

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

RECEIVED APR 05 2017

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE ² <input type="checkbox"/>	LOBBYIST ³ <input type="checkbox"/>																			
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST ROBERT DANIEL LAVELLE																								
STREET ADDRESS 4331 ANDOVER TERRACE																								
CITY PITTSBURGH			STATE PA	ZIP CODE 15213-																				
TYPE OF REPORT (CHECK ONE) 6TH TUESDAY PRE-PRIMARY 1. 2ND FRIDAY PRE-PRIMARY 2. 30 DAY POST-PRIMARY 3. 6TH TUESDAY PRE-ELECTION 4. 2ND FRIDAY PRE-ELECTION 5. 30 DAY POST-ELECTION 6. ANNUAL REPORT 7.	NAME OF OFFICE SOUGHT BY CANDIDATE City Council		DISTRICT NO. 6	PARTY DEM																				
	DATES OF REPORTING PERIOD <table border="1" style="display: inline-table; margin-right: 10px;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>3</td><td>1</td><td>17</td></tr> </table> TO <table border="1" style="display: inline-table;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>3</td><td>31</td><td>17</td></tr> </table>			MO.	DAY	YEAR	3	1	17	MO.	DAY	YEAR	3	31	17	DATE OF ELECTION <table border="1" style="display: inline-table;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>5</td><td>16</td><td>17</td></tr> </table>			MO.	DAY	YEAR	5	16	17
	MO.	DAY	YEAR																					
	3	1	17																					
	MO.	DAY	YEAR																					
	3	31	17																					
	MO.	DAY	YEAR																					
5	16	17																						
FOR OFFICE USE ONLY																								
CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u>																								
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>																								
<table border="1" style="width:100%;"> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> </table>						AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>	TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>											
AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>																					
TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>																					

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS <u>5th</u> DAY OF <u>April</u> 20 <u>17</u> _____ Kirk Holbrook SIGNATURE MY COMMISSION EXPIRES <u>Jan 6th 2021</u> MO. DAY YR.	_____ R. Daniel Lavelle SIGNATURE OF PERSON SUBMITTING REPORT ROBERT DANIEL LAVELLE PRINTED NAME _____ 412 3525872 AREA CODE DAYTIME TELEPHONE NUMBER
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COMMONWEALTH OF PENNSYLVANIA

NOTARIAL SEAL
 Kirk Holbrook, Notary Public
 City of Pittsburgh, Allegheny County
 My Commission Expires Jan. 6, 2021

PART II - If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

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 MY COMMISSION EXPIRES _____ MO. DAY YR.	_____ SIGNATURE OF CANDIDATE _____ PRINTED NAME _____ AREA CODE DAYTIME TELEPHONE NUMBER
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Allegheny County Elections Division
 601 County Office Building \ Suite 601 \ 542 Forbes Avenue
 Pittsburgh, PA. 15219-2953 \ Phone (412) 350-4520

INSTRUCTIONS FOR FILING THE CAMPAIGN FINANCE STATEMENT

1. You may file this statement in lieu of a full report when the amount of contributions (including in-kind contributions) received, the amount of money expended and the liabilities incurred *each* did not exceed \$250.00 during the reporting period.
2. File this statement in the office where the nomination petitions, nomination certificate or nomination papers of the candidate(s) supported were filed.
3. **A candidate must file a statement or report that is separate from one filed by her/his authorized committee.**
4. Each statement shall be subscribed and sworn to by the candidate (if it is the candidate's personal report) or the treasurer of the political committee, acknowledging the accuracy of the report. In addition, those reports filed on behalf of a candidate's political committee, authorized by a candidate and created solely for the purpose of influencing an election on behalf of that candidate, shall be subscribed and sworn to by that candidate.
5. Reports must be filed according to the following schedule. For specific dates, consult the Election Calendar.

First report deadline: Cycle 1	Sixth Tuesday Pre-Primary. Reporting period closes 50 days prior to the election. (Required only by statewide candidates on the ballot and political committees supporting statewide candidates.)
Second report deadline: Cycle 2	Second Friday Pre-Primary. Reporting period closes 15 days prior to the election. (Required by all candidates on the ballot and committees supporting such candidates.)
Third report deadline: Cycle 3	30 days Post-Primary. Reporting period closes 20 days after the election. (Required by all candidates on the ballot and committees supporting such candidates.)
Fourth report deadline: Cycle 4	6 th Tuesday Pre-Election. Reporting period closes 50 days prior to the election. (Required only by statewide candidates on the ballot and political committees supporting statewide candidates.)
Fifth report deadline: Cycle 5	2 nd Friday Pre-Election. Reporting period closes 15 days prior to the election. (Required by all candidates on the ballot and committees supporting such candidates.)
Sixth report deadline: Cycle 6	30 days Post-Election. Reporting period closes 20 days after the election. (Required by all candidates on the ballot and committees supporting such candidates.)
Annual report deadline: Cycle 7	January 31 st of the following year. Statement must be complete as of December 31.
6. Political committees that are required to file pre-election reports are also required to file at all subsequent reporting deadlines for that election.
7. Retain copies of all records for a period of 3 years. Although no detailed campaign expense report is filed, you are required to keep a record of the names and addresses of each person from whom a contribution of over \$10.00 has been received and a record of all other information required to be reported pursuant to the Campaign Expense Reporting Law.

LATE FILING PENALTY

A penalty of \$10.00 for each day or part of the day (excluding Saturdays, Sundays and holidays) that the statement is overdue, plus an additional fee of \$10.00 for each of the first six days that a statement is overdue, will be assessed.

