04/16/2016 01:03

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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		For An	_	ized Comr	nittee			Office	e Use Only
1. NAME OF COMMITTEE (in	full)	TYPE OR PRI	NT ▼		mple: If typing	g, type	12FE4M	5	
Taxpayers for	Art Ha	Ivorson Com	mittee						I
<u> </u>									
		P.O. Box 11							
ADDRESS (number ar	nd street)	F.O. BOX 11							
Check if di									
than previoreported. (A		Bedford					L PA	15522	
2. FEC IDENTIFIC	CATION	NUMBER ▼		CITY			STATE A		ZIP CODE A STATE ▼ DISTRICT
C C0054568	31			IS THIS REPORT	× NEW (N)	OR	AMENI (A)	DED	PA 09
4. TYPE OF RE	PORT (Chaosa Ona)	1						
(a) Quarterly R		Official office	(b) 1	12-Day PRE -	Election Repo	rt for the:			_
		y Report (Q1)			Primary (12P)		General (12G)	Runoff (12R)
					Convention (1	12C)	Special (12S)	
July 15	Quarterly	/ Report (Q2)			M M /	D D /	YYYY	1	in the
Octobe	r 15 Quai	terly Report (Q3)		Election on					State of
January	/ 31 Year-	End Report (YE)	(c) 3	30-Day POS 1	-Election Rep	ort for the:			
					General (30G		Runoff (3	0R)	Special (30S)
Termina	ation Repo	ort (TER)		Election on	M M /	D D /	Y Y Y Y		in the State of
5. Covering Period	N	01 / 01 D		016 Y	through	M M M	/ D D /	Y	y y y y 2016
I certify that I have e	examined	this Report and	to the be	est of my kno	owledge and k	pelief it is tr	ue, correct an	d com	pplete.
Type or Print Name	of Treasu	rer Catherine F	. Jacobs						
Signature of Treasure	er <u>C</u>	atherine F. Jacobs			Electronically I	Filed] [Date 04	/	15 / Y Y Y Y Y Y Z Y Z Y Z Y Z Y Z Y Z Y Z
NOTE: Submission of	false, erre	oneous, or incomp	olete infor	mation may s	ubject the pers	son signing	this Report to	the per	nalties of 2 U.S.C. §437g.
Office									EC FORM 3
Use Only									Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

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2016

03

31

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Taxpayers for Art Halvorson Committee

01 01 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 23807.00 64357.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 23807.00 64357.00 (subtract Line 6(b) from Line 6(a)) Net Operating Expenditures (a) Total Operating Expenditures 142839.04 148267.08 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 142839.04 148267.08 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 31074.63 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 285000.00 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts PAGE 3 / 30 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Taxpayers for Art Halvorson Committee

01 2016 03 31 2016 Report Covering the Period: From: To:

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
11. CONTRIBUTIONS (other than loans) FRO	DM:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	18300.00	55800.00	
(ii) Unitemized	5507.00	8557.00	
(iii) TOTAL of contributions from individuals	23807.00	64357.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) The Candidate	0.00	0.00	
(add Lines 11(a)(iii), (b), (c), and (d)).	23807.00	64357.00	
2. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	
3. LOANS:			
(a) Made or Guaranteed by the Candidate	110000.00	110000.00	
(b) All Other Loans	0.00	0.00	
(c) TOTAL LOANS (add Lines 13(a) and (b))	110000.00	110000.00	
4. OFFSETS TO OPERATING EXPENDITURES	_		
(Refunds, Rebates, etc.)	0.00	0.00	
5. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00	
6. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	133807.00	174357.00	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	142839.04	148267.08
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	142839.04	148267.08
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	40106.67
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	133807.00
25.	SUBTOTAL (add Line 23 and Line 24)		173913.67
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	142839.04
27.	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	31074.63

FOR LINE NUMBER: **PAGE** 5 OF 30 Use separate schedule(s) (check only one) for each category of the 11a 11b 11c Detailed Summary Page 12 13a 13b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee Full Name (Last, First, Middle Initial) LESLEY BAER Date of Receipt Mailing Address 282 COVE LANE 2016 15 City State Zip Code Transaction ID: SA11AI.5375 PΑ 15522 **BEDFORD** FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 1000.00 Name of Employer Occupation N/A N/A Memo Item check Receipt For: 2016 Election Cycle-to-Date Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) Hezekiah Barge Date of Receipt Mailing Address 1596 Fish Hawk Court 24 2016 City State Zip Code Transaction ID: SA11AI.5269 Woodbridge VA 22191 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 300.00 Name of Employer Occupation NA Memo Item NA Anedot Receipt For: 2016 Election Cycle-to-Date | Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) TAUNA BROWN Date of Receipt Mailing Address 1500 PHILADELPHIA AVENUE 2016 24 City Zip Code State Transaction ID: SA11AI.5388 PΑ **CHAMBERSBURG** 17201 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 300.00 Name of Employer Occupation N/A N/A Memo Item Receipt For: 2016 Check Election Cycle-to-Date | Primary General Other (specify) 300.00 1600.00 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: **PAGE** 6 OF 30 Use separate schedule(s) (check only one) 11a 11b 11c 12

