Campaign Finance Report

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

| Filer Identificat Number : | ion 2019 | 90132 | | | Report Filed B | | CANDI | DATE | [| СОМИ | MITTEE | ✓ | LOBI | BYIST | |
|---|---------------------------------|-------------|-----------------------|----------|-------------------|---------------|-------------|-----------|---------|----------|--------------------|----------------|--------------|----------|-----------------------|
| Name of Filing (| Committee, Candie | date or L | obbyist: | | | | MARCI M | IUSTEL | LO | | | | | | |
| Street Address: | | | | | | | | | | | | | | | |
| City: | BUTLER | | | | | | State: | PA | | | Zip Co | de: 16 | 001 | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDA PRIMARY | Y PRE- | - 2. X | 30 D/ PRIM | | POST- 3. | | | AMENDN REPORT | | Yes | No | ✓ |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDA ELECTION | Y PRE | - 5. | 30 D/ ELEC | | POST- | 6. | | TERMIN/ REPORT | | Yes | No | \checkmark |
| report type) | ANNUAL REPORT | r 7. | Year 2020 | | | | NG METHO | | | | PAPER | | \checkmark | DISKE | TTE |
| Name of Office s | L Sought by Candida | ate: | • | | - | | DATE O | F ELEC | СТІОІ | N | District Number | Office Code | Par | ty Code | County Code |
| | | | | | | | мо | DAY | YE | AR | | | REP | | |
| | | | | | | | 11 | | 3 | 2020 | | (SEE INS | TRUCTI | ONS FOR | CODES) |
| | Receipts and | мо | DAY | YEAR | | | мо | DAY | YE | AR | FC | OR OFFIC | E USE | ONLY | |
| Expenditures | s from: | | 3 10 | 20 | 020 T | 0 | 5 | 1 | 18 | 2020 | | | | | |
| A. Amount Bro | ught Forward Fro | m Last R | eport | | | \$ | | | 24,6 | 31.98 | | | | | |
| B. Total Monet | ary Contributions | And Rec | eipts (Fron | n Schee | dule I) | \$ | | | 19,5 | 00.00 | | | | | |
| C. Total Funds | Available (Sum O | of Lines A | and B) | | | \$ | | 44,131.98 | | | | | | | |
| D. Total Expen | ditures (From Sch | nedule II | I) | | | \$ | | 32,159.11 | | | | | | | |
| E. Ending Cash | Balance (Subtrac | ct Line D | From Line | C) | | \$ | | | 11,97 | 72.87 | - | | | | |
| F. Value Of In- | Kind Contribution | s Receiv | ed (From S | chedul | le II) | \$ | | | 2,00 | 00.00 | - | | | | |
| G. Unpaid Deb | ts And Obligations | s (From S | Schedule IV | /) | | \$ | | | | 0.00 | | | | | |
| | | | | AFF | IDAVI | T SE | CTION | | | | | | | | |
| | s a Committee rep | - | - | | | | | | | | - | | | | |
| I swear (or affirm correct and compl |) that this report, ind ete. | cluding the | e attached sc | hedules | filed on | paper | or by elect | ronic me | edium, | are to t | the best o | f my knov | vledge | and beli | ef , true |
| Sworn to and subs | scribed before me th day of | is | 20 | | | | | | Si | gnature | e of Perso | n Submitt | ing Rep | oort | |
| | Signati | ure | | | | _ | | | | | Prin | ted Name | | | |
| My Commission E | - | | | | | _ | | | | | Ema | il | | | |
| | мо | D/ | AY | YR | | | | Are | ea Code | e | Daytin | ne Teleph | one Nu | mber | |
| Part II- If this is | a report of a can | didate's | authorized | Comm | nittee, C | andid | ate shall | sign he | ere. | | | | | | |
| No 320) as amend | | - | edge and beli | ief this | political | comm | ittee has n | ot violat | ted any | / provis | ions of th | e act of Ju | ine 3,1 | 937 (P.L | 1333, |
| Sworn to and subso | cribed before me this day of | 5 | 20 | | | | | | | S | ignature (| of Candida | ite | | |
| | | | | | | - | | | | | Printe | ed Name | | | |
| My Commission Exp | Signature pires | | | | | - | | | | | Ema | il | | | |
| | мо | D | AY | YR | | - | | Area | Code | | D | aytime Te | elephon | e Numb | er |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** FRIENDS OF MARCI MUSTELLO From: <u>3/10/2020</u> To: 5/18/2020 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 100.00 **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 1,800.00 **Contributions Received From Political Committees (Part A)** 3,700.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 5,500.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 6,250.00 7,650.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 13,900.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 19,500.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 | | | | | eporting Period | | | | |
|---|--------------------|-------------------------|-----|-----|-----------------|-------------------------|----------|------------------|--|
| FRIENDS OF MARCI MUSTELLO | | | Fro | om: | <u>3/10/20</u> |) <u>20</u> To : | | <u>5/18/2020</u> | |
| | | | | | DATE | | | AMOUNT | |
| Full Name of Contributing Committee BETTER PA PAC | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | 1 | 28 | 2020 | \$ | 250.00 | |
| City HARRISBURG | State PA | Zip Code (Plus | 4) | 1 | 20 | 2020 | | | |
| | | | | | | | | | |
| Full Name of Contributing Committee COMMITTEE TO ELECT LESLIE OSCHE | | | | | DAY | YEAR | | | |
| Mailing Address | | | | 4 | 7 | 2020 | \$ | 200.00 | |
| City BUTLER | State | Zip Code (Plus | 4) | 4 | / | 2020 | | | |
| | PA | 16001 | | | | | | | |
| Full Name of Contributing Committee PA FORWARD TOGETHER FUND | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | _ | _ | | \$ | 100.00 | |
| City BLAIRSVILLE | State | Zip Code (Plus | 4) | 4 | 7 | 2020 | Ψ | | |
| | PA | 15717 | - | | | | | | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | | |
| BIKEPAC Mailing Address | | | | | | | <u>_</u> | 250.00 | |
| City MECHANICSBURG | State | Zip Code (Plus | 4) | 4 | 7 | 2020 | \$ | 230.00 | |
| HECHANICSBORG | PA | 17055 | ., | | | | | | |
| Full Name of Contributing Committee | | • | | мо | DAY | YEAR | | | |
| FIRSTENERGY PAC | | | | | | | | 250.00 | |
| Mailing Address City AKRON | State | Zip Code (Plus | | 4 | 7 | 2020 | \$ | 250.00 | |
| | OH | 44308 | +) | | | | | | |
| Full Name of Contributing Committee | 1 | l | | мо | DAY | YEAR | | | |
| HIGHMARK PAC Mailing Address | | | | | | | | 250.00 | |
| City CAMP HILL | State | Zip Code (Plus | 4) | 4 | 7 | 2020 | \$ | 230.00 | |
| | PA | 17089 | -, | | | | | | |
| Full Name of Contributing Committee | | • | | MG | DAY | VEAD | | | |
| NISOURCE INC PAC | | | | мо | DAY | YEAR | | | |
| Mailing Address | 1 | 1 | | 4 | 7 | 2020 | \$ | 250.00 | |
| City COLUMBUS | State OH | Zip Code (Plus 43215 | 4) | | | | | | |
| | | 1 | | | | | | | |