In addition, any candidate or treasurer of a political committee, or person acting as such treasurer, who shall fail to file an account of primary or election expenses, as required by the Law, shall be guilty of a misdemeanor and, upon conviction thereof, shall be sentenced to pay a fine not exceeding \$5,000 (five thousand dollars) or to undergo an imprisonment of not less than one (1) month nor more than two (2) years, or both, in the discretion of the court.

Further penalties are provided by law.

Postmarks are acceptable as proof of timely filing where report is sent by first class mail and postmarked by the United States Postal Service, no later than the day prior to the filing deadline.

Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

RECEIVED APR 05 2017

File Identification Number	Report Filed By (Mark X)	Candidate	Committee	<input checked="" type="checkbox"/> Lobbyist
Name of Filing Committee, Candidate or Lobbyist	CITIZENS FOR DANIEL LAVELLE			
Street Address	PO Box 23553			
City	PITTSBURGH	State	PA	Zip Code 15222

Type of Report (Place x under report type)

1-6 Tuesday Pre-Primary	2-2nd Friday Pre-Primary	3-30 Day Post Primary	4-6 Tuesday Pre-Election	5-2nd Friday Pre-Election	6-30 Day Post Election	7-Annual	Special 2 Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date of Election (MM/DD/YYYY)	5/16/2017			Year	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
A. Amount Brought Forward From Last Report	3/1/2017	3/31/2017	
B. Total Monetary Contributions and Receipts (From Schedule I)		\$ 11462.96	
C. Total Funds Available (Sum of Lines A and B)		\$ 26250.00	
D. Total Expenditures (From Schedule III)		\$ 37712.96	
E. Ending Cash Balance (Subtract Line D from Line C)		\$ 8247.44	
F. Value of In-Kind Contributions Received (From Schedule II)		\$ 0	
G. Unpaid Debts and Obligations (From Schedule IV)		\$ 0	

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 on paper, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 5th day of April 20 17

Kirk Holbrook
Signature

Philus D Lavelle
Signature of Person Submitting report
PHILUS D LAVELLE
Printed Name

My Commission expires Jan. 6th 2021
COMMONWEALTH OF PENNSYLVANIA YR.

412 Area Code 6824635 Daytime Telephone Number

NOTARIAL SEAL

Part II - If this is a Candidate report, 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.

My Commission Expires Jan. 6, 2021

MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Sworn to and subscribed before me this 5th day of April 20 17

Kirk Holbrook
Signature

R. Daniel Lavelle
Signature of Candidate
ROBERT DANIEL LAVELLE
Printed Name

My Commission expires Jan 6th 2021
MO. DAY YR.

412 Area Code 3525872 Daytime Telephone Number

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
Kirk Holbrook, Notary Public
City of Pittsburgh, Allegheny County
My Commission Expires Jan. 6, 2021
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

RECEIVED APR 10 1998

PENNSYLVANIA CAMPAIGN FINANCE REPORT

This Report must be typed or printed legibly in blue or black ink.

INSTRUCTIONS

This form is intended for the use of candidates, political committees and contributing lobbyists who are required to disclose contributions and expenditures. Candidates must file separate reports when they make expenditures or receive contributions on their own behalf and separate from their campaign committee. A candidate's report discloses contributions received and expenditures made individually by the candidate. A contributing lobbyist's report discloses only expenditures the lobbyist personally made to influence the outcome of a candidate's election.

Candidates and their authorized political committees file reports in the office where their nomination documents are filed. If the candidate's reports are filed with the Secretary of the Commonwealth, a copy of the reports filed by the candidate and the authorized committee must be filed with the County Board of Elections in the county in which the candidate resides.

REPORT COVER PAGE

The Report Cover Page identifies the filer, the type of report and what reporting period is covered. It also summarizes the detailed contribution and expenditure sections from the body of the report.

Filer Identification Number - This number is assigned by the Bureau of Commissions, Elections and Legislation to candidates and committees who register and file with the Secretary of the Commonwealth. A candidate's filer identification number is assigned by the Bureau when the candidate files nomination petitions. A political committee or lobbyist filer identification number is assigned when the committee or lobbyist files registration documents in the Bureau.

Report Filed By - Please indicate which type of filer you are by checking the appropriate box on the cover page.

Name of Filing Committee, Candidate or Lobbyist, Street Address, City, State, Zip Code - Please enter appropriate name and address.

Type of Report - Please place an "X" by the applicable report type.

Amendment Report - Check "Yes" only if the report is being filed to correct, add to, or in some way change a report that has already been filed.

Termination Report - Check "Yes" only if the filer has no cash balance, no unpaid debts or obligations, and wishes to cease operation. Contributing lobbyists may file a termination report if they do not anticipate making further contributions to influence the outcome of a candidate's election.

Filing Method - Indicate whether the complete report is filed on paper, or if the report is filed by diskette accompanied by the signed and notarized cover sheet.

Name of Office Sought - If filed by a candidate or candidate's committee, indicate office sought.

Date of Election - If this is a pre- or post-primary/election report, indicate the date of the primary or election.

District Number - If filed by a candidate or candidate's committee, indicate district in which candidate is seeking office.

Office Code, Party Code and County Code - If filed by candidate or candidate's committee, refer to code charts at the back of this report form. Enter the corresponding code letters for the office sought and the political party of the candidate; enter the corresponding code number for the county of residence of the candidate. Candidates for local offices who file only with the County Board of Elections should enter Office Code OTH for Other Offices.

Summary of Receipts and Expenditures - Enter the appropriate dates of the reporting period covered.

Amount Brought Forward From Last Report (Item A) - The balance, if any, as of the first day of the reporting period. For committees, it is the amount reported as the ending cash balance on the previous report filed, if any.

