

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

The Keystone Fund

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		<input type="text" value="54054.12"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="19342.17"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="13500.00"/>	<input type="text" value="91000.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="32842.17"/>	<input type="text" value="145054.12"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="10583.89"/>	<input type="text" value="122795.84"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="22258.28"/>	<input type="text" value="22258.28"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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

Write or Type Committee Name

The Keystone Fund

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	10500.00	17000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10500.00	17000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	3000.00	74000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	13500.00	91000.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	13500.00	91000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	13500.00	91000.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	2083.89	61295.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2083.89	61295.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	49500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	1500.00	12000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	10583.89	122795.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10583.89	122795.84

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	13500.00	91000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13500.00	91000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2083.89	61295.84
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2083.89	61295.84

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
The Keystone Fund

A. Hale, Robert, T., , Jr.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 Olmstead Dr
 City Hingham State MA Zip Code 02043-2651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Granite Telecommunications Occupation (for Individual) Founder
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2018
Transaction ID : C4817216
 Amount of Each Receipt this Period
 5000.00
 Memo Item

B. Hale, Karen, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8 Olmstead Dr
 City Hingham State MA Zip Code 02043-2651
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 23 / 2018
Transaction ID : C4817217
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. Means, James, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2451 N. Taylor Street
 City Arlington State VA Zip Code 22207
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Alpine Group, Inc. Occupation (for Individual) Principal
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2018
Transaction ID : C4817218
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	10500.00
TOTAL This Period (last page this line number only).....	10500.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 12
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
The Keystone Fund

A. National Air Traffic Controllers Association PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1325 Massachusetts Avenue, NW

City Washington	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	17	/	2018

Transaction ID : C4816811

Amount of Each Receipt this Period
500.00

Memo Item

B. National Air Traffic Controllers Association PAC
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1325 Massachusetts Avenue, NW

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2018

Transaction ID : C4817215

Amount of Each Receipt this Period
2500.00

Memo Item

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The Keystone Fund

Full Name (Last, First, Middle Initial) A. Perkins Coie, LLP			Date of Disbursement MM / DD / YYYY 07 / 25 / 2018	
Mailing Address 1201 Third Avenue Suite 4800			FEC Identification Number C [] Transaction ID : D283655 Amount of Each Disbursement this Period [] 1085.87	
City Seattle	State WA	Zip Code 98101	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Legal & Compliance Services		Category/ Type []	Memo Item <input type="checkbox"/>	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:			Memo Item <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) B. American Express			Date of Disbursement MM / DD / YYYY 07 / 30 / 2018	
Mailing Address P.O. Box 360001			FEC Identification Number C [] Transaction ID : D283651 Amount of Each Disbursement this Period [] 977.18	
City Ft. Lauderdale	State FL	Zip Code 33336	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Credit Card Payment, See Below		Category/ Type []	Memo Item <input type="checkbox"/>	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: District:			Memo Item <input type="checkbox"/>	

Full Name (Last, First, Middle Initial) C. American Airlines			Date of Disbursement MM / DD / YYYY 07 / 30 / 2018	
Mailing Address 4333 Amon Carter Blvd.			FEC Identification Number C [] Transaction ID : D283652 Amount of Each Disbursement this Period [] 205.04	
City Fort Worth	State TX	Zip Code 76155	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement Travel		Category/ Type []	Memo Item <input checked="" type="checkbox"/>	
Candidate Name			Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>	
State: District:			Memo Item <input checked="" type="checkbox"/>	

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

2063.05

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

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The Keystone Fund

Full Name (Last, First, Middle Initial) A. Jared Coffin House		Date of Disbursement MM / DD / YYYY 07 / 30 / 2018	
Mailing Address 29 Broad Street		FEC Identification Number C []	
City Nantucket	State MA	Zip Code 02554	Transaction ID : D283653
Purpose of Disbursement Travel		Category/ Type []	Amount of Each Disbursement this Period [] 772.14
Candidate Name			<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period []
Purpose of Disbursement		Category/ Type []	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C []	
City	State	Zip Code	Amount of Each Disbursement this Period []
Purpose of Disbursement		Category/ Type []	<input type="checkbox"/> Memo Item
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 0.00
TOTAL This Period (last page this line number only).....▶	[] 2063.05

