### **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 2020	00148			Rep File			CANDI	DATE		СОМ	<b>4ITTEE</b>	<b>✓</b>	LOB	BYIST		
Name of Filing C	Committee, Candid	date or L	obbyist:		KEYS	STO	NE PA	AC									
Street Address:	1747 PENNS	YLVANIA	AVENUE, I	NW SU	JITE	800	)										
City:	WASHINGTO	N						State:	DC			Zip Cod	<b>le:</b> 20	0006			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. <b>X</b>	2ND FRIDA PRIMARY	Y PRE	- 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDATELECTION	y pre	- 5	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	~	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2020					IG METHO				PAPER		<b>\</b>	DISKE	TTE	
Name of Office S	Sought by Candida	ate:	-					DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County	
								МО	DAY	YE	AR	Number	Code			couc	
								11		3	2020		(SEE IN	STRUCTI	ONS FOR (	ODES)	
Summary of Expenditures	Receipts and	МО	DAY	YEAR	l		_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
			1 1	2	020	Т	<u> </u>	3		9	2020						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				0.00						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$			50,0	00.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			50,0	00.00						
D. Total Expen	ditures (From Sch	iedule II	I)				\$			50,0	00.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line (	C)			\$				0.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	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	here. I	[f thi	is is	a Can	ndidate re	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	e attached sci	hedules	filed	l 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 the	is	20							S	ignature	of Perso	n Submit	ting Rep	oort		
			_				<b>-</b>					Prin	ted Name	e			
My Commission Ex	Signati opires	ıre										Ema	il				ĺ
	мо	D.	AY	YR			-		Are	ea Cod	le		e Telepi	none Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	e, C	andida	ate shall	sign h	ere.							j
I swear (or affirm) No 320) as amende	that to the best of	my knowle	edge and beli	ef this	politi	ical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333,	1
Sworn to and subso	ribed before me this	i									s	ignature o	of Candid	ate			
	day of		_ 20				_										
	Cirt						-					Printe	d Name				
My Commission Exp	Signature ires											Ema	il				
	мо	D	AY	YR			•		Area	Code		Da	aytime T	elephor	ne Numb	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
KEYSTONE PAC	From:	1/1/202	<u>:0</u> To:	3/9/2020
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	Period	(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)			\$	50,000.00
TOTAL for the Reporting	Period	(3)	\$	50,000.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	50,000.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value		\$2		) in the			
Name of Filing Committee or Candidate				From:			:	
					DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	<b>!</b>	<b>I</b>	!		<u> </u>			DAGE TOTAL

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

PAGE TOTAL
\$ 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 of Candidate				Reporting Period				
Fro						0:		
					DATE		АМ	OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					

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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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	Name of Filing Committee or Candidate							
KEYSTONE PAC			From: <u>1/1/2020</u>				To: <u>3/9/2020</u>	
				D/	ATE		АМ	OUNT
Full Name of Contributor Republican Attorneys General Associati	on Individual Accoun	t		МО	DAY	YEAR		
Mailing 1747 Pennsylvania Ave NW, Suite 800 Address					_		\$	50,000.00
City Washington	State	Zip Code (Plus	s 4)	3	5	2020		
	DC	20006						
Employer Name N/A				Occupat	tion	I/A	•	
Employer Mailing Address/Principal Plac Business	e of	City		•	State		Zip Code	(Plus 4)
1747 Pennsylvania Ave NW, Suite 800		Washing	ton		DC		20006	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	mmary Page,	Section	on 3.		5		<b>GE TOTAL</b> 50,000.00

## 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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	Section	••			\$	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	I	
KEYSTONE PAC	From:	<u>1/1/2020</u> <b>To:</b>	<u>3/9/2020</u>
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 PAR	T 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,		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candid	ate		Reportin	g 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 S	chedule II, In-Kir	nd Contributions Deta	iled Sun	ımary Pa	ge,		PAGE TOTAL
Section 2.						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate					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	n-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

50,000.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period					
KEYSTONE PAC			From	1/	1/2020	То:	3/9/2020		
				DATE			AMOUNT		
To Whom Paid Heidelbaugh for Attorney General	Inc		мо	DAY	YEAR				
Mailing Address 141 Woodhave	n Dr		3	5	2020	\$	50,000.00		
City Pittsburgh State Zip Code (Plus 4) PA 15228				Description of Expenditure Contribution					
		•	-				PAGE TOTAL		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.