Items B through G - See detailed instructions on each corresponding schedule.

Affidavit Section - Must be sworn to by the filer acknowledging the accuracy of the report (Part I). On reports filed by a candidate's authorized committee, the candidate must sign an additional affidavit (Part II).

Page Number - Calculate the total number of pages in the completed report and indicate on top of cover page. Subsequent pages should be numbered consecutively.

Reports Filed on Diskette: The cover page must accompany all filings, including diskette filings. Diskette filings must also meet the technical specifications of the Department. These specifications are available at www.dos.state.pa.us or by contacting the Bureau.

SCHEDULE I
Contributions and Receipts
 Detailed Summary Page

Filer Identification Number: CITIZENS FOR DANIEL LAVELLE	
1. Unitemized Contributions and Receipts \$50.00 or Less per Contributor	
Total for the reporting period (1)	\$ 50.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)	
Contributions Received from Political Committees (Part A)	\$ 400.00
All Other Contributions (Part B)	\$ 800.00
Total for the reporting period (2)	\$ 1200.00
3. Contributions Over \$250.00 (From Part C and Part D)	
Contributions Received from Political Committees (Part C)	\$ 2000.00
All Other Contributions (Part D)	\$ 23000.00
Total for the reporting period (3)	\$ 25000.00
4. Other Receipts: Refunds, Interest Earned, Returned Checks, ETC. (From Part E)	
Total for the reporting period (4)	\$ 0
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 Page 1, Report Cover Page, Item B)	\$ 26250.00

SCHEDULE I

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page - provides a summary of all monetary contributions and receipts during the reporting period.

Item 1: Unitemized Contributions and Receipts represents the total amount of contributions and receipts of \$50.00 or less in the aggregate *per contributor* received during the reporting period. Items 2, 3 and 4: Enter the total for each section from the corresponding schedules in the report (Part A, Part B, Part C, Part D and Part E).

Enter the total from Schedule I on the Report Cover Page, Item B.

Definition of Contribution: Any payment, gift, subscription, assessment, contract, payment for services, dues, loan, forbearance, advance or deposit of money or any valuable thing, to a candidate or political committee made for the purpose of influencing any election in this Commonwealth or for paying debts incurred by or for a candidate or committee before or after any election. "Contribution" shall also include the purchase of tickets for events such as dinners, luncheons, rallies and other fund-raising events; the granting of discounts or rebates by television and radio stations and newspapers not extended on an equal basis to all candidates for the same office; and any payments provided for the benefit of any candidate, including any payments for the services of any person serving as an agent of a candidate or committee by a person other than the candidate or committee or a person whose expenditures the candidate or committee must report under the act. The word "contribution" includes any receipt or use of anything of value received by a political committee from another political committee and also includes any return on investments by a political committee. (See 25 P.S. §3241)

Instructions for Reporting Contributions

The *aggregate* total of contributions from an individual contributor within a reporting period determines which part of the report form should be used to disclose a contribution or receipt. The form is designed to list the dates and amounts of as many as three separate contributions from the same source in one line item.

Contributions and receipts of \$50 or less, per contributor, during the reporting period, need not be itemized on the report. The total amount of all unitemized contributions should appear on Schedule I, Contributions and Receipts Detailed Summary Page, Line 1. A record must be kept of the receipt dates of contributions and the names and addresses of each person from whom a contribution of over \$10 has been received.

Contributions and receipts over \$50 to \$250 - report the name of the contributor, mailing address, amount and date received on Schedule I, Part A, "Contributions Received from Political Committees," or Part B "All Other Contributions."

Contributions and receipts over \$250 - report the name of the contributor, mailing address, occupation, employer's name and address, amount and date received on Schedule I, Part C, "Contributions Received from Political Committees," or Part D, "All Other Contributions."

Receipts - Use Part E, "Other Receipts" to report all *other* monetary receipts or income; e.g. refunds received, interest income, returned checks and prior expenditures that were returned to the filer during the reporting period.

Address - In all Parts, a complete address, including zip code, must be provided. Space is provided for the Zip Code Plus Four. The State block should be completed with the U.S. Postal Service's standard two-letter abbreviation, such as PA for Pennsylvania.

Date - all date blocks in the report must be completed with eight digits. For instance, March 24, 2000 would appear as 03 24 2000.

Total - of each Part should be transferred to the appropriate section on the Schedule I, "Contributions and Receipts Detailed Summary Page" (Page 2 of the report form).

Occupation and Employer - Part D, which lists individuals who have contributed over \$250, also requires the occupation and name and address of the employer of the contributor. Report the principal place of business of any contributor who is self-employed.

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.

File Identification Number						Amount	
CITIZENS FOR DANIEL LAVELLE							
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$
BUCHANAN INGBERSOLL + RODNEY COM PUL EFFECTIVE STATE GOVMT						3/14/2017	250.00
House #	Street Address				Date [MM/DD/YYYY]	\$	
301	GRANT ST.						
City	State	Zip Code		Date [MM/DD/YYYY]		\$	
PH	PA	15219					
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$
FBEW PAC VOLUNTARY FUND						3/14/2017	150.00
House #	Street Address				Date [MM/DD/YYYY]	\$	
900	SEVENTH ST						
City	State	Zip Code		Date [MM/DD/YYYY]		\$	
WASHINGTON, DC		20001					
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$
House #	Street Address				Date [MM/DD/YYYY]	\$	
City	State	Zip Code		Date [MM/DD/YYYY]		\$	
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$
House #	Street Address				Date [MM/DD/YYYY]	\$	
City	State	Zip Code		Date [MM/DD/YYYY]		\$	
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$
House #	Street Address				Date [MM/DD/YYYY]	\$	
City	State	Zip Code		Date [MM/DD/YYYY]		\$	
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$
House #	Street Address				Date [MM/DD/YYYY]	\$	
City	State	Zip Code		Date [MM/DD/YYYY]		\$	