| Full Name of Contributing Comm | мо | DAY | YEAR | | |
|---------------------------------|----|-------------------------------|------|---|--------|
| PA MEDICAL PAC | | | | | |
| Mailing Address City HARRISBURG | 4 | 7 | 2020 | Ş | 250.00 |
| Enter Grand Total of Part A o | \$ | PAGE TOTAL 1,800.00 | | | |

| | s Part to iter \$50 | OTHER (\$50.01 nize all other 0.01 to \$250.0 utions from p | L TO \$250.00 contribution 00 in the repo |) Is wi ortin | ith an g peri | aggreg iod. | | | from |
|--|---|--|---|---------------------|------------------|----------------|-----------------|--------------|------------------|
| Name of Filing Commi | ttee or Candidate | | | Repo | orting Po | eriod | | | |
| FRIENDS OF MARCI M | IUSTELLO | | | Fron | n: | <u>3/10/</u> | 2020 T o |) : | <u>5/18/2020</u> |
| | | | | | | DATE | _ | | AMOUNT |
| Full Name of Contributor ELLEN E DODGE | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 200.00 |
| City VALENCIA State Zip Code (Plus 4) PA 16059 | | | | | | 3 | 2020 | | |
| Full Name of Contributor | | | 10005 | - | | | | | |
| MICHAEL J AND AMY B | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 100.00 |
| City FRANKLIN | s | State | Zip Code (Plus 4 | •) | 4 | 3 | 2020 | | |
| | P | ΡA | 16323 | | | | | | |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | |
| JEAN L GARRETT | | | | | no | | | | |
| Mailing Address | | | l | | | | | \$ | 100.00 |
| City RENFREW | - | State | Zip Code (Plus 4 | •) | 4 | 3 | 2020 | | |
| | P | PA | 16053 | | | | | | |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | |
| SARAH E EDWARDS | | | | - | | | | | |
| Mailing Address City BUTLER | | State | Zip Code (Plus 4 | | 4 | 3 | 2020 | \$ | 100.00 |
| City BUTLER | | PA | 16001 | | | 5 | | | |
| Full Name of Contributor | | | | | | DAY | VEAD | | |
| MAUREEN LALLY GREEN | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 100.00 |
| City MARS | s | State | Zip Code (Plus 4 | •) | 4 | 3 | 2020 | | |
| | P | PA | 16046 | | | | | | |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | |
| CANDY HARTLEY | | | | _ | | | | | |
| Mailing Address | | | | | 4 | 2 | 2020 | \$ | 100.00 |
| City MARS State Zip Code (Plus 4) DA 16046 | | | | | | 3 | 2020 | | |
| | PA 16046 | | | | | | | | |
| | | | | | | DAY | YEAR | | |
| SHERYLE L AND CLARK H LONG | | | | | | | | \$ | 100.00 |
| _ | Aailing Address | | | | | | 2020 | ` | 100.00 |
| | ity RENFREW State Zip Code (Plus 4) PA 16053 | | | | | | | | |

| | | | | | | | TAGE 0 |
|---------------------------------------|---------------------------------------|-----------|-------------------|----|-----|------|-----------------|
| Full Na | ame of Contributor | | | мо | DAY | YEAR | |
| JAMES | S C LOKHAISER JR | | | | | | ļ |
| Mailin | g Address | | | 1 | | | \$ 200.0 |
| City | BUTLER | State | Zip Code (Plus 4) | 4 | 3 | 2020 | |
| | | PA | 16001 | | | | |
| Full Na | ame of Contributor | | | мо | DAY | YEAR | |
| DAVID | D L AND MARY J MCFARLANE |) | | | DAT | ILAK | |
| Mailin | g Address | | | | | | \$ 100.0 |
| City | BUTLER | State | Zip Code (Plus 4) | 4 | 3 | 2020 | |
| | | PA | 16001 | | | | |
| Full Na | ame of Contributor | | | | | VELD | |
| JAMES | S E AND BEVERLY F MADIGA | N | | мо | DAY | YEAR | |
| Mailin | g Address | | | | | | \$ 100.0 |
| City | BUTLER | State | Zip Code (Plus 4) | 4 | 3 | 2020 | |
| | | PA | 16002 | | | | |
| Full Na | ame of Contributor | | | | | | |
| | HIA S MCKNIGHT AND DAVI | D F HILL | | мо | DAY | YEAR | |
| Mailin | g Address | | | | | | \$ 100.0 |
| City | BUTLER | State | Zip Code (Plus 4) | 4 | 3 | 2020 | |
| | | PA | 16001 | | | | |
| Full N | ame of Contributor | 4 | | | | | |
| | LEY R MOORE | | | мо | DAY | YEAR | |
| | g Address | | | | | - | \$ 100.0 |
| City | WATERFORD | State | Zip Code (Plus 4) | 4 | 3 | 2020 | v 100.0 |
| | | PA | 16441 | | | | |
| Full Na | ame of Contributor | | | | | | |
| |) V AND LISA NICHOLAS KO | NESNI | | мо | DAY | YEAR | |
| | g Address | | | | | | \$ 100.0 |
| City | BUTLER | State | Zip Code (Plus 4) | 2 | 12 | 2020 | |
| - | | PA | 16001 | | | | |
| Eull N | ame of Contributor | | | | | | |
| | PH LUTZ | | | мо | DAY | YEAR | |
| | g Address | | | | | | \$ 100.0 |
| City | BUTLER | State | Zip Code (Plus 4) | 2 | 12 | 2020 | v 100.0 |
| , | DOTLER | PA | 16001 | | | | |
| | | | | | | | |
| | | | | мо | DAY | YEAR | |
| | RED J ADAMS JR AND DONN. g Address | A 5 ADAMS | | | | | ¢ 100.0 |
| City | BUTLER | State | Zip Code (Plus 4) | 4 | 3 | 2020 | \$ 100.0 |
| city | DUTLER | PA | 16002 | | | 2020 | |
| | | | 10002 | | | | |
| | ame of Contributor | | | мо | DAY | YEAR | |
| JACK AND JUDY BARKLEY Mailing Address | | | | | | | |
| | | | | Ι. | _ | 2020 | \$ 100.0 |
| City | BUTLER | State | Zip Code (Plus 4) | 4 | 3 | 2020 | |
| | | PA | 16002 | | | | |