for each category of the Detailed Summary Page 13a 13b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee Full Name (Last, First, Middle Initial) LEE BRYAN Date of Receipt Mailing Address 4504 MILLIGANS COVE ROAD 2016 02 City State Zip Code Transaction ID: SA11AI.5285 PΑ 15550 MANNS CHOICE FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 2600.00 Name of Employer Occupation N/A **HOMEMAKER** Memo Item Anedot Receipt For: 2016 Election Cycle-to-Date Primary General 2600.00 Other (specify) Full Name (Last, First, Middle Initial) DAVID CRANDALL Date of Receipt Mailing Address 3252 GLADE PIKE 01 2016 Citv State Zip Code Transaction ID: SA11AI.5368 MANNS CHOICE PΑ 15550 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation **RETIRED** N/A Memo Item Check Receipt For: 2016 Election Cycle-to-Date | Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) DAVID CRANDALL Date of Receipt Mailing Address 3252 GLADE PIKE 2016 15 City State Zip Code Transaction ID: SA11AI.5370 PΑ MANNS CHOICE 15550 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 300.00 Name of Employer Occupation N/A **RETIRED** Memo Item Receipt For: 2016 Check Election Cycle-to-Date Primary General Other (specify) 1300.00 3400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 7 OF 30 (check only one) 11a 11b 11c 12 13a 13b

Use separate schedule(s) for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee Full Name (Last, First, Middle Initial) Luke Donahue Date of Receipt Mailing Address 1268 Braleigh Lane 2016 05 City State Zip Code Transaction ID: SA11AI.5293 VA 23455 Virginia Beach FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation **US Navy** Officer Memo Item Anedot Receipt For: 2016 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) EDWARD K. FREAR Date of Receipt Mailing Address PO BOX 619 15 2016 Citv State Zip Code Transaction ID: SA11AI.5371 **BEDFORD** PΑ 15522 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2000.00 Name of Employer Occupation **RETIRED** N/A Memo Item Check Receipt For: 2016 Election Cycle-to-Date | Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) **ERIK HALVORSON** Date of Receipt Mailing Address 6730 DESEO 2016 23 APT 246 City State Zip Code Transaction ID: SA11AI.5279 TX **IRVING** 75039 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 600.00 Name of Employer Occupation **LOCKTON COMPANIES** COMMUNICATIONS Memo Item Receipt For: 2016 Anedot Election Cycle-to-Date | Primary General Other (specify) 600.00 2850.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 8 OF 30 (check only one) 11a 11b 11c 12 13a 13b

Use separate schedule(s) for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee Full Name (Last, First, Middle Initial) **ERIK HALVORSON** Date of Receipt Mailing Address 6730 DESEO 2016 80 **APT 246** City State Zip Code Transaction ID: SA11AI.5295 TX 75039 **IRVING** FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 2000.00 Name of Employer Occupation **LOCKTON COMPANIES** COMMUNICATIONS Memo Item Anedot Receipt For: 2016 Election Cycle-to-Date Primary General 2600.00 Other (specify) Full Name (Last, First, Middle Initial) SUSAN HALVORSON Date of Receipt Mailing Address 6730 DESEO 80 2016 **APT 246** City State Zip Code Transaction ID: SA11AI.5296 **IRVING** TX 75039 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2500.00 Name of Employer Occupation **HOMEMAKER** N/A Memo Item Anedot Receipt For: 2016 Election Cycle-to-Date | Primary General 2500.00 Other (specify) Full Name (Last, First, Middle Initial) **DENNIS HEINLE** Date of Receipt Mailing Address 4246 MILLIGANS COVE ROAD 2016 09 City Zip Code State Transaction ID: SA11AI.5321 PΑ MANNS CHOICE 15550 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 2000.00 Name of Employer Occupation NET JETS AVIATION, INC **PILOT** Memo Item Receipt For: 2016 Check Cont Election Cycle-to-Date | Y Primary General Other (specify) 2000.00 6500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 9 OF 30 (check only one) 11a 11b 11c 12 13a 13b

Use separate schedule(s) for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee Full Name (Last, First, Middle Initial) Lois Kaneshiki Date of Receipt Mailing Address 1076 Edgewood Drive 2016 01 City State Zip Code Transaction ID: SA11AI.5339 PΑ 16635 Duncansville FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation NA Memo Item Check Receipt For: 2016 Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Lois Kaneshiki Date of Receipt Mailing Address 1076 Edgewood Drive 24 2016 Citv State Zip Code Transaction ID: SA11AI.5383 Duncansville PΑ 16635 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 60.00 Name of Employer Occupation NA Memo Item NA check Receipt For: 2016 Election Cycle-to-Date | Primary General 310.00 Other (specify) Full Name (Last, First, Middle Initial) ANDREW KATZ Date of Receipt Mailing Address PO BOX 66 2016 24 City State Zip Code Transaction ID: SA11AI.5385 **DUNCANSVILLE** PΑ 16635 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation SELF-EMPLOYED FINANCIAL ADVISOR Memo Item Receipt For: 2016 Check Election Cycle-to-Date | Primary General Other (specify) 350.00 410.00 SUBTOTAL of Receipts This Page (optional).....