PART B
All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Identification Number: **CITIZENS FOR DANIEL LAVELLE**

Full Name of Contributor		DUSTY ELIAS KIRK		Date (MM/DD/YYYY)	3/14/2017	\$	250.00
House #	Street Address			Date (MM/DD/YYYY)		\$	
108	WOODLAND RD			Date (MM/DD/YYYY)		\$	
City	State	Zip Code			Date (MM/DD/YYYY)	\$	
PGH	PA	15232			Date (MM/DD/YYYY)	\$	
Full Name of Contributor		BURL J MOONE III		Date (MM/DD/YYYY)	3/14/2017	\$	200.00
House #	Street Address			Date (MM/DD/YYYY)		\$	
3200	IOWA ST			Date (MM/DD/YYYY)		\$	
City	State	Zip Code			Date (MM/DD/YYYY)	\$	
PGH	PA	15219			Date (MM/DD/YYYY)	\$	
Full Name of Contributor		STEPHEN A CATARINELLA		Date (MM/DD/YYYY)	3/14/2017	\$	100.00
House #	Street Address			Date (MM/DD/YYYY)		\$	
129	TYNEWOOD DR			Date (MM/DD/YYYY)		\$	
City	State	Zip Code			Date (MM/DD/YYYY)	\$	
TURTLE CREEK	PA	15145			Date (MM/DD/YYYY)	\$	
Full Name of Contributor		L+M ASSOCIATES		Date (MM/DD/YYYY)	3/14/2017	\$	250.00
House #	Street Address			Date (MM/DD/YYYY)		\$	
1	OXFORD CENTRE			Date (MM/DD/YYYY)		\$	
City	State	Zip Code			Date (MM/DD/YYYY)	\$	
PGH	PA	15219			Date (MM/DD/YYYY)	\$	
Full Name of Contributor				Date (MM/DD/YYYY)		\$	
House #	Street Address			Date (MM/DD/YYYY)		\$	
				Date (MM/DD/YYYY)		\$	
City	State	Zip Code			Date (MM/DD/YYYY)	\$	
					Date (MM/DD/YYYY)	\$	
Full Name of Contributor				Date (MM/DD/YYYY)		\$	
House #	Street Address			Date (MM/DD/YYYY)		\$	
				Date (MM/DD/YYYY)		\$	
City	State	Zip Code			Date (MM/DD/YYYY)	\$	
					Date (MM/DD/YYYY)	\$	

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 over \$250.00 in the reporting period.

Electoral District Number: **CITIZENS FOR DANIEL LAVELLE**

Full Name of Contributing Committee		MILLCRAFT COM FOR EFFECTIVE STATE		Date (MM/DD/YYYY)	\$
House #	Street Address			Date (MM/DD/YYYY)	\$
95	W BEAU ST			3/1/2017	1000.00
City	State	Zip Code			
WASHINGTON	PA	15301	Date (MM/DD/YYYY)	\$	
Full Name of Contributing Committee		INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS		Date (MM/DD/YYYY)	\$
House #	Street Address			Date (MM/DD/YYYY)	\$
5	PIREX HOTMETAL ST			3/22/2017	1000.00
City	State	Zip Code			
PITTSBURGH	PA	15222	Date (MM/DD/YYYY)	\$	
Full Name of Contributing Committee				Date (MM/DD/YYYY)	\$
House #	Street Address			Date (MM/DD/YYYY)	\$
City	State	Zip Code			
			Date (MM/DD/YYYY)	\$	
Full Name of Contributing Committee				Date (MM/DD/YYYY)	\$
House #	Street Address			Date (MM/DD/YYYY)	\$
City	State	Zip Code			
			Date (MM/DD/YYYY)	\$	
Full Name of Contributing Committee				Date (MM/DD/YYYY)	\$
House #	Street Address			Date (MM/DD/YYYY)	\$
City	State	Zip Code			
			Date (MM/DD/YYYY)	\$	
Full Name of Contributing Committee				Date (MM/DD/YYYY)	\$
House #	Street Address			Date (MM/DD/YYYY)	\$
City	State	Zip Code			
			Date (MM/DD/YYYY)	\$	

PART D
All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C)

File Identification Number: CITIZENS FOR DANIEL LAVELLE

Full Name of Contributor		M ROBERT MISTICK		Date [MM/DD/YYYY]	3/1/2017	\$	2700.00
House #	Street Address	828 N LINCOLN AV		Date [MM/DD/YYYY]		\$	
City	State	Zip Code	P6H PA 15233		Date [MM/DD/YYYY]	\$	
Employer Name		MISTICK CONSTRUCTION		Occupation		Construction	
Employer Mailing Address / Principal Place of Business		1300 BRIGHTON RD P6H PA 15233					
Full Name of Contributor		MORTON WILSON		Date [MM/DD/YYYY]	3/1/2017	\$	2700.00
House #	Street Address	3463 S PARK RD		Date [MM/DD/YYYY]		\$	
City	State	Zip Code	Berrel Park PA 15102		Date [MM/DD/YYYY]	\$	
Employer Name				Occupation			
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor		JEFFREY CALDWELL		Date [MM/DD/YYYY]	3/1/2017	\$	2700.00
House #	Street Address	14890 CHERRY LANE		Date [MM/DD/YYYY]		\$	
City	State	Zip Code	Irwin PA 15642		Date [MM/DD/YYYY]	\$	
Employer Name				Occupation			
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor		JEFFREY A. ANDERSON		Date [MM/DD/YYYY]		\$	2700.00
House #	Street Address	231 ANDERSON RD		Date [MM/DD/YYYY]		\$	
City	State	Zip Code	Butler PA 16002		Date [MM/DD/YYYY]	\$	
Employer Name				Occupation			
Employer Mailing Address / Principal Place of Business							