| Full N | ame of Contributor | | | мо | DAY | YEAR | | |
|---|---|--------------------|-----------------------------------|----------------|-----|------|--------------|-------|
| JOHN | J BENCH | | | MO | DAT | TLAK | | |
| Mailin | g Address | | | | | | \$ 25 | 50.00 |
| City | MARS | State | Zip Code (Plus 4) | 4 | 3 | 2020 | | |
| | | PA | 16046 | | | | | |
| Full N | ame of Contributor | | • | | | VELD | | |
| JOSEF | PH W CAPAROSA AND MAR | ILYN J HORAN | | мо | DAY | YEAR | | |
| Mailin | g Address | | | | | | \$ 20 | 00.00 |
| City | BUTLER | State | Zip Code (Plus 4) | 4 | 3 | 2020 | | |
| | | PA | 16001 | | | | | |
| Full N | ame of Contributor | | | | | | | |
| | LD L AND DIANE M PUFF | | | мо | DAY | YEAR | | |
| | g Address | | | | | | \$ 20 | 00.00 |
| City | BUTLER | State | Zip Code (Plus 4) | 4 | 3 | 2020 | | 00.00 |
| | | PA | 16002 | | | | | |
| E.II N | ame of Contributor | | | | | | | |
| | AM J AND RITA M RIPPIN | | | мо | DAY | YEAR | | |
| | g Address | | | | | | \$ 15 | 50.00 |
| City | BUTLER | State | Zip Code (Plus 4) | 4 | 3 | 2020 | ₽ 1. | 50.00 |
| ency | DOTLER | PA | 16001 | | | | | |
| | | 177 | 10001 | | | | | |
| | ame of Contributor | | | мо | DAY | YEAR | | |
| | RYN A RYAN | | | | | | | |
| | g Address | Chatta | | 4 | 3 | 2020 | \$ 10 | 00.00 |
| City | BUTLER | State | Zip Code (Plus 4) | 4 | 5 | 2020 | | |
| | | PA | 16001 | | | | | |
| | ame of Contributor | | | мо | DAY | YEAR | | |
| ELLEN | I S ROMETT PH.D. | | | | | | | |
| Mailin | g Address | | | _ | | | \$ 15 | 50.00 |
| City | BUTLER | State | Zip Code (Plus 4) | 4 | 3 | 2020 | | |
| | | PA | 16001 | | | | | |
| Full N | ame of Contributor | | | мо | DAY | YEAR | | |
| MURR | AY AND DIANNE SHAPIRO | | | | | | | |
| Mailin | g Address | | I | | | | \$ 10 | 00.00 |
| City | BUTLER | State | Zip Code (Plus 4) | 4 | 3 | 2020 | | |
| | | PA | 16001 | | | | | |
| | | | | | DAY | YEAR | | |
| Full N | ame of Contributor | | | MO | | | | |
| | ame of Contributor OTHY SHAFFER | | | мо | DAT | LAN | | |
| C TIM | | | | мо | | | \$ 10 | 00.00 |
| C TIM | OTHY SHAFFER | State | Zip Code (Plus 4) | мо 4 | 3 | 2020 | \$ 10 | 00.00 |
| C TIM Mailin | OTHY SHAFFER g Address | State PA | Zip Code (Plus 4) 16001 | _ | | | \$ 1(| 00.00 |
| C TIM Mailin City | OTHY SHAFFER g Address | | | 4 | 3 | 2020 | \$1(| 00.00 |
| C TIM Mailin City Full Na | OTHY SHAFFER g Address BUTLER | РА | | _ | | | \$ 1(| 00.00 |
| C TIM Mailin City Full Na DR HE | OTHY SHAFFER g Address BUTLER ame of Contributor | РА | | 4 | 3 | 2020 | | 00.00 |
| C TIM Mailin City Full Na DR HE | OTHY SHAFFER g Address BUTLER ame of Contributor ENRY SINOPOLI AND JOCE | РА | | 4 | 3 | 2020 | | |

| Full N | ame of Contributor | | | мо | DAY | YEAR | | |
|-----------------|--|-------|-------------------|------|-----|------|----|------------|
| S MIC | HAEL STREIB | | | | | | | |
| Mailin | g Address | | | | | | \$ | 250.00 |
| City | CRANBERRY TWP | State | Zip Code (Plus 4) | 4 | 3 | 2020 | | |
| | | РА | 16066 | | | | | |
| Full N | ame of Contributor | мо | DAY | YEAR | | | | |
| KENN | KENNETH C VENMAR | | | | | | | |
| Mailing Address | | | | | | | \$ | 200.00 |
| City | BUTLER | State | Zip Code (Plus 4) | 4 | 3 | 2020 | | |
| | | PA | 16001 | | | | | |
| Full N | ame of Contributor | | | мо | DAY | YEAR | | |
| KENN | ETH L AND CATHERINE M BRO | NDER | | | | | | |
| Mailin | g Address | | | | | | \$ | 100.00 |
| City | BUTLER | State | Zip Code (Plus 4) | 5 | 8 | 2020 | | |
| | | PA | 16001 | | | | | |
| | | | | | | | | PAGE TOTAL |
| E | Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. | | | | | | | 3,700.00 |

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 | J Period | riod | | | |
|---|---|--------------------|-------------------------|------------|------------|--------|------|--------------------|--|
| FRIEN | IDS OF MARCI MUSTELLO | | | From: | <u>3/1</u> | 0/2020 | То: | <u>5/18/2020</u> | |
| | | | | | DA | TE | | AMOUNT | |
| Full N | ame of Contributing Committee | | | | мо | DAY | YEAR | | |
| PA FU | TURE FUND | | | | | | | \$ 2,000.00 | |
| Mailin | g Address | | | | 2 | 12 | 2020 | | |
| City | HARRISBURG | State PA | Zip Cod 17112 | e (Plus 4) | | | | | |
| Full Name of Contributing Committee FRIENDS OF JIM MARSHALL | | | | | | DAY | YEAR | \$ 500.00 | |
| Mailin | g Address | | | | 4 | 7 | 2020 | | |
| City | DARLINGTON | State | Zip Cod | e (Plus 4) | 4 | / | 2020 | | |
| | | РА | 16115 | | | | | | |
| | ame of Contributing Committee R FOR SENATE | | | | мо | DAY | YEAR | \$ 500.00 | |
| Mailin | g Address | | | | 4 | 7 | 2020 | + 300.00 | |
| City | LEHMAN | State | Zip Cod | e (Plus 4) | 4 | / | 2020 | | |
| | | РА | 18627 | | | | | | |
| | ame of Contributing Committee | | - | | мо | DAY | YEAR | \$ 500.00 | |
| Mailin | g Address | | | | 4 | 7 | 2020 | | |
| City | LEMOYNE | State PA | Zip Cod 17043 | e (Plus 4) | | , | 2020 | | |
| | | | 17045 | | | | | | |
| | ame of Contributing Committee ALTORS PAC | | | | мо | DAY | YEAR | | |
| | g Address | | | | | | | \$ 250.00 | |
| City | LEMOYNE | State | Zip Cod | e (Plus 4) | 4 | 7 | 2020 | | |
| | | РА | 17043 | | | | | | |
| Full N | ame of Contributing Committee | | | | мо | DAY | YEAR | | |
| ERIE | INSURANCE PAC | | | | | | | \$ 1,000.00 | |
| Mailin | g Address | | | | 4 | 7 | 2020 | , | |
| City | ERIE | State | Zip Cod | e (Plus 4) | | Í | | | |
| | | PA | 16530 | | | | | | |

| | Full Name of Contributing Committee FRIENDS OF MIKE REESE/ANGELA M REESE | | | | | YEAR | \$ | 1,000.00 |
|--|---|-------|-------------------|------|----|--------|----------------|-------------------------------|
| Mailing | Address | | | 5 | 8 | 2020 | 1 * | 1,000.00 |
| City | MT PLEASANT | State | Zip Code (Plus 4) | | 0 | 2020 | | |
| | | PA | 15666 | | | | | |
| | me of Contributing Comn | мо | DAY | YEAR | \$ | 500.00 | | |
| Mailing | Address | | | 5 | 18 | 2020 | 1 [*] | 500.00 |
| City | CLARION | State | Zip Code (Plus 4) | | 10 | 2020 | | |
| | | PA | 16214 | | | | | |
| Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3. | | | | | | | | PAGE TOTAL 6,250.00 |