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 10 OF 30 (check only one) 11a 11b 11c 12 13a 13b

Use separate schedule(s) for each category of the ITEMIZED RECEIPTS Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee Full Name (Last, First, Middle Initial) Donald C Krom Date of Receipt Mailing Address 3704 Milligans Cove Road 2016 13 City State Zip Code Transaction ID: SA11AI.5260 PΑ 15550 Manns Choice FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation Retired Memo Item CC Cont Receipt For: 2016 Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) **GARRY LEACH** Date of Receipt Mailing Address 532 PFEIFFER ROAD 17 2016 Citv State Zip Code Transaction ID: SA11AI.5362 MARION CENTER PΑ 15759 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation N/A N/A Memo Item Check - Billboard Receipt For: 2016 Election Cycle-to-Date | Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) GARRY LEACH Date of Receipt Mailing Address 532 PFEIFFER ROAD 2016 15 City State Zip Code Transaction ID: SA11AI.5372 MARION CENTER PΑ 15759 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 140.00 Name of Employer Occupation N/A N/A Memo Item Receipt For: 2016 Check Election Cycle-to-Date Primary General Other (specify) 640.00 890.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: PAGE 11 OF 30 Use separate schedule(s) (check only one) 11a 11b 11d 11c 12

for each category of the ITEMIZED RECEIPTS Detailed Summary Page 13a 13b Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee Full Name (Last, First, Middle Initial) **RAY PORTER** Date of Receipt Mailing Address 32 NORTH PIN OAK 2016 17 City State Zip Code Transaction ID: SA11AI.5262 PΑ 17007 **BOILING SPRINGS** FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 100.00 Name of Employer Occupation SELF EMPLOYED **INVESTOR** Memo Item Credit Card Cont Receipt For: 2016 Election Cycle-to-Date Primary General 700.00 Other (specify) Full Name (Last, First, Middle Initial) **RAY PORTER** Date of Receipt Mailing Address 32 NORTH PIN OAK 17 2016 Citv State Zip Code Transaction ID: SA11AI.5277 **BOILING SPRINGS** PΑ 17007 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation **INVESTOR** SELF EMPLOYED Memo Item Anedot Receipt For: 2016 Election Cycle-to-Date | Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) RAY PORTER Date of Receipt Mailing Address 32 NORTH PIN OAK 2016 17 City State Zip Code Transaction ID: SA11AI.5307 PΑ **BOILING SPRINGS** 17007 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation SELF EMPLOYED **INVESTOR** Memo Item Receipt For: 2016 Anedot Election Cycle-to-Date | Primary General Other (specify) 900.00 300.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 12 OF 30 (check only one) 11a 11b 11c 12 13a 13b

Use separate schedule(s) for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee Full Name (Last, First, Middle Initial) Joseph Rooney Date of Receipt Mailing Address 740 Maple Avenue 2016 31 City State Zip Code Transaction ID: SA11AI.5271 PΑ 19038 Glenside FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 250.00 Name of Employer Occupation **Delta Airlines** Pilot Memo Item Anedot cont Receipt For: 2016 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Mike Shaffer Date of Receipt Mailing Address Not Available 17 2016 City State Zip Code Transaction ID: SA11AI.5355 Bedford PΑ 15522 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation NA Memo Item NA Cash Receipt For: 2016 Election Cycle-to-Date | Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Roy Sherer Date of Receipt Mailing Address 479 Hammersmith Drive 2016 01 City State Zip Code Transaction ID: SA11AI.5273 PΑ Indiana 15701 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation NA Retired Memo Item Receipt For: 2016 Anedot cont Election Cycle-to-Date Primary General Other (specify) 250.00 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 13 OF 30 Use separate schedule(s) (check only one) 11a 11b 11c 12 13a 13b

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee Full Name (Last, First, Middle Initial) ANNE STEWART Date of Receipt Mailing Address 88 SUNSET DRIVE 2016 01 City State Zip Code Transaction ID: SA11AI.5367 PΑ 17013 **CARLISLE** FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 200.00 Name of Employer Occupation N/A N/A Memo Item Check Receipt For: 2016 Election Cycle-to-Date Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) Michael R Taylor Date of Receipt Mailing Address 712 South Juliana St 15 2016 City State Zip Code Transaction ID: SA11AI.5378 Bedford PΑ 15522 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 500.00 Name of Employer Occupation NA Memo Item NA Check Receipt For: 2016 Election Cycle-to-Date | Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) Stephanie Wertz Date of Receipt Mailing Address 318 Bedford Street 2016 21 City State Zip Code Transaction ID: SA11AI.5324 PΑ Hollidaysburg 16648 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 400.00 Name of Employer Occupation NA NA Memo Item Receipt For: 2016 200 Check & 200 cash Election Cycle-to-Date Primary General Other (specify) 400.00 1100.00 SUBTOTAL of Receipts This Page (optional).....