PART D
All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C)

File Identification Number: CITIZENS FOR DANIEL LAVELLE

Full Name of Contributor		WILLIAM J GATTI		Date [MM/DD/YYYY]	3/1/2017	\$	2700.00
House #	Street Address	4917 WALLINGTON ST		Date [MM/DD/YYYY]		\$	
City	State	Zip Code	PGH PA 15213		Date [MM/DD/YYYY]	\$	
Employer Name		TREK DEVELOPMENT		Occupation		PRESIDENT	
Employer Mailing Address / Principal Place of Business		1300 7th PGH PA 15222					
Full Name of Contributor		MICHAEL A POLITE		Date [MM/DD/YYYY]	3/1/2017	\$	1000.00
House #	Street Address	2950 COSENTINO DR		Date [MM/DD/YYYY]		\$	
City	State	Zip Code	PGH PA 15217		Date [MM/DD/YYYY]	\$	
Employer Name		FALBO INC		Occupation			
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor		DAVID SIMPkins		Date [MM/DD/YYYY]	3/1/2017	\$	1000.00
House #	Street Address	121 WILSON AV		Date [MM/DD/YYYY]		\$	
City	State	Zip Code	CECIL PA 15321		Date [MM/DD/YYYY]	\$	
Employer Name				Occupation		Contractor	
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor		JAY EDWARD BLACK		Date [MM/DD/YYYY]	3/1/2017	\$	1000.00
House #	Street Address	266 KENFOREST DR		Date [MM/DD/YYYY]		\$	
City	State	Zip Code	PGH PA 15216		Date [MM/DD/YYYY]	\$	
Employer Name				Occupation			
Employer Mailing Address / Principal Place of Business							

PART D
All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C)

Filer Identification Number: CITIZENS FOR DANIEL LAVELLE

Full Name of Contributor		RICHARD E BOSCO		Date [MM/DD/YYYY]	3/1/2017	\$	1000.00
House #	323	Street Address	ABBAY BROOK LN	Date [MM/DD/YYYY]		\$	
City	VENETIA	State	PA	Zip Code	15367	Date [MM/DD/YYYY]	\$
Employer Name			Occupation				
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor		BRIAN W LONG		Date [MM/DD/YYYY]	3/1/2017	\$	1000.00
House #	1010	Street Address	OHIO RIVER BLVD	Date [MM/DD/YYYY]		\$	
City	PGH	State	PA	Zip Code	15202	Date [MM/DD/YYYY]	\$
Employer Name			Occupation				
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor		LEO MAKOSKY		Date [MM/DD/YYYY]	3/1/2017	\$	500.00
House #	526	Street Address	BELLWOOD AV	Date [MM/DD/YYYY]		\$	
City	MONROEVILLE	State	PA	Zip Code	15146	Date [MM/DD/YYYY]	\$
Employer Name	MISTICK Construction		Occupation	MANAGER			
Employer Mailing Address / Principal Place of Business	1300 Brighton Road PGH PA 15233						
Full Name of Contributor		DANIEL K ROTHCHILD		Date [MM/DD/YYYY]	3/1/2017	\$	500.00
House #	25	Street Address	SUNNY HILL DR	Date [MM/DD/YYYY]		\$	
City	PGH	State	PA	Zip Code	15228	Date [MM/DD/YYYY]	\$
Employer Name	Rothchild + Dyno Collaborative		Occupation	architecture			
Employer Mailing Address / Principal Place of Business	2847 Penn Av PGH PA 15222						

PART D
All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C)

Full Identification Number: **CITIZENS FOR DANIEL LAVELLE**

Full Name of Contributor		RALPH FARBO JR		Date [MM/DD/YYYY]	3/1/2017	\$	500.00
House #	151	Street Address	FORT PITT BLVD	Date [MM/DD/YYYY]		\$	
City	PGH	State	PA	Zip Code	15222	Date [MM/DD/YYYY]	\$
Employer Name	FARBO INC		Occupation				
Employer Mailing Address / Principal Place of Business							

Full Name of Contributor		BRIAN J STAB		Date [MM/DD/YYYY]	3/1/2017	\$	500.00
House #	111	Street Address	RODGERS COURT	Date [MM/DD/YYYY]		\$	
City	PGH	State	PA	Zip Code	15120	Date [MM/DD/YYYY]	\$
Employer Name			Occupation				
Employer Mailing Address / Principal Place of Business							

Full Name of Contributor		ANDREW HAINES		Date [MM/DD/YYYY]	3/1/2017	\$	500.00
House #	917	Street Address	WALNUT ST	Date [MM/DD/YYYY]		\$	
City	HOLLIDAY BURG	State	PA	Zip Code	16648	Date [MM/DD/YYYY]	\$
Employer Name	S+A Homes		Occupation	owner			
Employer Mailing Address / Principal Place of Business							

Full Name of Contributor		KENNETH B DOYNO		Date [MM/DD/YYYY]	3/1/2017	\$	500.00
House #	559	Street Address	BRIAR CLIFF RD	Date [MM/DD/YYYY]		\$	
City	PGH	State	PA	Zip Code	15221	Date [MM/DD/YYYY]	\$
Employer Name	ROTHCHILD Doyno Collaborative		Occupation	ARCHITECTURE			
Employer Mailing Address / Principal Place of Business	2847 Penn Av PGH PA 15222						