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 | Name of Filing Committee or Candidate | | | | | Period | | | | |
|---|---------------------------------------|--------------|------------------------|------|----------------|-------------------------|---------------------|---|------------------------|--|
| FRIENDS OF MARCI MUSTELLO | | | | Fron | n: | <u>3/10/2</u> | <u>020</u> To | : <u>5/</u> | <u>18/2020</u> | |
| | | | | | DA | ATE | | AMOU | ΝΤ | |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | | |
| DILLON MCCANDLESS KING COULTER 8 | kamp; GRAHAM LLP |) | | | MO | DAT | TEAR | \$ | 1,000.00 | |
| Mailing Address | | | | | 2 | 3 | 2020 | | | |
| City BUTLER | State | | Code (Plus | 4) | | - | | | | |
| | PA | 160 | - | | | - | | | | |
| Employer Name DILLON MCCANDLESS | | <u> </u> | | LP | Occupat | 1 | ATTORN | IEYS AT LAW | | |
| Employer Mailing Address/Principal Plac | e of Business | | City | | | State | | Zip Code (Pl | us 4) | |
| BUTLER | | | | | | PA | | 16001 | | |
| Full Name of Contributor | | | | | мо | DAY | YEAR | \$ | 1 000 00 | |
| DILLON MCCANDLESS KING COULTER & | kamp; GRAHAM LLP |) | | | | | | * | 1,000.00 | |
| Mailing Address | | | | | 4 | 7 | 2020 | | | |
| City BUTLER | State | Zip(| Code (Plus | 4) | | | | | | |
| | PA | PA 16001 | | | | | | | | |
| Employer Name DILLON MCCANDLESS | KING COULTER &a | mp; C | graham li | LP | Occupat | ion , | ATTORN | IEYS AT LAW | | |
| Employer Mailing Address/Principal Plac | e of Business | | City | | | State Zip Code (Plus 4) | | | | |
| | | | BUTLER | | | PA | | 16001 | | |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | 222.22 | |
| MICHAEL BAKER | | | | | 110 | | I LAN | \$ | 300.00 | |
| Mailing Address | | | | | 2 | 12 | 2020 | | | |
| City WORTHINGTON | State | Zip(| Code (Plus | 4) | | | | | | |
| | PA | 162 | 620739 | | | | | | | |
| Employer Name MT LORENZO HOLDIN | | | | | | | | | | |
| Employer Mailing Address/Principal Plac | GS INC | | | | Occupat | ion | EXECUT | IVE | | |
| | | | City | | Occupat | ion State | EXECUT | IVE Zip Code (Pl | us 4) | |
| | | | City WORTHIN | GTON | Occupat | 1 | EXECUT | | us 4) | |
| Full Name of Contributor | | | • | GTON | | State PA | | Zip Code (Pl 16272 | | |
| | | | • | GTON | Occupat MO | State | EXECUT YEAR | Zip Code (Pl | us 4) 300.00 | |
| Full Name of Contributor | | | • | GTON | мо | State PA DAY | YEAR | Zip Code (Pl 16272 \$ | | |
| Full Name of Contributor RALPH AND ANITA T MUSTELLO | | | • | | | State PA | | Zip Code (Pl 16272 \$ | | |
| Full Name of Contributor RALPH AND ANITA T MUSTELLO Mailing Address | e of Business | | WORTHIN | | мо | State PA DAY | YEAR | Zip Code (Pl 16272 \$ | | |
| Full Name of Contributor RALPH AND ANITA T MUSTELLO Mailing Address | e of Business | Zip | WORTHIN | | мо | State PA DAY 6 | YEAR | Zip Code (Pl 16272 \$ | | |
| Full Name of Contributor RALPH AND ANITA T MUSTELLO Mailing Address City BUTLER | e of Business State PA | Zip (| WORTHIN | | мо 4 | State PA DAY 6 | YEAR 2020 | Zip Code (Pl 16272 \$ | 300.00 | |

