Campaign Finance Report

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

| Filer Identification 2008059 Number : | | | | | Rep File | | | CAN | NDII | DATE | | СОМ | 1ITTEE | ✓ | LOBI | BYIST | | |
|---|---|-----------|-------------------------------|---------|-------------|------------|--------|----------|-----------------|----------|-------------|------------|------------------------|----------------|--------------------|-----------|----------|----------|
| Name of Filing C | Committee, Candid | ate or Lo | obbyist: | | Bett | er C | over | nment | t for | PA | | | | | | | | |
| Street Address: | 813 CHAMBER | RS ST | | | | | | | | | | | | | | | | |
| City: | BRESSLER | | | | | | | State | : | PA | | | Zip Code: 17113 | | | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRE- 2. PRIMARY | | | | 30 DA | | Р | OST- | 3. | | AMENDMENT REPORT? | | Yes | No | • | \ |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY ELECTION | Y PRE | ≣- 5 | 5. | 30 DA | | Р | OST- | 6. X | | TERMINA REPORT? | | Yes | No | | \ |
| report type) | ANNUAL REPORT | 7. | Year 2008 | | | | | CHECK | | | | | PAPER | | \ | DISKE | TTE | |
| Name of Office S | Sought by Candida | te: | • | | | | | DATE | E O | F ELE | СТІС | N | District Number | Office Code | Par | ty Code | Coun | |
| | , | | | | | | | МО | | DAY | YI | EAR | Number | Code | | | Coue | |
| | 11 4 | | | | | | | 4 | 2008 | | (SEE IN | STRUCTI | ONS FOR O | ODES |) | | | |
| | nmary of Receipts and MO DAY YEAR MO DAY YEAR | | | | | | | | EAR | FO | R OFFI | CE USE | ONLY | | | | | |
| Expenditures | from: | | 1 1 | 2 | 800 | Т | 0 | | 11 | 7 | 24 | 2008 | | | | | | |
| A. Amount Bro | ught Forward Fron | n Last R | eport | | | | \$ | | | | 1,3 | 375.00 | | | | | | |
| B. Total Monet | ary Contributions A | And Rec | eipts (From | Sche | dule | I) | \$ | | | | 7,8 | 350.00 | | | | | | |
| C. Total Funds Available (Sum Of Lines A and B) | | | | | | | | 9,2 | 225.00 | | | | | | | | | |
| D. Total Expen | ditures (From Scho | edule II | I) | | | | \$ | | | | 4,0 | 25.00 | | | | | | |
| E. Ending Cash | Balance (Subtract | Line D | From Line (| C) | | | \$ | | | | 5,2 | 200.00 | | | | | | |
| F. Value Of In- | Kind Contributions | Receiv | ed (From So | chedu | le II |) | \$ | | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Obligations | (From S | Schedule IV |) | | | \$ | | | | | 0.00 | | | • | | | |
| | | | | AFF | IDA | ١٧٧ | T SE | CTIO | N | | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, trea | surer sign l | nere. : | If thi | is is | a Car | ndidat | e re | port, c | andi | date sig | ın here. | | | | | |
| I swear (or affirm) correct and comple |) that this report, incl ete. | uding the | attached sch | nedule | s filed | d on | paper | or by e | lectr | onic m | edium | , are to t | he best o | f my kno | wledge | and belie | ef , tru | ue. |
| Sworn to and subs | cribed before me this day of | ì | 20 | | | | | | | | 9 | Signature | of Perso | n Submit | ting Rep | ort | | _ |
| | | | | | | | - - | | | | | | Prin | ted Name | e | | | - |
| My Commission Ex | Signatu opires | ie | | | | | | | - | | | | Emai | i | | | | - |
| | МО | D | AY | YR | | | _ | | | Are | ea Coo | le | Daytim | e Telepi | none Nu | mber | | _ |
| Part II- If this is | a report of a cand | lidate's | authorized | Comn | nitte | e, C | andid | ate sh | hall sign here. | | | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of n | ny knowle | edge and beli | ef this | polit | ical | comm | ittee ha | as no | ot viola | ted ar | ıy provisi | ions of the | e act of J | une 3,1 | 937 (P.L | . 1333 | 3, |
| Sworn to and subsc | ribed before me this | | | | | | | | | | | Si | ignature o | of Candid | ate | | | - |
| | day of | | _ 20 | | | | _ | | | | | | Drinto | d Name | | | | _ |
| | Signature | | | | | | - | | | | | | rinte | d Name | | | | |
| My Commission Exp | - | | | | | | | | • | | | | Ema | il | | | | _ |
| | МО | D | AY | YR | 1 | | - | | | Area | Code | | Da | nytime T | e Telephone Number | | | |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| , - | | | | |
|--|-----------|----------|--------------|------------|
| Name of Filing Committee or Candidate | Reporting | g Period | | |
| Better Government for PA | From: | 1/1/200 | <u>8</u> To: | 11/24/2008 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reporting |) Period | (1) | \$ | 50.00 |
| 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) | \$ | 1,100.00 | | |
| TOTAL for the Reporting | Period | (2) | \$ | 1,100.00 |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 2,100.00 |
| All Other Contributions (Part D) | | | \$ | 4,600.00 |
| TOTAL for the Reporting |) Period | (3) | \$ | 6,700.00 |
| 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 | | | \$ | 7,850.00 |

