Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat	ion 800	0661			Repor		CAND	IDATE		СОМ	MITTEE	\checkmark	LOB	BYIST		
Number :			- 1- 1		Filed	-										
Name of Filing	Committee, Candio	date or L	obbyist:		LAWRE	INCE	COUNTY	REPUBL			111166					
Street Address:																
City:	NEW CASTLE						State:	PA			Zip Code: 16105					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIN	DAY 1ARY	POST-	POST- 3.			AMENDMENT REPORT?		N	C	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRI	E- 5. X	30 D ELEC	DAY CTION	POST-	6.		TERMIN REPORT		Yes	N	C	\checkmark
report type)	ANNUAL REPORT	7.	Year 2014				ING METH				PAPER		\checkmark	DISK	ETTE	
Name of Office	L Sought by Candida	ate:					DATE	OF ELE	CTIC	DN	District Number	Office Code	Par	ty Code	Cour	
								DAY	Y	EAR					1	
									4	2014		(SEE INS	STRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAF	2		мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY		
Expenditure	s from:		9 16	5 2	014	ГО	1	0	20	2014						
A. Amount Bro	ought Forward Fro	m Last R	eport			Ş	\$	-	10,	804.94						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	edule I)	9	\$		1,	575.00						
C. Total Funds	Available (Sum O	f Lines A	and B)			9	\$		12,	379.94						
D. Total Expen	ditures (From Sch	nedule II	1)				\$			581.00						
E. Ending Cast	n Balance (Subtra	ct Line D	From Line	C)			\$		11,7	798.94						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)		\$			0.00						
G. Unpaid Deb	ts And Obligation	s (From S	Schedule I\	/)		9	\$			0.00						
				AFF	IDAV	IT SI	ECTION									
PART I - If this i	s a Committee rej	oort, trea	surer sign	here.	If this i	s a Ca	Indidate I	eport, e	candi	date si	gn here.					
I swear (or affirm correct and comp) that this report, ind ete.	cluding the	e attached so	hedule	s filed or	ı pape	r or by elec	tronic m	edium	, are to	the best o	of my knov	vledge	and bel	ief , tr	ue
Sworn to and sub	scribed before me th day of	is	20						:	Signatur	e of Perso	n Submitt	ing Rep	oort		-
	Signati	ure				_					Prir	ited Name				-
My Commission E	-										Ema	il				-
	мо	D	AY	YR				Ar	ea Co	de	Daytin	ne Teleph	one Nu	mber		-
Part II- If this is	a report of a can	didate's	authorized	Com	nittee, (Candi	date shal	l sign h	ere.							
I swear (or affirm No 320) as amend) that to the best of ed.	my knowl	edge and bel	ief this	s politica	l com	nittee has	not viola	ted aı	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subs					s	ignature	of Candida	ite			-					
day of 20											Printe	ed Name				-
	Signature					_					F					_
My Commission Ex	pires										Ema					
	мо	D	AY	YR	ł	_		Area	Code		D	aytime Te	elephor	e Numi	per	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Deta	med Summary Page	3			
Name of Filing Committee or Candidate		Reporting	Period		
LAWRENCE COUNTY REPUBLICAN COMMITTEE		From:	<u>9/16/20</u>	0 <u>14</u> To:	<u>10/20/2014</u>
1. Unitemized Contributions Received - \$ 50.00 or Less	Per Contributor				
	TOTAL for the Reporting	Period	(1)	\$	850.00
2. Contributions Received - \$ 50.01 To \$250.00 (From P	art A and Part B)				
Contributions Received From Political Committees (Pa	nrt A)			\$	0.00
All Other Contributions (Part B)				\$	725.00
	TOTAL for the Reporting	Period	(2)	\$	725.00
3. Contributions Received Over \$250.00 (From Part C ar	nd Part D)				
Contributions Received From Political Committees (Pa	nrt C)			\$	0.00
All Other Contributions (Part D)				\$	0.00
	TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned C	Checks, Etc . (From Part E)				
	TOTAL for the Reporting	Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During thi totals from Boxes 1,2,3 and 4; also enter this amount				\$	1,575.00

PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate				porting	Period			
						То	1	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
								PAGE TOTAL
inter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	0.00

	PART B ALL OTHER CONTRIBUTIONS \$50.01 TO \$250.00 Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part A)								
Nan	ne of Filing Committee or Candida	ate		Rep	orting Pe	eriod			
LAV	VRENCE COUNTY REPUBLICAN C	OMMITTEE		Fror	m:	<u>9/16/2</u>	2 <u>014</u> To	:	<u>10/20/2014</u>
				DATE			AMOUNT		
	ame of Contributor				мо	DAY	YEAR		
	ARD & LAURIE LIST	-					75.00		
Mailing Address Zip Code (Plus 4) City WAMPUM PA 16157						11	2014	\$	75.00
Full N	ame of Contributor								
CAROL & MARK COCHENOUR					мо	DAY	YEAR		
Mailin	g Address	_	_					\$	150.00
City	NEW CASTLE	State	Zip Code (Plus 4)	9	24	2014		
	Full Name of Contributor				мо	DAY	YEAR		
	OR MALVAR & ASSOCIATES								
	g Address	Chata			9	15	2014	\$	100.00
City	NEW CASTLE	State PA	Zip Code (Plus 4)	9	13	2014		
E.J. N	ame of Contributor		10105	-					
	COMMERCIAL CENTER (THE NEW	/ ENGLANDER			мо	DAY	YEAR		
	g Address			- 1				\$	100.00
City	NEW CASTLE	State	Zip Code (Plus 4)	9	15	2014		
		РА	16105						
Full N	ame of Contributor				мо	DAY	YEAR		
TOM (CORBETT FOR GOVERNOR (AD I	N FALL BOOKLET)							
	g Address	1	1					\$	100.00
City	HARRISBURG	State	Zip Code (Plus 4)	9	16	2014		
		РА	171081145	_					
	Full Name of Contributor LINDY PAVING (AD IN FALL BOOKLET) DINNER TICKETS				мо	DAY	YEAR		
Mailin	ailing Address							\$	200.00
City)	9	16	2014		
	PA 15212								
									PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 72								725.00	

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PART C Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting Period					
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							- \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	age, Sectio	n 3.			\$	0.00		

PART D ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of

over \$250.00 in the reporting period.

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

Name of Filing Committee or Candidate				orting Pe	riod			
Fro						Т	То:	
				D	ATE		АМ	IOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	ıs 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE TOTAL 0.00

PART E **OTHER RECEIPTS**

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC. Use this Part to report refunds received, interest earned, returned checks and

prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate			ing Perio	d				
			From:			To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.0	00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·						•		
		_	.					PAGE TOTAL	
Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section							\$	0.00	

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
LAWRENCE COUNTY REPUBLICAN COMMITTEE	From:	<u>9/16/2014</u> то:	<u>10/20/2014</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 3		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Re			Reporting	g Period			
F			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						7 \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	ł		•				
Enter Grand Total of Part F on Section 2.	Schedule II, In-Kir	nd Contributions Detai	led Sum	mary Pag	je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				porting F	Period		
						То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor		•		Occupa	tion		•
Employer Mailing Address/Principal Plac	e of Business C	lity	State	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	Contributions D	etaile	d			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Fili	Name of Filing Committee or Candidate				ng Period				
LAWRENCE	LAWRENCE COUNTY REPUBLICAN COMMITTEE				<u>9/10</u>	<u>5/2014</u>	То:	<u>10/20/2014</u>	
				DATE AMOU					
To Whom Pa	To Whom Paid					YEAR			
ROTHFUS FC	OR CONGRESS								
Mailing Address				10	3	2014	\$	500.00	
City PITTS	SBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		РА	15237	DONAT	ION FOR C	AMPAIGN	I		
To Whom Pai	id			мо	DAY	YEAR			
C & C S	SECURITY								
Mailing Addro	ess			10	3	2014	\$	81.00	
City NEW	CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA 16101					LL DINNE	ĒR		
								PAGE TOTAL	
Enter Grand	d Total of Expenditures o	on Page 1, Report C	over Page, Item I).			\$	581.00	

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