| Full Name of Contributor | | | | | | | | |
|---|---|--|---|--|--|--|--|--|
| | | | мо | DAY | YEAR | \$ | 300.00 | |
| JAMES G PATTERSON | | | | | | - | | |
| Mailing Address | Chanta | Zin Code (Dive 4) | - 4 | 6 | 2020 | | | |
| City BUTLER | | Zip Code (Plus 4) | | | | | | |
| | I PA I | 16001 | | | | I | | |
| Employer Name SELF-EMPLOYED | | | Occupat | tion | MANUFA | CTURING | BUSINESS OW | |
| Employer Mailing Address/Principal Plac | ce of Business | City | | State | | Zip Code | (Plus 4) | |
| | | BUTLER | | PA | | 16001 | | |
| Full Name of Contributor | | | | | VEAD | | | |
| CAROL A AND THOMAS A CRAIG | | | мо | DAY | YEAR | \$ | 300.00 | |
| Mailing Address | | | 4 | 6 | 2020 | 1 | | |
| City BUTLER | State | Zip Code (Plus 4) | 7 4 | 0 | 2020 | | | |
| | PA | 16001 | | | | | | |
| Employer Name | | Occupat | ion | RETIRE |) | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | 1 | State | | | (Plus 4) | |
| | | | | blutte | | p couc | (1100 1) | |
| Full Name of Contributor | | | | 1 | | | | |
| | | | мо | DAY | YEAR | \$ | 300.00 | |
| BRIAN H AND PATTI-ANN KANTERMAN | | | | | | | | |
| Mailing Address | Chanta | Zin Code (Dive 4) | - 4 | 6 | 2020 | | | |
| City BUTLER | | Zip Code (Plus 4) | | | | | | |
| | | 16002 | | | | I | | |
| Employer Name ASSOCIATED CERAMI | CS | 1 | Occupat | pation BUSINESS OWNER | | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | | State | | Zip Code | (Plus 4) | |
| | | StateZip Code (Plus 4)PA16055 | | | | | | |
| | | <u></u> | | 10033 | | | | |
| Full Name of Contributor | | SARVER | | 1 | VEAD | | | |
| Full Name of Contributor | SAY | JARVLR | мо | DAY | YEAR | \$ | 300.00 | |
| | SAY | SARVER | | DAY | | | 300.00 | |
| ALEXANDER H JR AND PATRICIA LINDS | | Zip Code (Plus 4) | мо - 4 | 1 | YEAR 2020 | | 300.00 | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address | State | Zip Code (Plus 4) | | DAY | | | 300.00 | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER | State | | - 4 | DAY 6 | 2020 | \$ | | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM | State PA | Zip Code (Plus 4) 16055 | | DAY 6 | 2020 | \$ EY AT LA | W | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER | State PA | Zip Code (Plus 4) 16055 City | - 4 | DAY 6 tion , State | 2020 | \$ EY AT LA Zip Code | | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM Employer Mailing Address/Principal Place | State PA | Zip Code (Plus 4) 16055 | - 4 | DAY 6 | 2020 | \$ EY AT LA | W | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM Employer Mailing Address/Principal Place Full Name of Contributor | State PA | Zip Code (Plus 4) 16055 City | - 4 | DAY 6 tion , State | 2020 | \$ EY AT LA Zip Code 16001 | W (Plus 4) | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM Employer Mailing Address/Principal Place Full Name of Contributor SHERRY LYNN | State PA | Zip Code (Plus 4) 16055 City | - 4 Occupat | DAY 6 :ion , State PA | 2020 ATTORN | \$ EY AT LA Zip Code | W | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM Employer Mailing Address/Principal Place Full Name of Contributor SHERRY LYNN Mailing Address | State PA ce of Business | Zip Code (Plus 4) 16055 City BUTLER | - 4 Occupat | DAY 6 :ion , State PA | 2020 ATTORN | \$ EY AT LA Zip Code 16001 | W (Plus 4) | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM Employer Mailing Address/Principal Place Full Name of Contributor SHERRY LYNN | State PA ce of Business | Zip Code (Plus 4) 16055 City | Occupat | DAY 6 State PA DAY | 2020 ATTORN YEAR | \$ EY AT LA Zip Code 16001 | W (Plus 4) | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM Employer Mailing Address/Principal Place Full Name of Contributor SHERRY LYNN Mailing Address City | State PA ce of Business | Zip Code (Plus 4) 16055 City BUTLER | - 4 Occupat | DAY 6 sion PA DAY 6 | 2020 ATTORN YEAR 2020 | \$ EY AT LA Zip Code 16001 \$ | W (Plus 4) 300.00 | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM Employer Mailing Address/Principal Place Full Name of Contributor SHERRY LYNN Mailing Address City Employer Name THE ATRIUM | State PA | Zip Code (Plus 4) 16055 City BUTLER Zip Code (Plus 4) | Occupat | DAY 6 state PA DAY 6 | 2020 ATTORN YEAR 2020 | \$ EY AT LA Zip Code 16001 \$ \$ SS OWNE | W (Plus 4) 300.00 | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM Employer Mailing Address/Principal Place Full Name of Contributor SHERRY LYNN Mailing Address City | State PA | Zip Code (Plus 4) 16055 City BUTLER Zip Code (Plus 4) City | - 4 Occupat | DAY 6 sion , PA DAY 6 cion 6 | 2020 ATTORN YEAR 2020 | \$ EY AT LA Zip Code 16001 \$ SS OWNE Zip Code | W (Plus 4) 300.00 | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM Employer Mailing Address/Principal Place Full Name of Contributor SHERRY LYNN Mailing Address City Employer Name THE ATRIUM Employer Mailing Address/Principal Place | State PA | Zip Code (Plus 4) 16055 City BUTLER Zip Code (Plus 4) | - 4 Occupat | DAY 6 cion / PA DAY 6 | 2020 ATTORN YEAR 2020 | \$ EY AT LA Zip Code 16001 \$ \$ SS OWNE | W (Plus 4) 300.00 | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM Employer Mailing Address/Principal Place Full Name of Contributor SHERRY LYNN Mailing Address City Employer Name THE ATRIUM Employer Mailing Address/Principal Place Full Name of Contributor | State PA | Zip Code (Plus 4) 16055 City BUTLER Zip Code (Plus 4) City | - 4 Occupat | DAY 6 sion , PA DAY 6 cion 6 | 2020 ATTORN YEAR 2020 | \$ EY AT LA Zip Code 16001 \$ SS OWNE Zip Code | W (Plus 4) 300.00 | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM Employer Mailing Address/Principal Place Full Name of Contributor SHERRY LYNN Mailing Address City Employer Name THE ATRIUM Employer Mailing Address/Principal Place Full Name of Contributor THOMAS G SHETTER | State PA | Zip Code (Plus 4) 16055 City BUTLER Zip Code (Plus 4) City | MO 4 Occupat | DAY 6 cion / PA DAY 6 cion 6 | 2020 ATTORN YEAR 2020 BUSINE | \$ EY AT LA Zip Code 16001 \$ SS OWNE Zip Code 16052 | W (Plus 4) 300.00 R (Plus 4) | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM Employer Mailing Address/Principal Place Full Name of Contributor SHERRY LYNN Mailing Address City Employer Name THE ATRIUM Employer Mailing Address/Principal Place Full Name of Contributor THOMAS G SHETTER Mailing Address | State 1 PA 1 ce of Business 1 State 1 ce of Business 1 ce of Business 1 | Zip Code (Plus 4) 16055 City BUTLER Zip Code (Plus 4) City PROSPECT | MO 4 Occupat | DAY 6 cion / PA DAY 6 cion 6 | 2020 ATTORN YEAR 2020 BUSINE | \$ EY AT LA Zip Code 16001 \$ SS OWNE Zip Code 16052 | W (Plus 4) 300.00 R (Plus 4) | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM Employer Mailing Address/Principal Place Full Name of Contributor SHERRY LYNN Mailing Address City Employer Name THE ATRIUM Employer Mailing Address/Principal Place Full Name of Contributor THOMAS G SHETTER | State 1 PA 1 ce of Business 1 State 1 ce of Business 1 State 1 State 1 State 1 State 1 State 1 | Zip Code (Plus 4) 16055 City BUTLER Zip Code (Plus 4) City | MO 4 Occupat | DAY 6 State PA DAY 6 ion 6 tion 5tate PA | 2020 ATTORN YEAR 2020 BUSINE YEAR | \$ EY AT LA Zip Code 16001 \$ SS OWNE Zip Code 16052 | W (Plus 4) 300.00 R (Plus 4) | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM Employer Mailing Address/Principal Place Full Name of Contributor SHERRY LYNN Mailing Address City Employer Name THE ATRIUM Employer Mailing Address/Principal Place Full Name of Contributor THOMAS G SHETTER Mailing Address | State 1 PA 1 ce of Business 1 State 1 ce of Business 1 State 1 State 1 State 1 State 1 State 1 | Zip Code (Plus 4) 16055 City BUTLER Zip Code (Plus 4) City PROSPECT | MO 4 Occupat | DAY 6 State PA DAY 6 ion 6 tion 5tate PA | 2020 ATTORN YEAR 2020 BUSINE YEAR | \$ EY AT LA Zip Code 16001 \$ SS OWNE Zip Code 16052 | W (Plus 4) 300.00 R (Plus 4) | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM Employer Mailing Address/Principal Place Full Name of Contributor SHERRY LYNN Mailing Address City Employer Name THE ATRIUM Employer Mailing Address/Principal Place Full Name of Contributor THOMAS G SHETTER Mailing Address | State 1 PA 1 ce of Business 1 State 1 ce of Business 1 State 1 State 1 PA 1 State 1 PA 1 State 1 PA 1 | Zip Code (Plus 4) 16055 City BUTLER Zip Code (Plus 4) City PROSPECT Zip Code (Plus 4) | MO 4 Occupat | DAY 6 State PA DAY 6 ion 5tate PA DAY 6 | 2020 ATTORN YEAR 2020 BUSINE YEAR | \$ EY AT LA Zip Code 16001 \$ SS OWNE Zip Code 16052 \$ | W (Plus 4) 300.00 R (Plus 4) | |
| ALEXANDER H JR AND PATRICIA LINDS Mailing Address City SARVER Employer Name LINDSAY LAW FIRM Employer Mailing Address/Principal Place Full Name of Contributor SHERRY LYNN Mailing Address City Employer Name THE ATRIUM Employer Mailing Address/Principal Place Full Name of Contributor THOMAS G SHETTER Mailing Address City BUTLER | State 1 PA 1 The of Business 1 State 1 State 1 State 1 State 1 CIATES 1 | Zip Code (Plus 4) 16055 City BUTLER Zip Code (Plus 4) City PROSPECT Zip Code (Plus 4) | MO 4 Occupat MO 4 Occupat | DAY 6 State PA DAY 6 ion 5tate PA DAY 6 | 2020 ATTORN YEAR 2020 BUSINE YEAR 2020 | \$ EY AT LA Zip Code 16001 \$ SS OWNE 2ip Code 16052 \$ 16052 | W (Plus 4) 300.00 R (Plus 4) | |