SCHEDULE A (FEC Form 3)

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for each category of the ITEMIZED RECEIPTS Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee Full Name (Last, First, Middle Initial) MICHAEL WEST Date of Receipt Mailing Address 47 JASON LANE 2016 04 City State Zip Code Transaction ID: SA11AI.5290 VA 22554 **STAFORD** FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation Memo Item N/A N/A Anedot Receipt For: 2016 Election Cycle-to-Date Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional)..... 18300.00 TOTAL This Period (last page this line number only).....

	FOR LINE NUMBER: PAGE 15 OF 30	
Use separate schedule(s)	(check only one)	
for each category of the	11a 11b 11c 11d	
Detailed Summary Page	12 X 13a 13b 14 15	
, , , , , , , , , , , , , , , , , , , ,	person for the purpose of soliciting contributions e to solicit contributions from such committee.	

	d Statements may not be sold or used by any per the name and address of any political committee				
NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson C	ommittee				
Full Name (Last, First, Middle Initial) Arthur Halvorson Mailing Address 462 Indian Springs	Arthur Halvorson				
Mailing Address 462 Indian Springs		03 21 2016			
City					
Manns Choice FEC ID number of contributing federal political committee.	C 13330	Amount of Each Receipt this Period			
Name of Employer Retired	Occupation Retired	110000.00 Memo Item Loan from Arthur Halvorson for Campaign expen			
Receipt For: 2016 Primary General Other (specify)	Election Cycle-to-Date 110000.00	Local Hollin Author Flat Volson for Gampaigh expens			
Full Name (Last, First, Middle Initial) 8. Mailing Address					
City	State Zip Code	M M			
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period			
Name of Employer	Occupation	☐ Memo Item			
Receipt For: Primary General Other (specify)	Election Cycle-to-Date				
Full Name (Last, First, Middle Initial)		Date of Receipt			
Mailing Address		M M / D D / Y Y Y Y			
City	State Zip Code				
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period			
Name of Employer	Occupation	Memo Item			
Receipt For: Primary General Other (specify)	Election Cycle-to-Date				
SUBTOTAL of Receipts This Page (optional)	1	110000.00			
TOTAL This Period (last page this line number		110000.00			

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS Any information copied from such Reports and Statements in	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 OF 30 (check only one) X 17
or for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee	address of any political commit	
Full Name (Last, First, Middle Initial) COM ANEDOT Mailing Address 3RD STREET, SUITE 2B City State BATON ROUGE LA Purpose of Disbursement Transfer of fundraising fees Candidate Name Taxpayers for Art Halvorson Committee Office Sought: House Senate President State: PA District: 09 Full Name (Last, First, Middle Initial)	or: 2016	Date of Disbursement M
B. STEPHAN BUCKINGHAM Mailing Address 4260 MILLIGANS COVE ROAD City State MANNS CHOICE PA Purpose of Disbursement Contract services Candidate Name Taxpayers for Art Halvorson Committee Office Sought: House Disbursement For Senate	pr: 2016	Date of Disbursement M M O1
Full Name (Last, First, Middle Initial) C. STEPHAN BUCKINGHAM Mailing Address 4260 MILLIGANS COVE ROAD City State Z MANNS CHOICE PA Purpose of Disbursement Office Supplies Candidate Name Taxpayers for Art Halvorson Committee Senate Disbursement For Senate Primary	pr: 2016	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

IIIIage# 201004109012300231			
SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schofor each category Detailed Summary	edule(s) (d	OR LINE NUMBER: PAGE 17 OF 30 check only one) X 17
Any information copied from such Reports and Statements mor for commercial purposes, other than using the name and a NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee			
Full Name (Last, First, Middle Initial) A. STEPHAN BUCKINGHAM Mailing Address 4260 MILLIGANS COVE ROAD			Date of Disbursement O2
City State MANNS CHOICE PA Purpose of Disbursement Contract services Candidate Name Taxpayers for Art Halvorson Committee Office Sought: House Senate President State: PA District: 09	General	001 Category/ Type	Amount of Each Disbursement this Period 2170.00 Memo Item Transaction ID : SB17.5218
Full Name (Last, First, Middle Initial) STEPHAN BUCKINGHAM Mailing Address 4260 MILLIGANS COVE ROAD			Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement
City State MANNS CHOICE PA Purpose of Disbursement Office Supplies Candidate Name Taxpayers for Art Halvorson Committee Office Sought: House Senate President State: PA District: 09	C: 2016 General	006 Category/ Type	Amount of Each Disbursement this Period 183.04 Memo Item Transaction ID : SB17.5219
Full Name (Last, First, Middle Initial) STEPHAN BUCKINGHAM Mailing Address 4260 MILLIGANS COVE ROAD			Date of Disbursement M M / D D / Y Y Y Y Y Y O O O O O O O O O O O O O
•	C 2016 General	001 Category/ Type	Amount of Each Disbursement this Period 22.00 Memo Item Transaction ID : SB17.5220