PART D
All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C)

Filer Identification Number	
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Full Name of Contributor	MATTHEW W. QUIGLEY	Date [MM/DD/YYYY]	3/14/2017	\$	1500.00
House #	60	Street Address	QUINN ROAD	Date [MM/DD/YYYY]	\$
City	BRIARCLIFF MANOR	State	NY	Zip Code	10510
Employer Name	Q DEVELOPMENT	Occupation	PRINCIPAL		
Employer Mailing Address/ Principal Place of Business	828 W NORTH AV P6H PH 15233				
Full Name of Contributor		Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]	\$
City		State		Zip Code	
Employer Name		Occupation			
Employer Mailing Address/ Principal Place of Business					
Full Name of Contributor		Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]	\$
City		State		Zip Code	
Employer Name		Occupation			
Employer Mailing Address/ Principal Place of Business					
Full Name of Contributor		Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]	\$
City		State		Zip Code	
Employer Name		Occupation			
Employer Mailing Address/ Principal Place of Business					

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVEDUSE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD
DETAILED SUMMARY PAGE

File Identification Number	CITIZENS FOR DANIEL LAVELLE		
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED VALUE OF \$500 OR LESS PER CONTRIBUTOR			
TOTAL for the reporting period	(1)	\$	0

2. IN-KIND CONTRIBUTIONS RECEIVED VALUE OF \$500 TO \$2500 (FROM PART I)			
TOTAL for the reporting period	(2)	\$	0

3. IN-KIND CONTRIBUTION RECEIVED VALUE OVER \$2500 (FROM PART I)			
TOTAL for the reporting period	(3)	\$	0

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, Report Cover Page, Item F)		\$	0
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PART E
Other Receipts

REFUNDS, INTREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

File Identification Number	CITIZENS FOR DANIEL LAVELLE
----------------------------	-----------------------------

Full Name					
House #	Street Address				
City		State	Zip Code	Date (MM/DD/YYYY)	5
Receipt Description					
Full Name					
House #	Street Address				
City		State	Zip Code	Date (MM/DD/YYYY)	5
Receipt Description					
Full Name					
House #	Street Address				
City		State	Zip Code	Date (MM/DD/YYYY)	5
Receipt Description					
Full Name					
House #	Street Address				
City		State	Zip Code	Date (MM/DD/YYYY)	5
Receipt Description					
Full Name					
House #	Street Address				
City		State	Zip Code	Date (MM/DD/YYYY)	5
Receipt Description					

SCHEDULE II

IN-KIND CONTRIBUTIONS RECEIVED

Detailed Summary Page - provides a summary of all in-kind contributions and valuable things received during the reporting period.

Item 1: Unitemized In-Kind Contributions Received represents the total value of in-kind contributions of \$50.00 or less, in the aggregate per contributor, received during the reporting period.

Items 2 and 3: Enter the total for each section from the corresponding schedules in the report (Part F and Part G).

Enter the page total on Page 1, Report Cover Page, Item F.

Part F and Part G - Use these Parts to itemize in-kind contributions from individuals or political committees according to the dollar value of the contribution. The form is designed to list the dates and amounts of as many as three separate in-kind contributions from the same source in one line item. The amount is equal to the current market value of the item or service contributed.

Totals of Parts F and G should be transferred to the appropriate section on the Schedule II Detailed Summary Page.

SCHEDULE II
PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

File Identification Number: **CITIZENS FOR DANIEL LAVELLE**

Full Name of Contributor				Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Contribution					
Full Name of Contributor				Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Contribution					
Full Name of Contributor				Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Contribution					
Full Name of Contributor				Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Contribution					
Full Name of Contributor				Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Contribution					

**SCHEDULE II
Part G
In-Kind Contributions Received
VALUE OVER \$250**

MEMBER IDENTIFICATION NUMBER CITIZENS FOR DANIEL LAVELLE

Full Name of Contributor				Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City	State	Zip Code		Date [MM/DD/YYYY]	\$
Employer Name				Occupation	
Employer Mailing Address / Principal Place of Business				Description of Contribution	
Full Name of Contributor				Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City	State	Zip Code		Date [MM/DD/YYYY]	\$
Employer Name				Occupation	
Employer Mailing Address / Principal Place of Business				Description of Contribution	
Full Name of Contributor				Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City	State	Zip Code		Date [MM/DD/YYYY]	\$
Employer Name				Occupation	
Employer Mailing Address / Principal Place of Business				Description of Contribution	
Full Name of Contributor				Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City	State	Zip Code		Date [MM/DD/YYYY]	\$
Employer Name				Occupation	
Employer Mailing Address / Principal Place of Business				Description of Contribution	

SCHEDULE III

EXPENDITURES

Definition of Expenditure: The payment, distribution, loan or advancement of money or any valuable thing by a candidate, political committee or other person for the purpose of influencing the outcome of an election; the payment, distribution, loan, advance or transfer of money or other valuable thing between or among political committees; the providing of a service or other valuable thing for the purpose of influencing the outcome of a nomination or election of any person to any public office to be voted for in this Commonwealth; or the payment or providing of money or other valuable thing by any person other than a candidate or political committee, to compensate any person for services rendered to a candidate or political committee. (See 25 P.S. §3241)

Instructions for Reporting Expenditures

Pursuant to state law, the Statement of Expenditures requires the filer to report the purposes for which funds were expended, the name and address of the entity to whom the expenditure was made, and the amount and date of each expenditure.

