PAGE 1 / 20

FEC FORM 3

FE5AN018

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Authorize	d Committee	Office	e Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
Taxpayers for Art Ha	alvorson Committee			
ADDRESS (number and street)	P.O. Box 11			
Check if different than previously reported. (ACC)	Bedford		PA 15522	2
2. <b>FEC IDENTIFICATION</b>	NUMBER ▼C	ITY A	STATE A	ZIP CODE
C C00545681	3. IS T	THIS NEW (N) OR	× AMENDED (A)	STATE ▼ DISTRICT  PA 09
4. TYPE OF REPORT  (a) Quarterly Reports:  April 15 Quarter  X July 15 Quarter	rly Report (Q1)	Primary (12P)  Convention (12C)	: General (12G) Special (12S)	Runoff (12R)
		otion on	/ Y = Y = Y	in the State of
January 31 Yea	r-End Report (YE) (c) 30-E	Day POST-Election Report for the	ne:	
		General (30G)	Runoff (30R)	Special (30S)
Termination Rep		ction on	/ Y Y Y Y Y	in the State of
5. Covering Period	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		M / D D / Y S	y y y 2014
I certify that I have examined Type or Print Name of Treas		of my knowledge and belief it is	true, correct and com	nplete.
	Catherine F. Jacobs	[Electronically Filed]	Date 07	11 / Y Y Y Y Y Y 2014
NOTE: Submission of false, er	roneous, or incomplete informat	ion may subject the person signin	g this Report to the pe	nalties of 2 U.S.C. §437g.
Office Use Only				EC FORM 3 (Revised 02/2003)

### **SUMMARY PAGE**

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

PAGE 2 / 20

Write or Type Committee Name

### Taxpayers for Art Halvorson Committee

05 06 30 2014 01 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B Election Cycle-to-Date** This Period Net Contributions (other than loans) **Total Contributions** (a) 8281.94 94658.07 (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) 8281.94 94658.07 (subtract Line 6(b) from Line 6(a)) ...... Net Operating Expenditures (a) Total Operating Expenditures 16085.77 262048.36 (from Line 17) ..... (b) Total Offsets to Operating 200.00 225.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 15885.77 261823.36 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 7834.71 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 175000.00 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 / 20 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

## Taxpayers for Art Halvorson Committee

05 01 2014 06 30 2014 Report Covering the Period: From: To:

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
1. C	ONTRIBUTIONS (other than loans) FROM:		
(a)	Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	4014.04	71694.04
	(ii) Unitemized	2235.14	16441.35
	(iii) TOTAL of contributions from individuals	6249.18	88135.39
(b)	,	0.00	0.00
(c)	Other Political Committees (such as PACs)	0.00	2850.00
(d) (e)	TOTAL CONTRIBUTIONS	2032.76	3672.68
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	8281.94	94658.07
	RANSFERS FROM OTHER JTHORIZED COMMITTEES	0.00	0.00
3. LC	DANS:		
(a)	Made or Guaranteed by the Candidate	0.00	175000.00
(b)		0.00	0.00
(c)	TOTAL LOANS (add Lines 13(a) and (b))	0.00	175000.00
	FFSETS TO OPERATING		
	KPENDITURES efunds, Rebates, etc.)	200.00	225.00
	THER RECEIPTS ividends, Interest, etc.)	0.00	0.00
6. <b>T</b> (	OTAL RECEIPTS (add Lines	9 9	9 9
11	(e), 12, 13(c), 14, and 15) arry Total to Line 24, page 4)	8481.94	269883.07

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

sements PAGE 4 / 20

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	16085.77	262048.36
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
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00
	(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)	16085.77	262048.36
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	15438.54
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	8481.94
25.	SUBTOTAL (add Line 23 and Line 24)		23920.48
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	16085.77
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)	IG PERIOD	7834.71