09

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2375.04

SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schr for each category Detailed Summary	of the	FOR LINE NUMBER: PAGE 18 OF 30 (check only one) X 17		
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an					
NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committe	е				
Full Name (Last, First, Middle Initial) A. STEPHAN BUCKINGHAM					
Mailing Address 4260 MILLIGANS COVE ROAD			02 08 2016		
City State MANNS CHOICE PA	Zip Code 15550		Amount of Each Disbursement this Period		
Purpose of Disbursement Mileage Reimbursement		002	509.76 Memo Item		
Candidate Name Taxpayers for Art Halvorson Committe Office Sought: House Disbursement F		Category/ Type	Transaction ID : SB17.5222		
Senate Prima					
Full Name (Last, First, Middle Initial) STEPHAN BUCKINGHAM Mailing Address 4260 MILLIGANS COVE ROAD			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City State MANNS CHOICE PA	Zip Code 15550		Amount of Each Disbursement this Period		
Purpose of Disbursement Contract Employee	13330	001	3058.99		
Candidate Name Taxpayers for Art Halvorson Committee	е	Category/ Type	Memo Item Transaction ID : SB17.5201		
State: PA District: 09 Full Name (Last, First, Middle Initial)			+		
Capitol Promotions			Date of Disbursement		
Mailing Address PO Box 231			02		
City State Glenside PA	Zip Code 19038		Amount of Each Disbursement this Period		
Purpose of Disbursement Signs, etc		006	9758.36 Memo Item		
	or: 2016	Category/ Type	Transaction ID : SB17.5228		
State: PA District: 09					

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

13327.11

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 19 OF 30 (check only one) X 17 18 19a 19b
	ny information copied from such Reports and Statements n for commercial purposes, other than using the name and	nay not be sold or u	used by any	
\rangle	NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee			
۹.	Full Name (Last, First, Middle Initial) Exact Data Mailing Address 1215 Polaris Parkway, Ste 201	Date of Disbursement 02 17 2016		
	City State Columbuus OH Purpose of Disbursement Lists and Polling Data Candidate Name Taxpayers for Art Halvorson Committee Office Sought: House Senate President State: PA District: 09 State: PA District: 09	General	005 Category/ Type	Amount of Each Disbursement this Period 994.38 Memo Item Transaction ID: SB17.5230
3.	Full Name (Last, First, Middle Initial) Forever Media Mailing Address Not Available			Date of Disbursement O3 30 7 2016
	City State Johnston PA Purpose of Disbursement Radio Spots Candidate Name Taxpayers for Art Halvorson Committee Office Sought: House Senate Disbursement For Senate	r: 2016 General	004 Category/ Type	Amount of Each Disbursement this Period 385.00 Memo Item Transaction ID: SB17.5253
_	-	ip Code		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y 2016 Amount of Each Disbursement this Period
	Altoona Purpose of Disbursement Vidography Candidate Name Taxpayers for Art Halvorson Committee Office Sought: House Senate President State: PA District: 09	r: 2016 General	004 Category/ Type	Z50.00 Memo Item Transaction ID : SB17.5240
				4000.00

SUBTOTAL of Disbursements This Page (optional).....

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 OF 30 (check only one) X 17
	ny information copied from such Reports and Statements me for commercial purposes, other than using the name and		person for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee	,	
۸.	Full Name (Last, First, Middle Initial) Gravis Marketing Mailing Address 910 Belle Avenue #1180 City State Winter Springs FL Purpose of Disbursement Solicitation materials Candidate Name Taxpayers for Art Halvorson Committee Office Sought: House Disbursement For Senate President Other (s	General	Date of Disbursement O2
3.	Full Name (Last, First, Middle Initial) DAVID HASS Mailing Address 409 26TH STREET		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State ALTOONA PA Purpose of Disbursement Contract services Candidate Name Taxpayers for Art Halvorson Committee Office Sought: House Senate President State: PA District: 09	r: 2016 General	Amount of Each Disbursement this Period 1600.00 Memo Item Transaction ID : SB17.5207
Э.	Full Name (Last, First, Middle Initial) DAVID HASS Mailing Address 409 26TH STREET		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		r: 2016 General	Amount of Each Disbursement this Period 3200.00 Memo Item Transaction ID : SB17.5239
S	SUBTOTAL of Disbursements This Page (optional)		7800.00

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	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sche for each category Detailed Summary	of the	FOR LINE NUMBER: PAGE 21 OF 30 (check only one) X 17
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and			
\rangle	NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee			
۱.	Full Name (Last, First, Middle Initial) DAVID HASS Mailing Addrsos, 400 26TH STREET			Date of Disbursement 03 08 08 08
	City State ALTOONA PA Purpose of Disbursement Contract Services Candidate Name Taxpayers for Art Halvorson Committee Office Sought: House Senate President President State: PA District: 09	General	001 Category/ Type	Amount of Each Disbursement this Period 400.00 Memo Item Transaction ID : SB17.5203
3.	Full Name (Last, First, Middle Initial) Kessler Creative Mailing Address 12276 San Jose Blvd, Ste 115			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Jacksonville FL Purpose of Disbursement Media spots Candidate Name Taxpayers for Art Halvorson Committee	Zip Code 32223	004 Category/	Amount of Each Disbursement this Period 12500.00 Memo Item
	Office Sought: House Disbursement For	General	Type	Transaction ID : SB17.5255
).	Full Name (Last, First, Middle Initial) Labels & Lists Mailing Address 615 Smithson Avenue			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	-	p Code 6511	003 Category/ Type	Amount of Each Disbursement this Period 1808.31 Memo Item Transaction ID: SB17.5226
	Senate PA District: 09	General		
				4.4700.04

SUBTOTAL of Disbursements This Page (optional).....

