

LATE CONTRIBUTIONS – 24 HOUR REPORT

Name of Filing Committee or Candidate ARMSTRONG 4 EXECUTIVE	Filer Identification Number
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		DATE RECEIVED		
Full Name of Contributor	NO. PRI. EVENTS	YEAR		
BOILERMAKERS LOCAL NO. 13 PAC FUND	5	5	2017	
Mailing Address	Amount \$ 500.⁰⁰			
City	State	Zip Code (Plus 4)		
NEWPORTVILLE	PA.	19056-3235		
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address	Amount \$			
City	State	Zip Code (Plus 4)		
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address	Amount \$			
City	State	Zip Code (Plus 4)		
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address	Amount \$			
City	State	Zip Code (Plus 4)		
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address	Amount \$			
City	State	Zip Code (Plus 4)		
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address	Amount \$			
City	State	Zip Code (Plus 4)		
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address	Amount \$			
City	State	Zip Code (Plus 4)		
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address	Amount \$			
City	State	Zip Code (Plus 4)		

Name of Person Submitting Report: Dennis J. Shultz TREAS.

Date of Report: 5-8-2017

Contact Phone Number: 610-770-0729

Email Address: chuck34729@msn.com