## SCHEDULE A (FEC Form 3)

FOR LINE NUMBER: **PAGE** 5 OF (check only one) 11a 11b 11c 12

20

Use separate schedule(s) 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) **DEBRA BROWNLEE** Date of Receipt Mailing Address 2641 HAZEN RICHARDSVILLE ROAD 2014 06 City State Zip Code Transaction ID: SA11AI.5041 PΑ 15825 **BROOKVILLE** FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation CHECK N/A N/A Receipt For: 2014 Election Cycle-to-Date Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) DAVID CHANDLER Date of Receipt Mailing Address 6872 BRIGHT PLUME 09 2014 Citv State Zip Code Transaction ID: SA11AI.4939 **COLUMBIA** MO 21044 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation **AUDIOLOGIST** CC VA Receipt For: 2014 Election Cycle-to-Date | Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) MARY ANN CLARK Date of Receipt Mailing Address 5 MILLER DRIVE 2014 19 City State Zip Code Transaction ID: SA11AI.4996 PΑ **BLAIRSVILLE** 15717 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 250.00 Name of Employer Occupation N/A N/A CHECK Receipt For: 2014 Election Cycle-to-Date Primary General 250.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

20 FOR LINE NUMBER: **PAGE** 6 OF 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) Fyfe's Inspection Garage Date of Receipt Mailing Address 4930 Milligans Cove Rd 2014 06 City State Zip Code Transaction ID: SA11AI.5035 PΑ 15550 Manns Choice FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 100.00 Name of Employer Occupation CHECK Receipt For: 2014 Election Cycle-to-Date Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) Brian P Holmes Date of Receipt Mailing Address 1497 Castlegreen Dr. 16 2014 Citv State Zip Code Transaction ID: SA11AI.4928 Greencastle PΑ 17225 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 1000.00 Name of Employer Occupation Physician CC Parkway Neuroscience & Spine Receipt For: 2014 Election Cycle-to-Date | Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) JUDITH HUDSPETH Date of Receipt Mailing Address 13508 NORWICK PLACE 2014 19 City State Zip Code Transaction ID: SA11AI.4988 VA **GAINESVILLE** 20155 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 130.00 Name of Employer Occupation OFFICER'S CHRISTIAN FELLOWSHIP AREA DIRECTOR CHECK Receipt For: 2014 Election Cycle-to-Date | Yrimary General Other (specify) 280.00 1230.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3)

20 FOR LINE NUMBER: **PAGE** 7 OF (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) WILLIAM HUDSPETH Date of Receipt Mailing Address 13508 NORWICK PLACE 2014 19 City State Zip Code Transaction ID: SA11AI.4989 VA 20155 **GAINESVILLE** FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 130.00 Name of Employer Occupation CHECK OFFICER'S CHRISTIAN FELLOWSHIP AREA DIRECTOR Receipt For: 2014 Election Cycle-to-Date Primary General 280.00 Other (specify) Full Name (Last, First, Middle Initial) Evelyn H. Kent Date of Receipt Mailing Address 4420 Milligans Cove Rd 19 2014 Citv State Zip Code Transaction ID: SA11AI.5003 Manns Choice PΑ 15550 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 100.00 Name of Employer Occupation NA CHECK NA Receipt For: 2014 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 2014 06 City State Zip Code Transaction ID: SA11AI.5016 MARION CENTER PΑ 15759 FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. 319.04 Name of Employer Occupation N/A N/A CHECK Receipt For: 2014 Election Cycle-to-Date Primary General 319.04 Other (specify) 549.04 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FOR LINE NUMBE	R: PAG	E 8 OF	20
Use separate schedule(s)	(check only one)			
for each category of the Detailed Summary Page	X 11a 11b	11c	11d	
Detailed Summary Page	12 13a	13b	14	15