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 OF 30 (check only one) X 17
	ny information copied from such Reports and Statements me for commercial purposes, other than using the name and a		y person for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee		
Α.	Full Name (Last, First, Middle Initial) Lamar Advertising Mailing Address PO Box 96030 City State Baton Rouge LA Purpose of Disbursement Billboards Candidate Name Taxpayers for Art Halvorson Committee Office Sought: House Senate Primary President President State: PA District: 09	General	Date of Disbursement M M M / 23 / 2016 Amount of Each Disbursement this Period 2150.00 Memo Item y/ Transaction ID: SB17.5245
3.	Full Name (Last, First, Middle Initial) RICHARD LATKER Mailing Address 703 ALLEGHENY STREET		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State HOLLIDAYSBURG PA Purpose of Disbursement Contract services Candidate Name Taxpayers for Art Halvorson Committee Office Sought: House Senate Primary President President State: PA District: 09	C 2016 General	Amount of Each Disbursement this Period 1200.00 Memo Item Transaction ID : SB17.5250
Э.	Full Name (Last, First, Middle Initial) Mind Motion Films Mailing Address 824 First Street		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Z Y Z Y Z Z Z Z
		General	Amount of Each Disbursement this Period 5000.00 Memo Item Transaction ID: SB17.5247
S	SUBTOTAL of Disbursements This Page (optional)		8350.00

S

SC	CHEDULE B (FEC Form 3)	Use separate sch	nedule(s)	FOR LINE NUMBER: PAGE 23 OF 30 (check only one)			
IT	EMIZED DISBURSEMENTS	for each category	of the	X 17 18 19a 19b			
		Detailed Summar	y Page	20a 20b 20c 21			
	ny information copied from such Reports and Statements m for commercial purposes, other than using the name and a						
	NAME OF COMMITTEE (In Full)						
	Taxpayers for Art Halvorson Committee						
	Full Name (Last, First, Middle Initial)						
A.	P/S Printing	Date of Disbursement					
	Mailing Address 133 Mann Street	03 21 2016					
	City State	Zip Code		Amount of Fook Dishursoment this Device			
Bedford PA 1552				Amount of Each Disbursement this Period			
	Purpose of Disbursement			960.73			
	Printing		003	Memo Item			
	Candidate Name		Category/				
	Taxpayers for Art Halvorson Committee	2046	Туре	Transaction ID : SB17.5243			
	Office Sought: House Disbursement For Senate Disbursement For	: 2016 General					
	President Other (s						
	State: PA District: 09	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	Full Name (Last, First, Middle Initial)						
В.	Penneco Outdoor			Date of Disbursement			
		M M / D D / Y Y Y					
	Mailing Address 6608 Route 22	02 08 2016					
	City State	Zip Code		Amount of Each Disbursement this Period			
	Delmont PA Purpose of Disbursement	15626		1300.00			
	Billboard expense		003	1300.00			
	Candidate Name			Memo Item			
Taxpayers for Art Halvorson Committee			Category/ Type	Transaction ID : SB17.5217			
	Office Sought:	: 2016					
	Senate Primary	General					
	President Other (s	pecify)					
_	State: PA District: 09						
	Full Name (Last, First, Middle Initial)			Data of Dishurasment			
C.	Penneco Outdoor	Date of Disbursement					
	Mailing Address 6608 Route 22			03 21 2016			
	6608 Route 22			03 21 2016			
	City State Zi	Amount of Each Disbursement this Period					
		PA 15626					
	Purpose of Disbursement Billboard			650.00			
	Candidate Name			Memo Item			
	Taxpayers for Art Halvorson Committee Category/ Type						
	Office Sought: House Disbursement For: 2016			Transaction ID : SB17.5242			
	Senate Primary	General					
	President Other (s	specify)					
	State: PA District: 09						
1							