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 Commit | Name of Filing Committee or Candidate | | | Reporting Period | | | | | | |
|--------------------------|---------------------------------------|-------|-------------------|------------------|----|------|------|----|--------|--|
| | | | | Fror | m: | | То | : | | |
| | | | - | | | DATE | | | AMOUNT | |
| Full Name of Contributin | g Committee | | | | МО | DAY | YEAR | | | |
| Mailing Address | | | | | | | | \$ | 0.00 | |
| City | | State | Zip Code (Plus 4) |) | | | | | | |

PAGE TOTAL
0.00

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

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 Fil | Reporting Period | | | | | | | | | |
|---|------------------|--------------------------|-------------------------------------|-------|-------------|-------------------|------------------|--|--|--|
| Better Gov | ernment for PA | | | From: | 1/1/2 | <u>11/24/2008</u> | | | | |
| | | | | | DATE AMOUNT | | | | | |
| Full Name of | | | | МО | DAY | YEAR | | | | |
| Mailing Addre | | way Center 8th Floor | | | | | \$ 250.00 | | | |
| City Pittsb | | State PA | Zip Code (Plus 4) 15222 | 10 | 30 | 2008 | 230.00 | | | |
| Full Name of Contributor Eugene Michael Natali | | | | | DAY | YEAR | | | | |
| Mailing Addre | | low Ridge Drive State PA | Zip Code (Plus 4) 15238 | 10 | 30 | 2008 | \$ 250.00 | | | |
| Full Name of | | | | МО | DAY | YEAR | | | | |
| Mailing Addre | ess 750 Ston | egate Drive | | | | | \$ 250.00 | | | |
| City Wexfo | ord | State PA | Zip Code (Plus 4) 15090 | 10 | 30 | 2008 | | | | |
| Full Name of Mark Genshe | | | | МО | DAY | YEAR | | | | |
| Mailing Addre | | State PA | Zip Code (Plus 4) 15143-104 | 10 | 30 | 2008 | \$ 250.00 | | | |
| Full Name of Contributor Mark Stewart | | | | | DAY | YEAR | | | | |
| Mailing Addre | | | | | | | \$ 100.00 | | | |
| City Camp | Hill | State PA | Zip Code (Plus 4) 17011 | 10 | 23 | 2008 | | | | |
| | | <u>.</u> | | | | | PAGE TOTAL | | | |