		Detailed Suffiff	ary rage	12	! 138	a 13b	14	15
Any information copied from such Reports a or for commercial purposes, other than using								
NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson	Committee							
Full Name (Last, First, Middle Initial) MADISON PROJECT INC.								
Mailing Address PO BOX 15179				М	e of Receip	ot 14	2014	
City	State DC	Zip Code 20003				SA11AI.501		
WASHINGTON FEC ID number of contributing			-		ount of Fac	ch Receipt th	nis Pariod	
federal political committee.	C C002	98000			ount of Lac	in Neceipt ti	100.0	00
Name of Employer	Occupation			IND (		OUGH MAD		
Receipt For: 2014  Primary  General	Election Cyc	le-to-Date						
Other (specify)		,	2600.00					
Full Name (Last, First, Middle Initial) MADISON PROJECT INC.	-			Date	e of Receip	ot		
Mailing Address PO BOX 15179					рм / р	19 / Y	2014	′
City WASHINGTON	State DC	Zip Code 20003		Trans	action ID :	SA11AI.501	4	
FEC ID number of contributing federal political committee.	C C002	98000		Amo	ount of Ead	ch Receipt th		
Name of Employer	Occupation			IND	CONT THR	OUGH MADI	35.0 SON PRO	
Receipt For: 2014  Primary  General	Election Cyc	le-to-Date						
Other (specify)		,	2635.00					
Full Name (Last, First, Middle Initial)  JAY MAHAFFEY				Date	e of Receip	ot		
Mailing Address 770 LIVE OAK COURT					D5	04 Y	2014	
City MILLERSVILLE	State MD	Zip Code 21108		Trans	action ID :	: SA11AI.493	3	_
FEC ID number of contributing federal political committee.	С			Amo	ount of Ead	ch Receipt th	nis Period	_
Name of Employer NET JETS	Occupation PILOT						250.0	00
Receipt For: 2014	Election Cyc	le-to-Date		cc				
Primary General Other (specify)		,	255.00					
SUBTOTAL of Receipts This Page (optional	)					,	385.0	0
TOTAL This Period (last page this line num	per only)				,	,		

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

20 FOR LINE NUMBER: **PAGE** 9 OF 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) JOHN OLSON Date of Receipt Mailing Address 9593 ANDERSON ROAD 2014 04 City State Zip Code Transaction ID: SA11AI.4931 PΑ **MERCERSBURG** 17236 FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 150.00 Name of Employer Occupation CC WILLARD AGRI SERVICE CFO Receipt For: 2014 Election Cycle-to-Date | Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) **RAY PORTER** Date of Receipt Mailing Address 32 NORTH PIN OAK 18 2014 Citv State Zip Code Transaction ID: SA11AI.4957 **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** CC SELF EMPLOYED Receipt For: 2014 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 2014 20 City State Zip Code Transaction ID: SA11AI.4958 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** CC Receipt For: 2014 Election Cycle-to-Date | Y Primary General 900.00 Other (specify) 350.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