| Full Name of Contributor | | | | мо | DAY | YEAR | | 250.00 | | | |
|---|----------------|-----|-----------------|---------|-------------------------|------------|-----------------|--|--|--|--|
| CHRISTINE J TORETTI | | | | 110 | DAT | TEAN | \$ | 250.00 | | | |
| Mailing Address | | | | 4 | 3 | 2020 | | | | | |
| City INDIANA | State | Zij | p Code (Plus 4) | | - | | | | | | |
| | PA | 15 | 5701 | | | | | | | | |
| Employer Name S W JACK DRILLING | | | | Occupat | ion | EXECUT | IVE/BUSIN | \$ 300.00 E/BUSINESS OWNER p Code (Plus 4) 5701 \$ 300.00 p Code (Plus 4) | | | |
| Employer Mailing Address/Principal Plac | e of Business | | City | | State | | Zip Code (| Plus 4) | | | |
| | | | INDIANA | | PA | | 15701 | | | | |
| Full Name of Contributor | | | | NO | DAY | VEAD | | | | | |
| CHRISTINE J TORETTI | | | | мо | DAY | YEAR | \$ | 300.00 | | | |
| Mailing Address | | | | 4 | 6 | 2020 | | | | | |
| City INDIANA | State | Zij | p Code (Plus 4) | | 0 | 2020 | | | | | |
| | PA | 15 | 5701 | | | | | | | | |
| Employer Name S W JACK DRILLING | | | | | ion | EXECUT | IVE/BUSIN | IESS OWNER | | | |
| Employer Mailing Address/Principal Plac | e of Business | | City | - | State | | Zip Code (| Plus 4) | | | |
| INDIANA | | | | | PA | | 15701 | ip Code (Plus 4) | | | |
| Full Name of Contributor | | | | | • | <u>I</u> | | | | | |
| AUDRAY R MUSCATELLO YOST | | | | мо | DAY | YEAR | \$ | 300.00 | | | |
| Mailing Address | | | | | | | 1 | | | | |
| City BUTLER | State | 7iı | p Code (Plus 4) | 4 | 6 | 2020 | | | | | |
| BUTLER | PA | | 5002 | | | | | | | | |
| Employer Name | FA I | 10 | 5002 | Occupat | ion | | <u> </u> | | | | |
| Employer Name | | | City | | 1 | RETIRE | | (Dive 4) | | | |
| Employer Mailing Address/Principal Plac | e of Business | | City | | State Zip Code (Plus 4) | | | | | | |
| Full Name of Contributor | | | | | | VEID | | | | | |
| ROBERT BARENSFELD | | | | мо | DAY | YEAR | \$ | 300.00 | | | |
| Mailing Address | | | | 4 | 6 | 2020 | | | | | |
| City ELLWOOD CITY | State | Zij | p Code (Plus 4) | 4 | 0 | 2020 | | | | | |
| | РА | 16 | 5117 | | | | | | | | |
| Employer Name | | | | Occupat | ion | RETIRE |) | | | | |
| Employer Mailing Address/Principal Plac | e of Business | | City | - | State Zip Code (Plus 4) | | | | | | |
| | | | | | | | | | | | |
| Full Name of Contributor | | | | | | | | | | | |
| WILLIAM E ADAMS | | | | мо | DAY | YEAR | \$ | 300.00 | | | |
| Mailing Address | | | | | | | 1 | | | | |
| City PORTERSVILLE | State | Ziı | p Code (Plus 4) | 4 | 6 | 2020 | | | | | |
| | PA | | 6051 | | | | | | | | |
| Employer Name | • | 10 | | Occupat | ion | RETIRE | | | | | |
| Employer Mailing Address/Principal Plac | o of Business | | City | | State | | , Zip Code (| Plue 4) | | | |
| | e of Busiliess | | City | | State | | Zip Coue (| rius +) | | | |
| Full Name of Contributor | | | | мо | DAY | YEAR | | 200.00 | | | |
| WILLIAM A II AND MARGARET MARS DI | CUCCIO | | | no | DAI | TEAR | \$ | 300.00 | | | |
| Mailing Address | | | | 4 | 7 | 2020 | | | | | |
| City GIBSONIA | State | Zij | p Code (Plus 4) | | | | | | | | |
| | PA | 15 | 044 | | | | | | | | |
| Employer Name | | | Occupat | ion | RETIRE |) | | | | | |
| Employer Mailing Address/Principal Place of Business City | | | | State | | Zip Code (| Plus 4) | | | | |

| Full Name of Contributor | | | | мо | DAY | YEAR | | | |
|---|-------------------------------|------|-------------------|---------|-------|--------|-------------------|----------|--|
| ARENT FOX LLP | | | | мо | DAT | TEAR | \$ | 1,000.00 | |
| Mailing Address | | | | 4 | 7 | 2020 | | | |
| City WASHINGTON | State | Zij | p Code (Plus 4) | - | , | | | | |
| | l _{DC} | 20 | 0006 | | | | | | |
| Employer Name ARENT | FOX LLP | | | Occupat | ion | LAW FI | RM | | |
| Employer Mailing Address/Principal Place of Business City | | | | | State | | Zip Code (Plus 4) | | |
| | | | WASHINGTON | | DC | | 20006 | | |
| Full Name of Contributor | | | | мо | DAY | YEAR | \$ | 500.00 | |
| TOM FERRARO | | | | | | | _ · | 000100 | |
| Mailing Address | | | | 5 | 15 | 2020 | | | |
| City BUTLER | State | Zij | p Code (Plus 4) | | | | | | |
| | I PA | 16 | 5002 | | | | | | |
| Employer Name | | | | Occupat | ion | RETIRE | D | | |
| Employer Mailing Address | s/Principal Place of Business | | City | | State | | Zip Code | (Plus 4) | |
| Enter Grand Total of Pa | art C on Schedule I, Detailed | Sumn | nary Page, Sectio | on 3. | | | PA | GE TOTAL | |
| | | | | | | : | \$ | 7,650.00 | |

