
CHAMBERPHL PAC				11	8	2019	
Mailing Address 200 SOUTH BROAD ST STE 700							
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		19102-0000	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PA Associated Builders & Contractors PAC				11	8	2019	
Mailing Address 135 Shellyland Road							
City	Manheim	State	PA	Zip Code (Plus 4)		17545	

Full Name of Contributing Committee PHARMPAC (PA PHARMACY PAC)			MO	DAY	YEAR	\$ 500.00
Mailing Address 508 NORTH THIRD STREET			11	8	2019	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011199				
Full Name of Contributing Committee PA BANKERS PUB AFFAIRS (PABPAC)			MO	DAY	YEAR	\$ 500.00
Mailing Address 3897 N FRONT ST			11	8	2019	
City HARRISBURG	State PA	Zip Code (Plus 4) 171100000				
Full Name of Contributing Committee PA INSURANCE PAC (PIPAC)			MO	DAY	YEAR	\$ 500.00
Mailing Address 1600 MARKET ST STE 1720			11	8	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191030000				
Full Name of Contributing Committee FoodPac of PA			MO	DAY	YEAR	\$ 500.00
Mailing Address Box 870			11	8	2019	
City Camp Hill	State PA	Zip Code (Plus 4) 17011				
Full Name of Contributing Committee First Energy PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 76 S. Main St.			11	8	2019	
City Akron	State OH	Zip Code (Plus 4) 44308				

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

PAGE TOTAL
\$ 10,000.00

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	Reporting Period
	From: To:

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

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			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.

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>10/22/2019</u> To: <u>11/25/2019</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>10/22/2019</u> To: <u>11/25/2019</u>

DATE				AMOUNT		
To Whom Paid Panera Bread			MO	DAY	YEAR	\$ 30.90
Mailing Address 2092 Fruitville Pike			10	23	2019	
City Lancaster	State PA	Zip Code (Plus 4) 17601	Description of Expenditure Meals			
To Whom Paid LNP Group			MO	DAY	YEAR	\$ 9.95
Mailing Address 8 W. King St.			10	24	2019	
City Lancaster	State PA	Zip Code (Plus 4) 17608	Description of Expenditure Administrative			
To Whom Paid CAM Notary			MO	DAY	YEAR	\$ 5.00
Mailing Address 3626 Columbia Ave.			10	24	2019	
City Lancaster	State PA	Zip Code (Plus 4) 17603	Description of Expenditure Administrative			
To Whom Paid Apple			MO	DAY	YEAR	\$ 0.99
Mailing Address 1 Infinite Loop			10	29	2019	
City Cupertino	State PA	Zip Code (Plus 4) 95014	Description of Expenditure Administrative			
To Whom Paid Verizon Wireless			MO	DAY	YEAR	\$ 268.05
Mailing Address 142 Park City Center			10	30	2019	
City Lancaster	State PA	Zip Code (Plus 4) 17601	Description of Expenditure Administrative			

To Whom Paid S'more Space Storage			MO	DAY	YEAR	\$ 181.26
Mailing Address 581 Stoney Battery Road			11	1	2019	
City Landisville	State PA	Zip Code (Plus 4) 17538	Description of Expenditure Administrative			
To Whom Paid Constant Contact			MO	DAY	YEAR	\$ 74.20
Mailing Address 1601 Trapello Road			11	3	2019	
City Waltham	State MA	Zip Code (Plus 4) 02431	Description of Expenditure Administrative			
To Whom Paid Don Purdum			MO	DAY	YEAR	\$ 2,000.00
Mailing Address 129 Marticville Road			11	4	2019	
City Lancaster	State PA	Zip Code (Plus 4) 17603	Description of Expenditure Administrative			
To Whom Paid Trio Bar and Grille			MO	DAY	YEAR	\$ 25.30
Mailing Address 3707 Marietta Ave			11	6	2019	
City Columbia	State PA	Zip Code (Plus 4) 17512	Description of Expenditure Meals			
To Whom Paid Uber Technologies			MO	DAY	YEAR	\$ 20.31
Mailing Address 1455 Market Street			11	8	2019	
City San Francisco	State CA	Zip Code (Plus 4) 94103	Description of Expenditure Transportation			
To Whom Paid Uber Technologies			MO	DAY	YEAR	\$ 26.77
Mailing Address 1455 Market Street			11	8	2019	
City San Francisco	State CA	Zip Code (Plus 4) 94103	Description of Expenditure Transportation			

To Whom Paid Chilangos Restaurant			MO	DAY	YEAR	\$ 22.79
Mailing Address 56 N. Broad St.			11	12	2019	
City Lititz	State PA	Zip Code (Plus 4) 17543	Description of Expenditure Meals			

To Whom Paid Amtrak			MO	DAY	YEAR	\$ 400.00
Mailing Address 53 McGovern Ave			11	12	2019	
City Lancaster	State PA	Zip Code (Plus 4) 17602	Description of Expenditure Transportation			

To Whom Paid Allianz Insurance			MO	DAY	YEAR	\$ 36.00
Mailing Address Box 71533			11	12	2019	
City Richmond	State VA	Zip Code (Plus 4) 23255	Description of Expenditure Transportation			

To Whom Paid Fine Wine & Good Spirits			MO	DAY	YEAR	\$ 104.69
Mailing Address Mount Joy Square			11	18	2019	
City Mt Joy	State PA	Zip Code (Plus 4) 17552	Description of Expenditure Campaign Expense			

To Whom Paid LNP Group			MO	DAY	YEAR	\$ 9.95
Mailing Address 8 W. King St.			11	24	2019	
City Lancaster	State PA	Zip Code (Plus 4) 17608	Description of Expenditure Administrative			

To Whom Paid Belvedere Inn			MO	DAY	YEAR	\$ 90.74
Mailing Address 402 N. Queen St.			11	25	2019	
City Lancaster	State PA	Zip Code (Plus 4) 17603	Description of Expenditure Meals			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 3,306.90