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The Keystone Fund

A. Theresa Gasper For Congress

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 340428

City: Beavercreek State: OH Zip Code: 45434

Purpose of Disbursement: Contribution

Candidate Name: **Gasper, Theresa, , ,**

Office Sought: House Senate President
State: OH District: 10

Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 30 / 2018

FEC Identification Number

C C00665471

Transaction ID : **D283660**

Amount of Each Disbursement this Period

1000.00

Memo Item

B. O'Connor For Congress

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 10292

City: Columbus State: OH Zip Code: 43201

Purpose of Disbursement: Contribution

Candidate Name: **O'Connor, Daniel, J., ,**

Office Sought: House Senate President
State: OH District: 12

Disbursement For: 2018
 Primary General Other (specify) Special General

Date of Disbursement

MM / DD / YYYY
07 / 25 / 2018

FEC Identification Number

C C00667964

Transaction ID : **D283656**

Amount of Each Disbursement this Period

2000.00

Memo Item

C. Janet Garrett For Congress Committee

Full Name (Last, First, Middle Initial)

Mailing Address 545 East Town St

City: Columbus State: OH Zip Code: 43215

Purpose of Disbursement: Contribution

Candidate Name: **Garrett, Janet, P., ,**

Office Sought: House Senate President
State: OH District: 04

Disbursement For: 2018
 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 30 / 2018

FEC Identification Number

C C00560847

Transaction ID : **D283657**

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The Keystone Fund

Full Name (Last, First, Middle Initial)
A. Jill Schiller For Congress

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	8

Mailing Address PO Box 9752

FEC Identification Number

C C00666743

Transaction ID : D283658

Amount of Each Disbursement this Period

1000.00

Memo Item

City Cincinnati State OH Zip Code 45209

Purpose of Disbursement Contribution

Category/Type

Candidate Name
Schiller, Jill, , ,

Office Sought: House Senate President
State: OH District: 02

Disbursement For: 2018
 Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)
B. Andy Levin For Congress

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	3		2	0	1	8

Mailing Address PO Box 380381

FEC Identification Number

C C00662619

Transaction ID : D283569

Amount of Each Disbursement this Period

1000.00

Memo Item

City Clinton Township State MI Zip Code 48038

Purpose of Disbursement Contribution

Category/Type

Candidate Name
Levin, Andy, , ,

Office Sought: House Senate President
State: MI District: 09

Disbursement For: 2018
 Primary General Other (specify)

Full Name (Last, First, Middle Initial)
C. Susan Moran Palmer For Congress

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	1	8

Mailing Address 30975 Hilliard Blvd

FEC Identification Number

C C00667915

Transaction ID : D283659

Amount of Each Disbursement this Period

1000.00

Memo Item

City Westlake State OH Zip Code 44145

Purpose of Disbursement Contribution

Category/Type

Candidate Name
Palmer, Susan, Moran, ,

Office Sought: House Senate President
State: OH District: 16

Disbursement For: 2018
 Primary General Other (specify) ▼

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

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

3000.00
7000.00

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The Keystone Fund

Full Name (Last, First, Middle Initial)

A. Committee To Elect Sharon Guidi

Mailing Address PO Box 1161

City McMurray State PA Zip Code 15317

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D283570

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Friends Of Rob Rhoderick

Mailing Address PO Box 312

City Elizabeth State PA Zip Code 15037

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D283654

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Byron Timmins

Mailing Address 1019 Mayfair Dr.

City Canonsburg State PA Zip Code 15317

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : D283568

Amount of Each Disbursement this Period

Memo Item

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

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