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 Ca | ndidate | | Report | ing Perio | od | | | | |
|--------------------------------|----------------------|---------------|---------|-----------|-----|------|----|------------|------|
| | | | From: | | | То: | | | |
| | | | | D | ATE | | | AMOUNT | |
| Full Name | | | | мо | DAY | YEAR | \$ | | 0.00 |
| Mailing Address | | | | | | | | | |
| City | State | Zip Code (| Plus 4) | | | | | | |
| Receipt Description | | | | | | | I | | |
| | | | - ·· | | | | | PAGE TOTAL | |
| Enter Grand Total of Part E on | Schedule 1, Detailed | Summary Page, | Section | 4. | | | \$ | 0.0 | 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 | | |
|---|------------------|----------------------|------------------|
| FRIENDS OF MARCI MUSTELLO | From: | <u>3/10/2020</u> То: | <u>5/18/2020</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 PAR | TF) | | |
| 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) | \$ | 2,000.00 |
| 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 | | \$ | 2,000.00 |

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Candidate | | | Reporting | Period | · | | | |
|--|--------------------|-------------------|-----------|----------|------|-----------|-----------|------|
| | | | From: | | | 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 Sched Section 2. | ule II, In-Kind Co | ontributions Deta | iled Sum | mary Pag | je, | | PAGE TOTA | ۱L |
| | | | | | | \$ | | 0.00 |

PAGE 18

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

| Name of Filing Committee or Candidate | | | | | Reporting Period | | | | | |
|---|-----------------|-------|------------------|--------|-----------------------|--------------|-----------------------|----------|------------------|--|
| FRIENDS OF MARCI MUSTELLO | | | | | From: <u>3/10/202</u> | | 2 <u>0</u> To: | | <u>5/18/2020</u> | |
| | | | | | | DATE | | | AMOUNT | |
| Full Name of Contributor RYAN B MARTIN AND MAUREEN R MAR | .TIN | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | 4 | 13 | 2020 | \$ | 2,000.00 | |
| City BUTLER | State | | Zip Code(Plus 4) | | | | | | | |
| | РА | | 16001 | | | | | | | |
| Employer of Contributor PA HOUSE | OF REPRESENTA | ATIV | ES | | Occup | ation LE | GISLATI | VE AID | E | |
| Employer Mailing Address/Principal Plac | e of Business | City | у | State | e Zip | Code(Plus 4) | Descrip | ption of | Contribution | |
| | | НА | RRISBURG | PA | 17 | 101 | CONSU POLLIN | | /ELECTION | |
| Enter Grand Total of Part G on Sch | edule II, In-Ki | ind C | Contributions D | etaile | ed | | | | PAGE TOTAL | |
| Summary Page, Section 3. | · | | | | | | | | 2,000.00 | |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candid | late | | | Reporti | ng Period | | | |
|------------------------------------|-----------------|--|-------------------|------------------|---------------------|---------------|----------|------------------|
| FRIENDS OF MARCI MUSTELLO | | | | From | <u>3/1(</u> | <u>0/2020</u> | То: | <u>5/18/2020</u> |
| | | | | | DATE | | | AMOUNT |
| To Whom Paid | | | | мо | DAY | YEAR | | |
| UNITED WAY | | | | | | | | |
| Mailing Address | | | | 3 | 12 | 2020 | \$ | 40.00 |
| City BUTLER | State | | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | PA | | 16001 | WONEN | I'S LEADER | SHIP MI | XER | |
| To Whom Paid LN CONSULTING | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | 3 | 19 | 2020 | \$ | 745.02 |
| | State | | Zip Code (Plus 4) | Decerin | tion of Exp | | | |
| City HARRISBURG | PA | | 17101 | PALM C | - | enunture | | |
| To Whom Paid | | | 1/101 | | | | | |
| BUTLER EAGLE | | | | мо | DAY | YEAR | | |
| Mailing Address | Mailing Address | | 3 | 19 | 2020 | \$ | 2,700.00 | |
| City BUTLER | State | | Zip Code (Plus 4) | Descrip | L tion of Exp | enditure | I | |
| | PA | | 16001 | WEB AN | ND FRONT | PAGE AD | VERTISI | NG |
| To Whom Paid | | | | мо | DAY | YEAR | | |
| SCP GROUP | | | | | | | | |
| Mailing Address | | | | 4 | 11 | 2020 | \$ | 157.74 |
| City SHARON | State | | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | PA | | 16146 | LAPEL L | ABELS | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | |
| BUTLER EAGLE | | | | | | | | |
| Mailing Address | | | | 4 | 23 | 2020 | \$ | 125.00 |
| City BUTLER | State | | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | PA | | 16001 | "HEALT ADVERT | HCARE HEI FISING | ROES" SI | JPPLEME | ENT |
| To Whom Paid | | | | мо | DAY | YEAR | | |
| DIGICO | | | | | | | | |
| Mailing Address | | | | 5 | 5 | 2020 | \$ | 4,000.00 |
| City HARRISBURG | State | | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | • | |
| | PA | | 17101 | DIGITA | L MARKETI | | PAIGN | |

| To Wh | om Paid | | | | | | | | |
|----------|-----------------------|-------|-------------------|--|-------------------|-----------|----------|-----------|--|
| ANN C | COLEMAN | | | мо | DAY | YEAR | | | |
| Mailin | g Address | | | 5 | 6 | 2020 | \$ | 46.42 | |
| City | HERMITAGE | State | Zip Code (Plus 4) | Description of Expenditure | | | | | |
| | | РА | 16148 | REIMBURSEMENT - CHARGE FOR OVERNIGHT SHIPPING | | | | | |
| To Wh | om Paid | | | MO | DAY | YEAR | | | |
| HRCC | | | | мо | DAY | TEAR | | | |
| Mailin | g Address | | | 5 | 14 | 2020 | \$ | 12,500.00 | |
| City | HARRISBURG | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | | PA | 17108 | DONATI | ON | | | | |
| To Wh | om Paid | | | мо | DAY | YEAR | | | |
| SCP G | ROUP | | | | | | | | |
| Mailing | g Address | | | 1 | 13 | 2020 | \$ | 2,227.89 | |
| City | SHARON | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | | PA | 16146 | PETITIC | N MAILIN | G | | | |
| To Wh | om Paid | | | мо | DAY | YEAR | | | |
| ANN C | COLEMAN | | | no | 2 | 12/44 | | | |
| Mailin | g Address | | | 1 | 17 | 2020 | \$ | 57.53 | |
| City | HERMITAGE | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| PA 16148 | | | | REIMBU DISTRIE | RSEMENT BUTION | - PETITIO | ON COPII | ES FOR | |
| To Wh | om Paid | | | мо | DAY | YEAR | | | |
| HRCC | | | | | | | | | |
| Mailin | g Address | | | 1 | 21 | 2020 | \$ | 1,150.00 | |
| City | HARRISBURG | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | | PA | 17108 | STREET LIST PROGRAM & amp; EVENT TICKET | | | | | |
| To Wh | om Paid | | | мо | DAY | YEAR | | | |
| BUTLE | R AM ROTARY CHARITIES | | | | | | | | |
| Mailin | g Address | | | 1 | 13 | 2020 | \$ | 100.00 | |
| City | BUTLER | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | |
| | | PA | 16003 | "CARVE | D IN ICE" | SPONSOF | RSHIP | | |
| To Wh | om Paid | | | мо | DAY | YEAR | | | |
| | | | | 2 | 2 | 2020 | \$ | 332.29 | |
| Mailing | g Address | 1 | 1 | 2 | 3 | 2020 | Ŧ | 552.29 | |
| City | HERMITAGE | State | Zip Code (Plus 4) | | tion of Exp | | | | |
| | | PA | 16148 | T-SHIR | IS AND OT | HER APP | AREL | | |
| | | | | мо | DAY | YEAR | | | |
| | NSULTING | | | | - | 2000 | ¢ | 695.02 | |
| Mailing | g Address | I | r | 2 | 3 | 2020 | \$ | 093.02 | |
| City | HARRISBURG | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | | PA | 17101 | 1500 PA | ALM CARDS | 5 | | | |