Vouchers for all expenditures over \$25.00 must be retained by the candidate or committee treasurer and shall be available for public inspection or copying. Filers are not required to submit vouchers with reports; however, vouchers must be retained for a period of three years.

Transactions between a candidate and his/her committee should be recorded on both the candidate's and committee's reports. For example, if a candidate contributes to or loans the committee money, the amount should appear on the candidate's report as an expenditure and on the committee's report as a receipt. A loan must also be reported by the recipient on the Statement of Unpaid Debts (Schedule IV).

SCHEDULE III
Statement of Expenditures

Identification Number		CITIZENS FOR DANIEL LAVELLE					
To Whom Paid	ANDREA WATSON LINDSEY			Date (MM/DD/YYYY)	3/3/2017	\$	50.00
House #	2541	Street Address	ALLEQUIPAA ST		Description of Expenditure		
City	PGH	State	PA	Zip Code	15213	NOTARY SERVICE	
To Whom Paid	JAMIE JONES			Date (MM/DD/YYYY)	3/3/2017	\$	250.00
House #	2325	Street Address	S BRADDOCK AVE		Description of Expenditure		
City	SWISSVALE	State	PA	Zip Code	15218	CONSTITUENT FUNERAL ASSISTANCE	
To Whom Paid	CITY OF PGH DEMOCRATIC COMMITTEE			Date (MM/DD/YYYY)	3/3/2017	\$	250.00
House #		Street Address	PO BOX 71413		Description of Expenditure		
City	PGH	State	PA	Zip Code	15213	SPONSOR APPRECIATION EXTRAVAGANZA	
To Whom Paid	PHILLIS D LAVELLE			Date (MM/DD/YYYY)	3/3/2017	\$	250.00
House #	3143	Street Address	EWART DRIVE		Description of Expenditure		
City	PGH	State	PA	Zip Code	15219	REIMB - SUPPLIES - POSTAGE, PAPER, ENVELOPES, ETC.	
To Whom Paid	TYRONE JACKSON			Date (MM/DD/YYYY)	3/7/2017	\$	150.00
House #	29	Street Address	OVERLOOK ST		Description of Expenditure		
City	PGH	State	PA	Zip Code	15214	CANVASSER	
To Whom Paid	REGINALD GOOD			Date (MM/DD/YYYY)	3/7/2017	\$	270.00
House #	2921	Street Address	SHADELAND AV		Description of Expenditure		
City	PGH	State	PA	Zip Code	15212	CANVASSER	
To Whom Paid	THE UNION EDGE			Date (MM/DD/YYYY)	3/7/2017	\$	100.00
House #	841	Street Address	CALIFORNIA AV		Description of Expenditure		
City	PGH	State	PA	Zip Code	15212	LABOR RADIO DINNER 2 TICKETS	
To Whom Paid	R DANIEL LAVELLE			Date (MM/DD/YYYY)	3/11/2017	\$	50.00
House #	4331	Street Address	ANDOVER TERRACE		Description of Expenditure		
City	PGH	State	PA	Zip Code	15212	PETITION FILING	

SCHEDULE IV

STATEMENT OF UNPAID DEBTS

All unpaid debts and obligations which are outstanding at the end of the reporting period must be reported. If a debt is incurred in one reporting period and not repaid, every report filed must continue to show the outstanding debt, even though there was no activity during the current reporting period.

A debt owed to an individual may be forgiven. A copy of the letter of forgiveness from the individual to the committee must accompany the report filed by the committee in the reporting period in which the debt was forgiven. A debt that is forgiven is considered a contribution to the committee. Such contributions from corporations or unincorporated associations are prohibited by the Election Code.

SCHEDULE III
Statement of Expenditures

Filer Identification Number: CITIZENS FOR DANIEL LAVELLE

To Whom Paid	USPO	Date (MM/DD/YYYY)	3/13/2017	\$	49.00
House #	Street Address	Description of Expenditure			
City	State	Zip Code	POSTAGE		
	PGH	PA	152		
To Whom Paid	OMEGA Psi PHI	Date (MM/DD/YYYY)	3/13/2017	\$	200.00
House #	Street Address	Description of Expenditure			
City	State	Zip Code	MARDI GRAS EVENT		
	PGH	PA	15237		
To Whom Paid	JENEEN HENSON	Date (MM/DD/YYYY)	3/13/2017	\$	140.00
House #	Street Address	Description of Expenditure			
City	State	Zip Code	CANVASSER		
	PGH	PA	15212		
To Whom Paid	RANDY Mc IVER	Date (MM/DD/YYYY)	3/13/2017	\$	90.00
House #	Street Address	Description of Expenditure			
City	State	Zip Code	CANVASSER		
	PGH	PA	15212		
To Whom Paid	BRANDI TAYLOR	Date (MM/DD/YYYY)	3/15/2017	\$	500.00
House #	Street Address	Description of Expenditure			
City	State	Zip Code	CAMPAIGN ASSISTANT		
	PGH	PA	15212		
To Whom Paid	FRIENDS OF SALA UDIN	Date (MM/DD/YYYY)	3/15/2017	\$	250.00
House #	Street Address	Description of Expenditure			
City	State	Zip Code	CONTRIBUTION		
	PGH	PA	15219		
To Whom Paid	PNC BANK	Date (MM/DD/YYYY)	3/16/2017	\$	68.44
House #	Street Address	Description of Expenditure			
City	State	Zip Code	ENDORSEMENT STAMP		
	PGH	PA	15219		
To Whom Paid	PW/Grace Memorial Presb Church	Date (MM/DD/YYYY)	3/16/2017	\$	100.00
House #	Street Address	Description of Expenditure			
City	State	Zip Code	ADVERTISEMENT		
	PGH	PA	15219		