20 FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) 11a 11b 11c 11d 12

for each category of the Detailed Summary Page 13a 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) RICHARD WHITE Date of Receipt Mailing Address 165 DIEHLFIELD ROAD 2014 06 City State Zip Code Transaction ID: SA11AI.5037 PΑ 15522 **BEDFORD** FEC ID number of contributing Amount of Each Receipt this Period С federal political committee. 500.00 Name of Employer Occupation CHECK N/A N/A Receipt For: 2014 Election Cycle-to-Date Primary General 500.00 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 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 Receipt For: Election Cycle-to-Date Primary General Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... 4014.04 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 OF 20 (check only one)  11a 11b 11c X 11d 12 13a 13b 14 15	
Any information copied from such Reports and or for commercial purposes, other than using the			person for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full)  Taxpayers for Art Halvorson Co	ommittee			
Full Name (Last, First, Middle Initial)  Arthur L. Halvorson  Mailing Address P.O. Box 11			Date of Receipt	
City Bedford	State PA	Zip Code 15522	7	
FEC ID number of contributing federal political committee.	С н4	A09056	Amount of Each Receipt this Period	
Name of Employer Self Employed Receipt For: 2014	Occupation Self Employ		In-kind - ADVERTISING MATERIALS	
Primary General Other (specify)	Election Cy	76299.56		
Full Name (Last, First, Middle Initial) Arthur L. Halvorson	Arthur L. Halvorson			
Mailing Address P.O. Box 11  City	06 30 / 2014			
Bedford	State PA	Zip Code 15522	Transaction ID : SA11D.4975	
FEC ID number of contributing federal political committee.	С нар	A09056	Amount of Each Receipt this Period	
Name of Employer Self Employed	Occupation Self Employ	ed	806.66	
Receipt For: 2014  Primary General  Other (specify)	Election Cy	cle-to-Date 76039.86		
Full Name (Last, First, Middle Initial) Arthur L. Halvorson			Date of Receipt	
Mailing Address P.O. Box 11	Ctata	7in Codo	06 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Bedford	State PA	Zip Code 15522	Transaction ID : SA11D.4976	
FEC ID number of contributing federal political committee.	С н4г	PA09056	Amount of Each Receipt this Period	
Name of Employer Self Employed	Occupation Self Employ		In-kind - ADVERTISING PRINT MEDIA	
Receipt For: 2014  Primary General Other (specify)	Election Cy	cle-to-Date 75233.20		
SUBTOTAL of Receipts This Page (optional)			1299.56	

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

## SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

	FOR LINE NUMBER:	PAGE 12 OF 20			
Use separate schedule(s)	(check only one)				
for each category of the	11a 11b	11c X 11d			
Detailed Summary Page	12 13a	13b 14 15			
y not be sold or used by any person for the purpose of soliciting contributions ddress of any political committee to solicit contributions from such committee.					

Any informa	tion copied from such Reports and S nercial purposes, other than using the	itatements may not be sold or used by any per	son for the purpose of soliciting contributions to solicit contributions from such committee.
	F COMMITTEE (In Full)  Nyers for Art Halvorson Col	mmittee	
A. Arthur	L. Halvorson Address P.O. Box 11	State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Bedford FEC ID r	number of contributing olitical committee.	PA 15522 C H4PA09056	Amount of Each Receipt this Period
Name of Self Emp	Employer	Occupation Self Employed Election Cycle-to-Date 76532.76	233.20 In-kind - ADVERTISING MATERIALS
B. Arthui	e (Last, First, Middle Initial) L. Halvorson Address P.O. Box 11	State Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	number of contributing olitical committee.	PA 15522  C H4PA09056	Amount of Each Receipt this Period
Self Emp Receipt	Employer loyed For: 2014 mary General ner (specify)	Occupation Self Employed Election Cycle-to-Date 77032.76	In-kind - FUEL
Full Nam  C. Mailing A	e (Last, First, Middle Initial)	State Zip Code	Date of Receipt
federal p	number of contributing olitical committee.	Occupation	Amount of Each Receipt this Period
Receipt Pri		Election Cycle-to-Date	
		only)	733.20 2032.76
	( page and mic nambor (	71	

## SCHEDULE E ITEMIZED DI

lm	nage# 14941853621				
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate schedu for each category of Detailed Summary Pa	le(s) (cl	DR LINE NUMBER:         PAGE         13 OF         20           heck only one)         19a         19b           20a         20b         20c         21	
	ny information copied from such Reports and Statements me for commercial purposes, other than using the name and NAME OF COMMITTEE (In Full)  Taxpayers for Art Halvorson Committee				
Α.	Full Name (Last, First, Middle Initial)  COM ANEDOT  Mailing Address 3RD STREET, SUITE 2B	M ANEDOT			
	City State BATON ROUGE LA  Purpose of Disbursement CONTRIBUTION FEES  Candidate Name Taxpayers for Art Halvorson Committee  Office Sought: House Disbursement For		003 Category/ Type	Amount of Each Disbursement this Period  110.88  Transaction ID: SB17.4982	
В.	State: PA District: 09 Full Name (Last, First, Middle Initial)  Arthur L. Halvorson  Mailing Address P.O. Box 11			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  Bedford PA  Purpose of Disbursement In-kind - ADVERTISING PRINT MEDIA  Candidate Name  Office Sought: House Senate Primary President President  State: PA District: 09	r: 2014 General	Category/ Type	Amount of Each Disbursement this Period  233.20  Transaction ID : SB17.4978	
C.	Full Name (Last, First, Middle Initial)  Arthur L. Halvorson  Mailing Address P.O. Box 11			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 Zi	ip Code		Amount of Each Disbursement this Period	

