

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		2003196		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> KILLION, THOMAS VICTORY COM												
<b>Street Address:</b>												
<b>City:</b> MEDIA						<b>State:</b> PA			<b>Zip Code:</b> 19063			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2009	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
REPRESENTATIVE IN THE GENERAL ASSEMBLY						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	STH	REP	23	
						11	3	2009	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		1	1	2009		6	8	2009				
<b>A. Amount Brought Forward From Last Report</b>						\$ 9,582.30						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 1,000.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 10,582.30						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 3,730.91						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 6,851.39						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 1,375.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
KILLION, THOMAS VICTORY COM	From: <u>1/1/2009</u> To: <u>6/8/2009</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 1,000.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 1,000.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 1,000.00
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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	Reporting Period
	From: To:

DATE			AMOUNT
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Full Name of Contributing Committee			MO	DAY	YEAR	\$0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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

PAGE TOTAL
\$0.00

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)					

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

<b>PAGE TOTAL</b>	
\$	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.**

<b>Name of Filing Committee or Candidate</b>  KILLION, THOMAS VICTORY COM	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2009</u> <b>To:</b> <u>6/8/2009</u>
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				DATE			AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$	500.00
AZ PAC								
Mailing Address								
City		WILMINGTON	State	DE	Zip Code (Plus 4)		19850-543	
Full Name of Contributing Committee				MO	DAY	YEAR	\$	500.00
FEINBERG SHOPP PAC								
Mailing Address								
City		HARRISBURG	State	PA	Zip Code (Plus 4)		17101	

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

<b>PAGE TOTAL</b>
\$ 1,000.00

**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: <span style="float: right;">To:</span>

			DATE	AMOUNT
Full Name of Contributor			MO	DAY
Mailing Address			YEAR	\$ 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.

<b>PAGE TOTAL</b>
\$ 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>  <b>From:</b> <b>To:</b>
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			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.**

<b>PAGE TOTAL</b>	
\$	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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
KILLION, THOMAS VICTORY COM		From: <u>1/1/2009</u> To: <u>6/8/2009</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period		(3)	\$ 1,375.00
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.)			\$ 1,375.00



**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 0.00

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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
KILLION, THOMAS VICTORY COM	From: <u>1/1/2009</u> To: <u>6/8/2009</u>

					DATE		AMOUNT	
Full Name of Contributor					MO	DAY	YEAR	\$
PETER R. BARSZ CPA								
Mailing Address								
City			State		Zip Code(Plus 4)		1,375.00	
MEDIA			PA		19063			
Employer of Contributor					Occupation			
MERVES AMON & BARSZ LLC					CPA			
Employer Mailing Address/Principal Place of Business				City	State	Zip Code(Plus 4)	Description of Contribution	
				MEDIA	PA	19063	ACCOUNTING SERVICES	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.								PAGE TOTAL
								1,375.00

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
KILLION, THOMAS VICTORY COM	From <u>1/1/2009</u> To: <u>6/8/2009</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
TD CARD SERVICES				
<b>Mailing Address</b>	5	12	2009	\$ 68.35
<b>City</b> CHERRY HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 08034-037	<b>Description of Expenditure</b> CAMPAIGN EXPENSE	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
CONGREGATION OHEY SHALOM				
<b>Mailing Address</b>	5	12	2009	\$ 200.00
<b>City</b> WALLINGFORD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19086	<b>Description of Expenditure</b> ADVERTISING/CONTRIBUTION	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
MODERN DEVELOPMENT				
<b>Mailing Address</b>	5	12	2009	\$ 90.00
<b>City</b> FURLONG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18925	<b>Description of Expenditure</b> INTERNET SERVICE	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
AT&T				
<b>Mailing Address</b>	5	12	2009	\$ 37.85
<b>City</b> PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15287	<b>Description of Expenditure</b> TELEPHONE	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
VERIZON				
<b>Mailing Address</b>	5	12	2009	\$ 67.67
<b>City</b> LEHIGH VALLEY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18002-800	<b>Description of Expenditure</b> TELEPHONE	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
KARI J. MCNICHOL				
<b>Mailing Address</b>	5	22	2009	\$ 401.10
<b>City</b> SPRINGFIELD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19064	<b>Description of Expenditure</b> PAYROLL- NET	

To Whom Paid CAMPAIGN EMAIL SERVICES LLC			MO	DAY	YEAR	\$ 1,500.00
Mailing Address			5	22	2009	
City YARDLEY	State PA	Zip Code (Plus 4) 19067	Description of Expenditure DATABASE CONSTRUCTION			
To Whom Paid STANLEY T. PETERSON			MO	DAY	YEAR	\$ 34.99
Mailing Address			5	22	2009	
City SPRINGFIELD	State PA	Zip Code (Plus 4) 19064	Description of Expenditure DOMAIN NAME			
To Whom Paid RIDDLE VILLAGE SUPPORT ENDOWMENT FUND			MO	DAY	YEAR	\$ 500.00
Mailing Address			6	1	2009	
City MEDIA	State PA	Zip Code (Plus 4) 19063	Description of Expenditure ADVERTISING/CONTRIBUTION			
To Whom Paid FAIR ACRES FAIR			MO	DAY	YEAR	\$ 50.00
Mailing Address			6	2	2009	
City LIMA	State PA	Zip Code (Plus 4) 19037	Description of Expenditure CONTRIBUTION			
To Whom Paid MONTGOMERY INSURANCE SERVICES INC.			MO	DAY	YEAR	\$ 226.00
Mailing Address			6	2	2009	
City MEDIA	State PA	Zip Code (Plus 4) 19063	Description of Expenditure INSURANCE- WORKER'S COMP			
To Whom Paid HRCC			MO	DAY	YEAR	\$ 200.00
Mailing Address			6	2	2009	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CONTRIBUTION			
To Whom Paid AT&T			MO	DAY	YEAR	\$ 37.85
Mailing Address			6	2	2009	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15287	Description of Expenditure TELEPHONE			
To Whom Paid VERIZON			MO	DAY	YEAR	\$ 67.10
Mailing Address			6	2	2009	
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 18002-800	Description of Expenditure TELEPHONE			

<b>To Whom Paid</b> FRANKLIN MAPS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 250.00
<b>Mailing Address</b>			6	3	2009	
<b>City</b> KING OF PRUSSIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19406	<b>Description of Expenditure</b> ADVERTISING			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> <b>\$</b> 3,730.91