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

PAGE TOTAL \$ 1,100.00

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 | ame of Filing Committee or Candidate Reporting | | | | | g Period | | | | |
|---|--|----------|------------|------|----------------|----------|------------------|--|--|--|
| Better Government for PA | | | From: | 1/ | <u>/1/2008</u> | То: | 11/24/2008 | | | |
| | | | | DA | TE | | AMOUNT | | | |
| Full Name of Contributing Committee L. Robert Kimball & Assoc. PAC | | | | МО | DAY | YEAR | | | | |
| Mailing Address 615 W. Highland Ave | anue | | | | | | \$ 600.00 | | | |
| City Ebensburg | State | Zin Code | e (Plus 4) | 10 | 30 | 2008 | | | | |
| city Ebelisburg | PA | 15931- | | | | | | | | |
| Full Name of Contributing Committee | | | | | DAY | YEAR | | | | |
| MWN PAC | | | | МО | DAI | ILAK | \$ 300.00 | | | |
| Mailing Address P.O. Box 17108 | | | | 10 | 30 | 2008 | | | | |
| City Harrisburg | State | Zip Code | e (Plus 4) | | | | | | | |
| | PA | 17108 | | | | | 1 | | | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | | | |
| Blue PAC | | | | 140 | DA. | ILAK | \$ 300.00 | | | |
| Mailing Address P.O. Box 60710 | | | | 10 | 30 | 2008 | | | | |
| City Harrisburg | State | Zip Code | e (Plus 4) | | | | | | | |
| | PA | 171067 | 10 | | | | | | | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | | | |
| Financial Businesspersons Association | | | | 1-10 | DAI | ILAK | \$ 300.00 | | | |
| Mailing Address 2370 York Road Suit | te A-5 | | | 10 | 30 | 2008 | | | | |
| City Jamison | State | Zip Code | e (Plus 4) | | | | | | | |
| | PA | 18929 | | | | | | | | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | | | |
| Wolf Block PAC | | | | 140 | DA. | ILAK | \$ 600.00 | | | |
| Mailing Address 1650 Arch Street Flo | oor 22 | | | 10 | 29 | 2008 | | | | |
| City Philadelphia | State | Zip Code | e (Plus 4) | | | | | | | |
| | PA | 19103 | | | <u> </u> | | | | | |
| • | | | | | | | PAGE TOTAL | | | |

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

2,100.00

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 | | | | Repo | orting Pe | riod | | | | |
|--|---------------|-----|------------|-----------------------|-----------|-------------|----------------|-------------------|-------------|--|
| Better Government for PA | | | | Fron | n: | 1/1/2 | 008 To | : | 11/24/2008 | |
| | | | | | DA | ATE | | ı | AMOUNT | |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | 200.00 | |
| Matthew Kirk | | | | | МО | DAI | ILAK | _ \$ | 300.00 | |
| Mailing Address 1254 Belle Meade D | rive | | | | 10 | 30 | 2008 | | | |
| City Lancaster | State | Zip | Code (Plus | 4) | | | 2000 | | | |
| | PA | 17 | 601-506 | | | | | | | |
| Employer Name Access Finacial Market | :S | | | | Occupat | ion | inancia | l Advis | or | |
| Employer Mailing Address/Principal Plac | e of Business | | City | | | State | | Zip Co | de (Plus 4) | |
| 210 W. James Street | | | Lancaster | | | PA | | 17603 | 1 | |
| Full Name of Contributor | | | | | | - 42 | \/ - 45 | | | |
| Don Carmelite | | | | | МО | DAY | YEAR | \$ | 300.00 | |
| Mailing Address 229 Boas Street | | | | | 10 | 30 | 2008 | 1 | | |
| City Harrisburg | State | Zip | Code (Plus | 4) | 10 | 30 | 2008 | | | |
| PA 17102 | | | | | | | | | | |
| Employer Name Marshall, Denehey | | | | | Occupat | ion a | attorney | , | | |
| Employer Mailing Address/Principal Plac | e of Business | | City | | | State | | Zip Co | de (Plus 4) | |
| 4200 Crums Mill Road | | | Harrisburg | l | PA | | | 17112 | | |
| Full Name of Contributor | | | | | | | | | | |
| George Shultz | | | | | МО | DAY | YEAR | \$ | 1,000.00 | |
| | ve | | | | 4.4 | - | 2000 | 1 | | |
| City Harrisburg | State | Zip | Code (Plus | 4) | 11 | 5 | 2008 | | | |
| <u>-</u> | PA | 17 | 109-555 | | | | | | | |
| Employer Name | | | | | Occupat | ion ı | etired | | | |
| Employer Mailing Address/Principal Plac | e of Business | | City | | | State | | Zip Co | de (Plus 4) | |
| | | | | | | PA | | | | |
| Full Name of Contributor | | | | | | | | | | |
| | | | | | МО | DAY | YEAR | \$ | 500.00 | |
| | | | | | | | | 1 | | |
| | State | Zip | Code (Plus | 4) | 10 | 29 | 2008 | | | |
| g | NY | 13 | 905 | - | | | | | | |
| Il Name of Contributor Il Name of Contributor Sty Harrisburg State Zip Contributor Il Name of Contributor Il Name of Contributor In Harrisburg State Zip Contributor In In Name of Contributor Il Name of Contributor | | | | | Occupat | ion I | ouilder | | | |
| | | | City | | | | | Zip Code (Plus 4) | | |
| | | | | outh Meeting PA 19462 | | | | | | |
| , , | | | , | | J | 1 | ı | 02 | : | |