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

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ITEMIZED DISBURSEMENTS

PAGE 24 30 FOR LINE NUMBER: SCHEDULE B (FEC Form 3) Use separate schedule(s) (check only one) for each category of the X 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee Full Name (Last, First, Middle Initial) Date of Disbursement Joseph Sterns 2016 Mailing Address 203 Chestnut Ridge Drive 04 City State Zip Code Amount of Each Disbursement this Period PΑ Orwigsburg 17962 Purpose of Disbursement Spendy & Amazon Fees 250.00 001 Memo Item Candidate Name Category/ Taxpayers for Art Halvorson Committee Type Transaction ID: SB17.5206 Disbursement For: 2016 Office Sought: House Senate Primary General Other (specify) President PA State: District: Full Name (Last, First, Middle Initial) Joseph Sterns Date of Disbursement Mailing Address 203 Chestnut Ridge Drive 01 09 2016 City State Zip Code Amount of Each Disbursement this Period PΑ 17962 Orwigsburg Purpose of Disbursement Mileage reimbursement 182.52 002 Memo Item Candidate Name Category/ Taxpayers for Art Halvorson Committee Type Transaction ID: SB17.5210 Disbursement For: House Office Sought: 2016 Senate Primary General Other (specify) President State: PΑ District: Full Name (Last, First, Middle Initial) Date of Disbursement c. Joseph Sterns Mailing Address 203 Chestnut Ridge Drive 01 09 2016 City State Zip Code Amount of Each Disbursement this Period Orwigsburg PA 17962 Purpose of Disbursement 20.70 Travel expenses 002 Memo Item Candidate Name Category/ Taxpayers for Art Halvorson Committee Type Transaction ID: SB17.5211 Disbursement For: 2016 Office Sought: House General Senate Primary President Other (specify) State: PA District: 09

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

453.22

			FOR LINE NUMBER: PAGE 25 OF 30 (check only one)				
SCHEDULE B (FEC Form 3)	Use separate schedule						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Pag	he \	X 17 18 19a 19b 20a 20b 20c 21				
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and			rson for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full)							
Taxpayers for Art Halvorson Committee	9						
Full Name (Last, First, Middle Initial)		Date of Disbursement					
A. Joseph Sterns			M M / D D / Y Y Y Y				
Mailing Address 203 Chestnut Ridge Drive		02 01 2016					
City State		Amount of Each Disbursement this Period					
Orwigsburg PA	17962		3000.00				
Purpose of Disbursement Contract Services	Purpose of Disbursement Contract Services 001						
Candidate Name Taxpayers for Art Halvorson Committee	ategory/	Memo Item					
Office Sought:		Туре	Transaction ID : SB17.5214				
Senate Prima	•						
	(specify)						
State: PA District: 09 Full Name (Last, First, Middle Initial)			<u> </u>				
B. Joseph Sterns			Date of Disbursement				
Mailing Address 203 Chestnut Ridge Drive			02 17 7 7 7 7 7				
City State	Zip Code		Amount of Each Disbursement this Period				
Purpose of Disbursement Gravis Marketing Reimbursement	Orwigsburg PA 17962 Purpose of Disbursement						
Gravis Marketing Reimbursement	Gravis Marketing Reimbursement						
Candidate Name Taxpayers for Art Halvorson Committe		Category/	Memo Item Transaction ID : SB17.5232				
Office Sought:							
Senate Seaght. Senate	20.0						
President Other	(specify)						
State: PA District: 09							
Full Name (Last, First, Middle Initial)							
Joseph Sterns			Date of Disbursement				
Mailing Address 203 Chestnut Ridge Drive			02				
	City State Zip Code						
Orwigsburg PA	0 0						
Purpose of Disbursement Contract services	Contract services 001						
Candidate Name Category/			Memo Item				
Taxpayers for Art Halvorson Committee			Transaction ID : SB17.5237				
State: PA District: 09							
SUBTOTAL of Disbursements This Page (optional)		<u></u>	6100.00				
· · · · · · · · · · · · · · · · · · ·							

SCHEDULE B (FEC Form 3)		FOR LINE NUMBER: PAGE 26 OF 30		
TEMIZED DISBURSEMENTS	Use separate scheduled for each category of the Detailed Summary Page	(s) (check only one) e e X 17 18 19a 19a		
Any information copied from such Reports and Statements or for commercial purposes, other than using the name an				
NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committe	e			
Full Name (Last, First, Middle Initial) A. Joseph Sterns	Date of Disbursement			
Mailing Address 203 Chestnut Ridge Drive	02 25 2016			
City State Orwigsburg PA	Amount of Each Disbursement this Period			
Purpose of Disbursement Reimbursement for Gravis Media	Purpose of Disbursement			
Candidate Name Taxpayers for Art Halvorson Committe Office Sought: House Disbursement F	e e	tegory/ Type Transaction ID : SB17.5238		
Senate Prima				
Full Name (Last, First, Middle Initial) B. Joseph Sterns	Date of Disbursement			
Mailing Address 203 Chestnut Ridge Drive		03		
City State Orwigsburg PA	Zip Code 17962	Amount of Each Disbursement this Period		
Purpose of Disbursement Reimbursement	003 Z59.00 Memo Item			
Candidate Name Taxpayers for Art Halvorson Committee	tegory/ Transaction ID : SB17.5202			
Office Sought: House Disbursement F				
Full Name (Last, First, Middle Initial)		Date of Disbursement		
Mailing Address 203 Chestnut Ridge Drive	03 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City State Orwigsburg PA	Amount of Each Disbursement this Period			
Purpose of Disbursement Reimbursement - media		003 Memo Item		
Candidate Name Taxpayers for Art Halvorson Committee	tegory/ Type Transaction ID : SB17.5249			
Office Sought: House Disbursement F				
SUBTOTAL of Disbursements This Page (optional)		1381.42		