## c. Arthur L. Ha

City Bedford PΑ 15522

Senate

District:

President

09

Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: 2014 House

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

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

Primary General Other (specify)

806.66

Transaction ID: SB17.4979

•		Ξ	Ξ	,	Ξ	Ξ	,	Ξ	115	50.7	4	
	П											
	L		-	7	-	-	,	-	-	_		

State:

PΑ

## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE		PAGE	14	OF	20		
Use separate schedule(s)	(check on	(check only one)						
for each category of the	X	17		18		19a		19b
Detailed Summary Page		20a		20b		20c		21
ay not be sold or used by any person for the purpose of soliciting contributions								

	Detailed Summa	ry Page	20a 20b 20c 21
	ny information copied from such Reports and Statements may not be sold or for commercial purposes, other than using the name and address of any pol		erson for the purpose of soliciting contributions
$\rangle$	NAME OF COMMITTEE (In Full)  Taxpayers for Art Halvorson Committee		
۹.	Full Name (Last, First, Middle Initial)  Arthur L. Halvorson  Mailing Address P.O. Box 11		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 Zip Code  Bedford PA 15522  Purpose of Disbursement In-kind - ADVERTISING MATERIALS		Amount of Each Disbursement this Period  259.70  Transaction ID : SB17.4981
	Candidate Name  Office Sought: House Senate President President President Other (specify)  State: PA District: 09	Category/ Type	
3.	Full Name (Last, First, Middle Initial) Arthur L. Halvorson  Mailing Address P.O. Box 11		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 Zip Code  Bedford PA 15522  Purpose of Disbursement In-kind - ADVERTISING MATERIALS  Candidate Name  Office Sought: House Senate President President President Other (specify)  State: PA District: 09	Category/ Type	Amount of Each Disbursement this Period  233.20  Transaction ID : SB17.5028
Э.	Full Name (Last, First, Middle Initial)  Arthur L. Halvorson  Mailing Address P.O. Box 11		Date of Disbursement  M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
	City State Zip Code Bedford PA 15522  Purpose of Disbursement In-kind - FUEL  Candidate Name	Category/	Amount of Each Disbursement this Period 500.00  Transaction ID: SB17.5044
	Office Sought:    House   Disbursement For: 2014   Primary   General	Туре	
s	UBTOTAL of Disbursements This Page (optional)		992.90
Т	OTAL This Period (last page this line number only)		

## SCHEDULE B (FEC Form 3)

	FOR LINE NUMBER:				PAGE	15	OF	20
Use separate schedule(s)	(check or	nly one)						
for each category of the Detailed Summary Page	>	17		18		19a		19b
		20a		20b		20c		21
ay not be sold or used by any person for the purpose of soliciting contributions								

**ITEMIZED DISBURSEMENTS** Any information copied from such Reports and Statements ma 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) A. Catherine F. Jacobs Date of Disbursement 2014 Mailing Address P.O. Box 250 06 13 City State Zip Code Amount of Each Disbursement this Period PΑ Manns Choice 15550 Purpose of Disbursement 138.88 PHONE CHARGES 001 Transaction ID: SB17.4971 Candidate Name Category/ Taxpayers for Art Halvorson Committee Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President PA State: District: Full Name (Last, First, Middle Initial) **BRIAN LIVINGSTON** Date of Disbursement Mailing Address 462 INDIAN SPRINGS LANE 05 01 2014 City State Zip Code Amount of Each Disbursement this Period PΑ MANNS CHOICE 15550 Purpose of Disbursement FEE 2400.00 001 Transaction ID: SB17.4961 Candidate Name Category/ Taxpayers for Art Halvorson Committee Type Disbursement For: Office Sought: 2014 House Senate Primary General President Other (specify) PΑ District: Full Name (Last, First, Middle Initial) Date of Disbursement C. BRIAN LIVINGSTON Mailing Address 462 INDIAN SPRINGS LANE 06 04 2014 City State Zip Code Amount of Each Disbursement this Period MANNS CHOICE PA 15550 Purpose of Disbursement FEE 1625.00