| Full Name of Contributor | Full Name of Contributor | | | | | YEAR | | F00.00 |
|---|--------------------------|-----|-------------------------|---------|---------|----------|-------------|----------|
| Ferris Akel | | | | МО | DAY | ILAK | \$ | 500.00 |
| Mailing Address 221 Riverside Drive | | | | 10 | 29 | 2008 | 1 | |
| City Binghamton | State | Ziı | p Code (Plus 4) | | | | | |
| | NY | 13 | 3905-417 | | | | | |
| Employer Name Newman Developmen | t | | | Occupat | ion | builder | | |
| Employer Mailing Address/Principal Plac | e of Business | | City | | State | | Zip Code | (Plus 4) |
| Plymouth Green Office Campus1000 Ge E-2 | rmantown Pike, Sui | te | Plymouth Meetin | g | PA | , | 19462 | |
| Full Name of Contributor | | | | | | V=15 | | |
| George Akel | | | | МО | DAY | YEAR | \$ | 500.00 |
| Mailing Address P.O. Box 490 | | | | 10 | 29 | 2008 | 1 | |
| City Johnson City | State | Ziı | p Code (Plus 4) | 1 10 | 29 | 2000 | | |
| | NY | 13 | 3790 | | | | | |
| Employer Name Newman Developmen | t | | | Occupat | ion | builder | | |
| Employer Mailing Address/Principal Plac | e of Business | | City | | State | | Zip Code | (Plus 4) |
| Plymouth Green Office Campus1000 Ge | rmantown Pike, Sui | te | Plymouth Meetin | g | PA | | 19462 | |
| E-2 | | | | | ' | · | | |
| ull Name of Contributor | | | | мо | DAY | YEAR | | F00.00 |
| Barry Newman | | | | 1-10 | DAI | ILAK | \$ | 500.00 |
| Mailing Address P.O. Box 678 | | | | 10 | 28 | 2008 | | |
| City Vestal | State | Ziı | p Code (Plus 4) | | | | | |
| | NY | 13 | 8851 | | | | | |
| Employer Name Newman Developmen | t | | | Occupat | ion | builder | | |
| Employer Mailing Address/Principal Plac | e of Business | | City | | State | | Zip Code | (Plus 4) |
| Plymouth Meeting Office Campus1000 C | Germantown Pike | | Plymouth Meetin | g | PA | | 19462 | |
| Full Name of Contributor | | | | | | V=15 | | |
| David Newman | | | | МО | DAY | YEAR | \$ | 500.00 |
| Mailing Address PO Box 678 | | | | 10 | 28 | 2008 | 1 | |
| City Vestal | State | Zij | p Code (Plus 4) | | 20 | 2000 | I | |
| | NY | 13 | 8851678 | | | | | |
| Employer Name Newman Developmen | t | | | Occupat | ion | builder | | |
| Employer Mailing Address/Principal Plac | e of Business | | City | | State | | Zip Code | (Plus 4) |
| Plymouth Green Office CampusSuite E-2 | 2 | | Plymouth Meetin | g | PA | | 19462 | |
| Full Name of Contributor | | | | | | | | |
| Marc Newman | | | | МО | DAY | YEAR | \$ | 500.00 |
| Mailing Address P.O. Box 678 | | | | 10 | 20 | 2008 | 7 | |
| City Vestal | State | Zij | p Code (Plus 4) | 10 | 28 | 2006 | | |
| | NY | 13 | 8851678 | | | | 1 | |
| Employer Name Newman Development | | | Occupat | ion | builder | | | |
| Employer Mailing Address/Principal Place of Business City | | | State Zip Code (Plus 4) | | | (Plus 4) | | |
| Plymouth Green Office Campus1000 Germantown Pike, Suite Plymouth Meetin E-2 | | | g | PA | | 19462 | | |
| | | | | | | | | |