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: PAGE 27 OF 30 (check only one) X 17	
	y information copied from such Reports and Statements may for commercial purposes, other than using the name and			person for the purpose of soliciting contributions	
	NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee				
۹.	Full Name (Last, First, Middle Initial) Universal Media Mailing Address 4999 Louise Drive	Date of Disbursement O3 29 2016			
	City State Mechanicsburg PA Purpose of Disbursement Television and radio spots	Amount of Each Disbursement this Period 80000.00			
	Candidate Name Taxpayers for Art Halvorson Committee Office Sought: House Senate President State: PA District: Disbursement For Primary Other (s	General	Category/ Type	Memo Item Transaction ID : SB17.5251	
3.	Full Name (Last, First, Middle Initial) Vici Media Group Mailing Address Not Available	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y			
	City State Zip Code Austin TX 70808 Purpose of Disbursement Phone brigade Candidate Name Taxpayers for Art Halvorson Committee			Amount of Each Disbursement this Period 1200.00 Memo Item Transaction ID: SB17.5233	
	Office Sought: Year	General			
Э.	Full Name (Last, First, Middle Initial) Mailing Address			Date of Disbursement	
	City State Zip Code Purpose of Disbursement Candidate Name Ca			Amount of Each Disbursement this Period Memo Item	
	Office Sought: House Disbursement For Senate Primary President Other (s	General	Type		
_				81200.00	

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

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SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

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X	13a
	13b

30

Detailed Summary Page Transaction ID: SC/10.4390 NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee LOAN SOURCE Full Name (Last, First, Middle Initial) 'PERSONAL FUNDS] Election: 2014 Memo Item Primary Arthur Halvorson General Mailing Address Other (specify) PO BOX 11 City State ZIP Code PΑ 15522 **BEDFORD** Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 100000.00 0.00 100000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 0.00 ^M06^M 2013 05/30/2014 % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 100000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

X 13a I

PAGE 29

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OF

ANS			Detailed Summary	Page	oricon only one,	13b
AME OF COMMITTEE (In Full)	0		Tran	saction ID :	SC/10.4855	· '
axpayers for Art Halvors						
LOAN SOURCE Full Name (La Arthur L. Halvorson	st, First, Middle Init	ial) 'PERSONAL FUI	NDS] Memo Item	Electio Pri	2011	
Mailing Address P.O. Box 11					ther (specify)	
City	State	ZIP Code	9			
Bedford	PA	15522				
Original Amount of Loan	Cumu 000.00	llative Payment To D	0.00 E	Salance Out	standing at Close	of This Perio
TERMS		, ,		7		
Date Incurred	14 Y	Date Due	Interest F 0/2014	0.00	% (apr)	ured: Yes No
List All Endorsers or Guaranto						
1. Full Name (Last, First, Midd	le Initial)		Name of Employer			
Mailing Address			Occupation			
City	State ZIP	Code	Amount Guaranteed Outstanding:		.,	
2. Full Name (Last, First, Middle	e Initial)		Name of Employer			
Mailing Address			Occupation			
City	State ZIP	Code	Amount Guaranteed Outstanding:	7	.,	
3. Full Name (Last, First, Middle	e Initial)		Name of Employer			
Mailing Address			Occupation			
City	State ZIP	Code	Amount Guaranteed Outstanding:	. ,		
4. Full Name (Last, First, Middle	e Initial)		Name of Employer			
Mailing Address			Occupation			
City	State ZIP	Code	Amount Guaranteed Outstanding:	· · · ·	7	
JBTOTALS This Period This Pag	e (optional)				7!	5000.00
OTALS This Period (last page in	this line only)				7	
arry outstanding balance only to	LINE 3. Schedule I	D. for this line. If no	Schedule D. carry f	orward to a	appropriate line o	f Summary

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

X 13a I

PAGE 30

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OF

	Detailed Surfimary Page 13b
AME OF COMMITTEE (In Full)	Transaction ID : SC/10.5198
axpayers for Art Halvorson Committee	
LOAN SOURCE Full Name (Last, First, Middle Initial) Arthur Halvorson	PERSONAL FUNDS] Memo Item Election: 2016 Primary General
Mailing Address 462 Indian Springs	Other (specify) ▼
City State	ZIP Code
Manns Choice PA	15550
Original Amount of Loan Cumulati	ive Payment To Date Balance Outstanding at Close of This Period 0.00 110000.00
TERMS	
Date Incurred M 03 M / D21 D / Y 2016 M M M / D21 D / Y 2016	Date Due Interest Rate Secured: 1
List All Endorsers or Guarantors (if any) to Loan So	
1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Cod	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Cod	de Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Cod	Amount de Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Cod	de Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	
TOTALS This Period (last page in this line only)	285000.00
Carry outstanding balance only to LINE 3. Schedule D. f	or this line. If no Schedule D, carry forward to appropriate line of Summary.