Senate President State: PA District: 09	Primary General Other (specify)				
SUBTOTAL of Disbursements This Page		_	4163.88	Ī	
-	mber only)				Ī

Disbursement For: 2014

001

Category/

Type

Candidate Name

Office Sought:

Taxpayers for Art Halvorson Committee

X House

Transaction ID : SB17.4969

## SCHEDULE B (FEC Form 3)

**PAGE** 16 20 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 19b 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 RON ROBERTSON 2014 Mailing Address PO BOX 11 01 City State Zip Code Amount of Each Disbursement this Period PΑ **BEDFORD** 15522 Purpose of Disbursement 1750.00 001 Transaction ID: SB17.4962 Candidate Name Category/ Taxpayers for Art Halvorson Committee Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President PA State: District: Full Name (Last, First, Middle Initial) RON ROBERTSON Date of Disbursement Mailing Address PO BOX 11 05 15 City State Zip Code Amount of Each Disbursement this Period PΑ **BEDFORD** 15522 Purpose of Disbursement FEE 1750.00 001 Transaction ID: SB17.4965 Candidate Name Category/ Taxpayers for Art Halvorson Committee Type Disbursement For: Office Sought: House 2014 Senate Primary General Other (specify) President PΑ District: Full Name (Last, First, Middle Initial) Date of Disbursement C. RON ROBERTSON Mailing Address PO BOX 11 06 04 2014 City State Zip Code Amount of Each Disbursement this Period **BEDFORD** PA 15522 Purpose of Disbursement FEE 700.00 001 Transaction ID : SB17.4970 Candidate Name Category/ Taxpayers for Art Halvorson Committee Type Disbursement For: 2014 Office Sought: House General Senate Primary President Other (specify) State: PA District: 09 4200.00 SUBTOTAL of Disbursements This Page (optional).....

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

## SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

	FOR LINE NUMBER:					PAGE	17	OF	20
Use separate schedule(s)	(check only one)								
for each category of the Detailed Summary Page		$ \mathbf{x} $	17		18		19a		19k
			20a		20b		20c		21
ny not be sold or used by any person for the purpose of soliciting contributions									

		Detailed Summary	/ Page		20a	20b	20c	21
	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							
۹.	Full Name (Last, First, Middle Initial) INC ROCKWOOD STRATEGIES  Mailing Address UNDISCLOSED			Date		irsement 05	2014	Y
	City State	Zip Code		Amou	unt of Ea	ch Disburse	ement this P	eriod
	HARRISBURG PA Purpose of Disbursement FINAL FEE	17177	001	Transa	ction ID	: SB17.496	1250.0	00
	Candidate Name  Taxpayers for Art Halvorson Committee  Office Sought:  House Disbursement For	: 2014	Category/ Type	i i ransa	Ction ID	: 5817.496	3	
	Senate President State: PA District: 09  Primary Other (s							
3.	Full Name (Last, First, Middle Initial) INC ROCKWOOD STRATEGIES				of Disbu	rsement	Y " Y " Y "	Y
	Mailing Address UNDISCLOSED  City State	Zip Code		06	6	04 Diabura	2014 ement this P	loriod
	HARRISBURG PA Purpose of Disbursement FEE	17177	'an'	AITIO	unit on Ea	CIT DISDUIS	834.	-
	Candidate Name Taxpayers for Art Halvorson Committee	001 Category/ Type	Transa	ction ID	: SB17.496	7		
	Office Sought:    X	General						
	Full Name (Last, First, Middle Initial)							
Э.	DAVID SHOW			Date	of Disbu	irsement	Y " Y " Y " ,	v
	Mailing Address PO BOX 11	0.4		05		06	2014	
		p Code 5522		Amou	unt of Ea	ch Disburse	ement this P	
	FEE Candidate Name		001 Category/	Transac	ction ID :	SB17.4964	1	
	Taxpayers for Art Halvorson Committee  Office Sought: House Senate President President  State: PA District: 09	C 2014 General	Type					
s	UBTOTAL of Disbursements This Page (optional)				. ,	,	4084.0	00