| | | | | | | | PA | 3L 21 | |
|--------|---------------------------|-------|-------------------|-------------------------------------|-------------|----------|-----------|----------|--|
| To WI | nom Paid | | | мо | DAY | YEAR | | | |
| AMER | ICAN LEGION 778 | | | | | | | | |
| Mailir | ng Address | | | 2 | 3 | 2020 | \$ | 414.50 | |
| City | LYNDORA | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | | PA | 16045 | PANCAK | KES & | PETITIO | NS BREAK | FAST | |
| To WI | nom Paid | | | мо | DAY | YEAR | | | |
| POST | MATER/US POSTAL SERVICE | | | no | | 12/40 | | | |
| Mailir | ng Address | | | 2 | 17 | 2020 | \$ | 126.00 | |
| City | LYNDORA | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | 1 | | |
| | | PA | 16045 | POSTAG | GE EXPENS | ES | | | |
| To WI | nom Paid | | | мо | DAY | YEAR | | | |
| BUTL | ER AREA SPORTS HALL OF FA | ME | | MO | | TEAK | | | |
| Mailir | ng Address | | | 2 | 17 | 2020 | \$ | 100.00 | |
| City | BUTLER | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | | PA | 16003 | GOLD S | PONSOR - | PROGRA | M, ANNUAI | BANQUET | |
| To W | nom Paid | | | мо | DAY | YEAR | | | |
| BUTL | ER CO FAMILY YMCA | | | MO | | TEAK | | | |
| Mailir | ng Address | | | 2 | 19 | 2020 | \$ | 150.00 | |
| City | BUTLER | State | Zip Code (Plus 4) | Description of Expenditure | | | | | |
| | | PA | 16001 | "BOWL FOR KIDS" SPONSOR | | | | | |
| To WI | nom Paid | | | мо | DAY | YEAR | | | |
| ANN | COLEMAN | | | MO | | TEAK | | | |
| Mailir | ng Address | | | 2 | 19 | 2020 | \$ | 57.70 | |
| City | HERMITAGE | State | Zip Code (Plus 4) | Description of Expenditure | | | | | |
| | | PA | 16148 | GIFT BASKET MATERIALS REIMBURSEMENT | | | | | |
| To WI | nom Paid | | | мо | DAY | YEAR | | | |
| SCP (| GROUP | | | no | | 1 Lyax | | | |
| Mailir | ng Address | | | 2 | 27 | 2020 | \$ | 577.90 | |
| City | SHARON | State | Zip Code (Plus 4) | Description of Expenditure | | | | | |
| | | PA | 16146 | MAILING & amp; PRINTING EXPENSES | | | | | |
| To W | nom Paid | | | мо | DAY | YEAR | | | |
| ANN | COLEMAN | | | MO | | TLAK | | | |
| Mailir | ng Address | | | 2 | 23 | 2020 | \$ | 704.00 | |
| City | HERMITAGE | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | | PA | 16148 | REIMBU | IRSEMENT | - RADIO | ADVERTIS | ING | |
| To WI | nom Paid | | | мо | DAY | YEAR | | | |
| VALE | NCIA SPORTS PARK LP | | | MU | DAT | TEAR | | | |
| Mailir | ng Address | | | 3 | 3 | 2020 | \$ | 2,226.00 | |
| City | SEVEN FIELDS | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | |
| | | PA | 16046 | YARD S | IGNS | | | | |
| | PA 16046 YARD SIGNS | | | | | | | | |

| | om Paid | | | мо | DAY | YEAR | | |
|----------------|-----------------------|----------------------|-----------------------------------|------------------|-------------|-----------|-----------|--------------------|
| GENE | RAL BUTLER FRIENDS OF | THE NRA /CO JEFF LEE | E | | | | | |
| Mailin | g Address | | | 3 | 5 | 2020 | \$ | 325.00 |
| City | VALENCIA | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | | PA | 16059 | BANQUI | ET PACKAG | GE - 2 PE | RSON | |
| To Wh | om Paid | | | мо | DAY | YEAR | | |
| MARC | I MUSTELLO | | | no | | | | |
| Mailin | g Address | | | 3 | 12 | 2020 | \$ | 890.4 |
| City | BUTLER | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | 1 | |
| | | PA | 16001 | REIMBU | IRSEMENT | - NAIL F | ILES | |
| To Wh | om Paid | | | мо | DAY | YEAR | | |
| BUTLE | ER RADIO NETWORK | | | MO | | TLAK | | |
| Mailin | g Address | | | 5 | 15 | 2020 | \$ | 960.00 |
| City | BUTLER | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | I | |
| | | PA | 16001 | RADIO | SPORTS-C | AMPAIGN | J | |
| To Wh | om Paid | | | мо | DAY | YEAR | | |
| BUTLE | ER RADIO NETWORK | | | no | | | | |
| Mailin | g Address | | | 5 | 15 | 2020 | \$ | 300.00 |
| City | BUTLER | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | | PA | 16001 | BANNER | R AD - BUT | LER RAD | IO NETWO | ORK |
| To Wh | om Paid | | | мо | DAY | YEAR | | |
| ANED | от | | | MO | | ILAK | | |
| Mailin | g Address | | | 5 | 13 | 2020 | \$ | 2.30 |
| City | | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | 1 | |
| | | | | SERVIC | E CHARGE | - ON-LI | NE DONAT | ION |
| To Wh | om Paid | | | мо | DAY | YEAR | | |
| ANED | от | | | | | | | |
| Mailin | g Address | | | 5 | 19 | 2020 | \$ | 20.30 |
| City | | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | | | | SERVIC | E CHARGE | - ON-LI | NE DONAT | ION |
| To Wh | om Paid | | | мо | DAY | YEAR | | |
| | I MUSTELLO | | | | | | | |
| MARC | | | | 5 | 15 | 2020 | \$ | 428.00 |
| | g Address | | | | | | | |
| | g Address BUTLER | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| Mailin | - | State PA | Zip Code (Plus 4) 16001 | REIMBU | tion of Exp | -PYMT PR | RINTING & | amp; |
| Mailin City | BUTLER | РА | | REIMBU GRAPHI | IRSEMENT | -PYMT PR | | amp; PAGE TOTAL |