SCHEDULE III
Statement of Expenditures

Filer Identification Number: **CITIZENS FOR DANIEL LAVELLE**

To Whom Paid	BRANDI TAYLOR			Date (MM/DD/YYYY)	3/30/2017	\$	500.00
House #	1523	Street Address	GARFIELD AV	Description of Expenditure			
City	PGH	State	PA	Zip Code	15212	CAMPAIGN ASSISTANT	
To Whom Paid	KHARLI MOSLEY			Date (MM/DD/YYYY)	3/30/2017	\$	5000.00
House #	7000	Street Address	Meade Pl	Description of Expenditure			
City	PGH	State	PA	Zip Code	15208	CAMPAIGN MANAGER	
To Whom Paid	JENEEN HENSON			Date (MM/DD/YYYY)	3/30/2017	\$	40.00
House #	1112	Street Address	Hodgkess St	Description of Expenditure			
City	PGH	State	PA	Zip Code	15212	CANVASSER	
To Whom Paid	JEFFREY DZAMKO			Date (MM/DD/YYYY)	3/20/2017	\$	584.75
House #	1124	Street Address	SPRING GARDEN AVE	Description of Expenditure			
City	PGH	State	PA	Zip Code	15212	PRINTING	
To Whom Paid				Date (MM/DD/YYYY)		\$	
House #		Street Address		Description of Expenditure			
City		State		Zip Code			
To Whom Paid				Date (MM/DD/YYYY)		\$	
House #		Street Address		Description of Expenditure			
City		State		Zip Code			
To Whom Paid				Date (MM/DD/YYYY)		\$	
House #		Street Address		Description of Expenditure			
City		State		Zip Code			

**SCHEDULE IV
Statement of Unpaid Debts**

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

FILE IDENTIFICATION NUMBER: **CITIZENS FOR DANIEL LAVELLE**

Name of Creditor					Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)			\$
City	State	Zip Code			
Description of Debt					
Name of Creditor					Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)			\$
City	State	Zip Code			
Description of Debt					
Name of Creditor					Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)			\$
City	State	Zip Code			
Description of Debt					
Name of Creditor					Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)			\$
City	State	Zip Code			
Description of Debt					
Name of Creditor					Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)			\$
City	State	Zip Code			
Description of Debt					
Name of Creditor					Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)			\$
City	State	Zip Code			
Description of Debt					
Name of Creditor					Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)			\$
City	State	Zip Code			
Description of Debt					

REPORT FILING DEADLINES

Sixth Tuesday Pre-Election - Reporting period closes 50 days prior to election day. Filed only by candidates for Statewide office and political committees/lobbyists supporting such candidates.

Second Friday Pre-Election - Reporting period closes 15 days prior to election day. Filed by all candidates for nomination or election and political committees/lobbyists supporting such candidates.

Thirty Day Post-Election - Reporting period closes 20 days after election day. File 30 days after election day. Filed by all candidates for nomination or election and political committees/lobbyists supporting such candidates.

Annual Report - Reporting period closes December 31. File by January 31 of the year following the reporting period. Filed by all candidates for nomination or election, political committees and contributing lobbyists.

Political committees required to file pre-election reports must also file post-election reports.

Postmarks - are acceptable as proof of timely filing where report is sent by first class mail and postmarked by the U.S. Postal Service no later than the day prior to the filing deadline.

Late filing fee - A late filing fee of \$10.00 for each day or part of the day (excluding Saturdays, Sundays and holidays) that the report is overdue, plus an additional fee of \$10.00 for the first six days that a report is overdue will be assessed.

County Code Table:

01 Adams	24 Elk	47 Montour
02 Allegheny	25 Erie	48 Northampton
03 Armstrong	26 Fayette	49 Northumberland
04 Beaver	27 Franklin	50 Perry
05 Bedford	28 Forest	51 Philadelphia
06 Berks	29 Fulton	52 Pike
07 Blair	30 Greene	53 Potter
08 Bradford	31 Huntingdon	54 Schuylkill
09 Bucks	32 Indiana	55 Snyder
10 Butler	33 Jefferson	56 Somerset
11 Cambria	34 Juniata	57 Sullivan
12 Cameron	35 Lackawanna	58 Susquehanna
13 Carbon	36 Lancaster	59 Tioga
14 Centre	37 Lawrence	60 Union
15 Chester	38 Lebanon	61 Venango
16 Clarion	39 Lehigh	62 Warren
17 Clearfield	40 Luzerne	63 Washington
18 Clinton	41 Lycoming	64 Wayne
19 Columbia	42 McKean	65 Westmoreland
20 Crawford	43 Mercer	66 Wyoming
21 Cumberland	44 Mifflin	67 York
22 Dauphin	45 Monroe	
23 Delaware	46 Montgomery	

Party Code Table:

REP	Republican Party
DEM	Democratic Party
CST	Constitutional Party
LIB	Libertarian Party
REF	Reform Party
OTH	Other

Office Code Table:

GOV	Governor
LTG	Lieutenant Governor
ATT	Attorney General
AUD	Auditor General
TRE	State Treasurer
SPM	Justice of the Supreme Court
SPR	Judge of the Superior Court
CCJ	Judge of the Commonwealth Court
STS	Senator in the General Assembly
STH	Representative in the General Assembly
CPJ	Judge of the Court of Common Pleas
MCJ	Judge of the Municipal Court
TCJ	Judge of the Traffic Court
OTH	Other (Candidates for local offices who file only with the County Board of Elections)