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

## SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

	FOR LINE NUMBER:		PAGE	18	OF	20
Use separate schedule(s)	(check only one)					
for each category of the Detailed Summary Page	X 17	18		19a		19b
	20a	20b		20c		21
by not be sold or used by any person for the purpose of soliciting contributions ddress of any political committee to solicit contributions from such committee.						

Any information copied from such Reports and Statements ma or for commercial purposes, other than using the name and ac NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee Full Name (Last, First, Middle Initial) Date of Disbursement DAVID SHOW 2014 Mailing Address PO BOX 11 06 Zip Code City State Amount of Each Disbursement this Period PΑ **BEDFORD** 15522 1333.00 Purpose of Disbursement 001 Transaction ID: SB17.4968 Candidate Name Category/ Taxpayers for Art Halvorson Committee Type Disbursement For: 2014 Office Sought: House Senate Primary General Other (specify) President PΑ State: District: Full Name (Last, First, Middle Initial) Date of Disbursement B. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: Disbursement For: House Senate Primary General President Other (specify) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code Amount of Each Disbursement this Period Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) State: District: 1333.00 SUBTOTAL of Disbursements This Page (optional)..... 15924.52 TOTAL This Period (last page this line number only).....

## SCHEDULE C (FEC Form 3)

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

19

×	13a
	13h

20

OANS		for each category of the Detailed Summary Pag	
IAME OF COMMITTEE (In Fu	•	Transac	etion ID : SC/10.4390
Taxpayers for Art Hal	vorson Committee		
LOAN SOURCE Full Name Arthur Halvorson	ne (Last, First, Middle Initial)	[PERSONAL FUNDS]	Election: 2014  Primary  General
Mailing Address PO BOX 11			Other (specify) ▼
City	State	ZIP Code	
BEDFORD	PA	15522	
Original Amount of Loan	Cumulative Paym		ance Outstanding at Close of This Period
	100000.00	0.00	100000.00
TERMS  Date Incurr  M 06 / 27 / 7	ed Dat	te Due Interest Rate / 05/30/2014 0.00	
List All Endorsers or Gua	arantors (if any) to Loan Source		Yes No
Full Name (Last, First,	* **	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9
2. Full Name (Last, First,	Viiddle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	7
3. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9
4. Full Name (Last, First,	Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9
SUBTOTALS This Period Thi	s Page (optional)	······	100000.00
FOTALS This Period (last pa	ge in this line only)		, , , , , , , , ,
Carry outstanding balance of	nly to LINE 3, Schedule D, for this	line. If no Schedule D, carry forv	vard to appropriate line of Summary.

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

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

20

×	13a
	13h

20

(check only one) Detailed Summary Page Transaction ID: SC/10.4855 NAME OF COMMITTEE (In Full) Taxpayers for Art Halvorson Committee LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Arthur L. Halvorson General Mailing Address Other (specify) ulletP.O. Box 11 City State ZIP Code PΑ 15522 Bedford Balance Outstanding at Close of This Period Original Amount of Loan Cumulative Payment To Date 75000.00 0.00 75000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: <sup>M</sup> 04 09 ž014 0.00 5/30/2014 % (apr) 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)..... 75000.00 TOTALS This Period (last page in this line only) ...... 175000.00 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.