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

PAGE TOTAL \$ 4,600.00

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 Peri | od | | | | |
|-----------------------------|---|---------------|---------|----------|-----|------|-----|------------|--|
| | | | From: T | | | To: | Го: | | |
| | | | | D | ATE | | | AMOUNT | |
| Full Name | | | | мо | DAY | YEAR | \$ | 0.00 | |
| Mailing Address | | | | | | | | | |
| City | State | Zip Code (I | Plus 4) | | | | | | |
| Receipt Description | • | • | | | • | • | | | |
| Futor Count Total of Boot | nter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4. | | | | | | | PAGE TOTAL | |
| Enter Grand Total of Part I | e on Schedule I, Detalled | Summary Page, | Section | 4. | | | \$ | 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 | |
|--|-----------------|----------------------------|------------|
| Better Government for PA | From: | <u>1/1/2008</u> To: | 11/24/2008 |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | PER 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 Candidate | | | | Reporting Period | | | | | |
|--|--------------------|---------------------|----------|------------------|-----|----------|------------|------|--|
| | | | | | | 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 Sche Section 2. | dule II, In-Kind (| Contributions Detai | iled Sum | mary Pag | je, | | PAGE TOTAL | | |
| | | | | | | \$ | (| 0.00 | |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | | | | Re | porting | Period | | | | |
|---|------------------|------|------------------|--------|---------|--------------|-------|------|---------------------|------|
| | | | | Fro | m: | | To: | | | |
| | | | | | | DATE | | | AMOUNT | |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | | | | \$ | 0.00 |
| City | State | | Zip Code(Plus 4) | | | | | | | |
| Employer of Contributor | | | | | Occup | ation | | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | ′ | Stat | e Zip | Code(Plus 4) | Desci | ript | ion of Contribution | on |
| Enter Grand Total of Part G on Sch | edule II, In-Kir | nd C | ontributions De | etaile | ed | | | | PAGE TO | ΓAL |
| Summary Page, Section 3. | | | | | | | | | | 0.00 |

4,025.00

STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candida | te | | Reporting Period | | | | | |
|---|----------------------------|-------------------|------------------|----------------------|----------|------------|------------|--|
| Better Government for PA | | | | From <u>1/1/2008</u> | | | 11/24/2008 | |
| | | I | DATE AMOU | | | | | |
| To Whom Paid Dauphin County Republican Committee | мо | DAY | YEAR | | | | | |
| Mailing Address 2550 Paxton Stree | 10 | 21 | 2008 | \$ | 425.00 | | | |
| City Harrisburg | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | • | | |
| | PA | 17111 | contrib | ution | | | | |
| To Whom Paid Friends of Scott Martin | | | МО | DAY | YEAR | | | |
| Mailing Address 1535 N. Jefferson | Ct. | | 10 | 30 | 2008 | \$ | 3,600.00 | |
| City Lancaster | Description of Expenditure | | | | | | | |
| | PA | 17602 | contribu | ution | | | | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | PAGE TOTAL | | |