

Campaign Finance Report

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

Filer Identification Number : 8000661		Report Filed By :	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST				
Name of Filing Committee, Candidate or Lobbyist: LAWRENCE COUNTY REPUBLICAN COMMITTEE									
Street Address: 3015 WILMINGTON ROAD									
City: NEW CASTLE			State: PA	Zip Code: 16105					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1. <input checked="" type="checkbox"/>	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2015	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE <input type="checkbox"/>	
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number	Office Code	Party Code	County Code
				MO	DAY	YEAR			
				11	3	2015	(SEE INSTRUCTIONS FOR CODES)		
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY
		1	1	2015	TO	3	30	2015	
A. Amount Brought Forward From Last Report				\$		9,584.51			
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		1,582.00			
C. Total Funds Available (Sum Of Lines A and B)				\$		11,166.51			
D. Total Expenditures (From Schedule III)				\$		3,464.91			
E. Ending Cash Balance (Subtract Line D From Line C)				\$		7,701.60			
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00			
G. Unpaid Debts And Obligations (From Schedule IV)				\$		0.00			

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this _____ day of _____ 20 _____

Signature

My Commission Expires _____

MO DAY YR

Signature of Person Submitting Report

Printed Name

Email

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3,1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this _____ day of _____ 20 _____

Signature

My Commission Expires _____

MO DAY YR

Signature of Candidate

Printed Name

Email

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
LAWRENCE COUNTY REPUBLICAN COMMITTEE	From: <u>1/1/2015</u> To: <u>3/30/2015</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 382.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 100.00
All Other Contributions (Part B)	\$ 100.00
TOTAL for the Reporting Period (2)	\$ 200.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 1,000.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 1,000.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.00

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 1,582.00
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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	Reporting Period
LAWRENCE COUNTY REPUBLICAN COMMITTEE	From: <u>1/1/2015</u> To: <u>3/30/2015</u>
DATE	AMOUNT

Full Name of Contributing Committee	MO	DAY	YEAR	
MIKE KELLY FOR CONGRESS				
Mailing Address P.O. BOX 476				\$ 100.00
City LYNDORA	2	24	2015	
State PA				
Zip Code (Plus 4) 16045				

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

PAGE TOTAL
\$ 100.00

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)**

Name of Filing Committee or Candidate LAWRENCE COUNTY REPUBLICAN COMMITTEE	Reporting Period From: <u>1/1/2015</u> To: <u>3/30/2015</u>
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				DATE	AMOUNT		
Full Name of Contributor SUSAN JACKSON				MO	DAY	YEAR	\$ 100.00
Mailing Address 115 PARK LANE				2	21	2015	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16105					

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

PAGE TOTAL
\$ 100.00

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 LAWRENCE COUNTY REPUBLICAN COMMITTEE	Reporting Period From: <u>1/1/2015</u> To: <u>3/30/2015</u>
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	DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
CITIZENS FOR PROPERITY IN AMERICA TODAY PAC (SENATOR PAT TOOMEY)				
Mailing Address 228 S WASHINGTON STREET SUITE 115				\$ 1,000.00
City ALEXANDRIA	2	13	2015	
State VA				
Zip Code (Plus 4) 22314				

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 1,000.00

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	Reporting Period
	From: To:

	DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business	City	State	Zip Code (Plus 4)	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE 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	Reporting Period
	From: _____ To: _____

			DATE	AMOUNT	
Full Name	MO	DAY	YEAR		
Mailing Address				\$	0.00
City	State	Zip Code (Plus 4)			
Receipt Description					

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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 LAWRENCE COUNTY REPUBLICAN COMMITTEE	Reporting Period From: <u>1/1/2015</u> To: <u>3/30/2015</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)	\$ 0.00

**SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period
	From: _____ To: _____

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Description of Contribution:				
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.				PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code(Plus 4)	Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL	
						0.00	

SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
LAWRENCE COUNTY REPUBLICAN COMMITTEE	From <u>1/1/2015</u> To: <u>3/30/2015</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
THE GLOBE LEADER	2	10	2015	\$ 144.00
Mailing Address P.O. BOX 257				
City NEW WILMINGTON	State PA	Zip Code (Plus 4) 16142		Description of Expenditure AD FOR LINCOLN DAY BREAKFAST
To Whom Paid LESLIE BUCCI (WEEKLY BARGAIN BULLETIN)	2	10	2015	\$ 172.50
Mailing Address 437 LAWNVIEW AVENUE				
City NEW CASTLE	State PA	Zip Code (Plus 4) 16105		Description of Expenditure REIMB FOR AD FOR LINCOLN DAY BREAKFAST
To Whom Paid NEW CASTLE NEWS	2	10	2015	\$ 450.00
Mailing Address 27 N. MERCER STREET				
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101		Description of Expenditure ADVERTISING LINCOLN DAY BREAKFAST
To Whom Paid NORTHWEST CAUCUS	2	10	2015	\$ 135.00
Mailing Address 1451 BUCKTAIL ROAD				
City ST MARY'S	State PA	Zip Code (Plus 4) 15857		Description of Expenditure DUES FOR 2015
To Whom Paid ON TARGET PRINTING	2	10	2015	\$ 657.20
Mailing Address 1319 W. STATE STREET				
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101		Description of Expenditure 2014 FALL DINNER PROGRAM

To Whom Paid VALERIE MEASEL			MO	DAY	YEAR	
Mailing Address 455 W. MAITLAND LANE			2	10	2015	\$ 59.96
City NEW CASTLE	State PA	Zip Code (Plus 4) 16105	Description of Expenditure REIMB FOR MAILING OF POSTCARDS/SUPPLIES LINCOLN DAY			
To Whom Paid FOREVER MEDIA			MO	DAY	YEAR	
Mailing Address 219 SAVANAH GARDNER ROAD			2	13	2015	\$ 300.00
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure RADIO ADVERTISING LINCOLN DAY BREAKFAST			
To Whom Paid BEAVER COUNTY TIMES			MO	DAY	YEAR	
Mailing Address 400 FAIR AVENUE			2	19	2015	\$ 146.25
City BEAVER	State PA	Zip Code (Plus 4) 15009	Description of Expenditure ADVERTISING LINCOLN DAY BREAKFAST			
To Whom Paid FRIENDS OF PAT TOOMEY			MO	DAY	YEAR	
Mailing Address 228 S. WASHINGTON STREET			3	26	2015	\$ 1,000.00
City ALEXANDRIA	State VA	Zip Code (Plus 4) 22314	Description of Expenditure DONATION TO CAMPAIGN			
To Whom Paid LAWRENCE COUNTY FARM SHOW			MO	DAY	YEAR	
Mailing Address 464 MIDWAY ROAD			3	27	2015	\$ 400.00
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure SPACE RESERVATION FOR LAW. COUNTY FAIR			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 3,464.91

