### **Campaign Finance Report**

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

Filer Identificati Number :	on 9600	)102				port ed B		CANDI	DATE		СОМ	4ITTEE	✓	LOB	BYIST		
Name of Filing C	Committee, Candid	late or L	obbyist:		BEN	ININ	GHOF	F FOR R	EPRES	ENTA	TIVE						
Street Address:	328 E. LAMB	ST.															
City:	BELLEFONTE							State:	PA			Zip Code: 16823					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST-	3. <b>X</b>		AMENDMENT REPORT?		Yes	No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA ELECT		POST-	6.		TERMINATION REPORT?		Yes	No	<b>&gt;</b>	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2015					IG METH				PAPER		<b>/</b>	DISKE	TTE	
Name of Office S	Sought by Candida	ite:	•					DATE C	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	County	
								МО	DAY	YI	AR	Number	code			code	
								11		3	2015		(SEE IN	ISTRUCTI	ONS FOR C	ODES)	
	Receipts and	МО	DAY Y	EAR				МО	DAY	YI	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	s trom:		5 5	20	015	Т	0	6		8	2015						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			21,0	)45.83						
B. Total Monet	ary Contributions	And Rec	eipts (From S	che	dule	e I)	\$			34,:	100.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			55,:	145.83						
D. Total Expend	ditures (From Sch	edule II	I)				\$			9,9	95.94						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			45,1	49.89						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edul	le II	[)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$			2	15.00			•			
			P	٩FF	IDA	٩VI	T SE	CTION									I
PART I - If this is	s a Committee rep	ort, trea	surer sign he	re. I	[f th	is is	a Can	didate r	eport, e	candi	date sig	ın here.					I
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	e attached sched	dules	file	d on	paper (	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , true	
Sworn to and subs	cribed before me thi day of	s	20							S	ignature	of Perso	n Submit	ting Re	ort		
	Signatu	ıre	_				-					Prin	ted Nam	e			
My Commission Ex	cpires						_					Ema	il				I
	МО	D	AY	YR					Ar	ea Cod	le	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Co	omn	nitte	ee, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of a	ny knowl	edge and belief	this	polit	tical	commi	ittee has r	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,	l
Sworn to and subsc	ribed before me this								-		s	ignature o	of Candid	ate			
	day of						-					Printe	d Name				
	Signature						-						:1				
My Commission Exp	ires											Ema					
	мо	D	AY	YR			-		Area	Code		Da	aytime T	elephor	e Numb	er	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
BENNINGHOFF FOR REPRESENTATIVE	From:	<u>5/5/20:</u>	<u>15</u> To:	6/8/2015
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)		_	\$	250.00
All Other Contributions (Part B)			\$	450.00
TOTAL for the Reporting	Period	(2)	\$	700.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	33,400.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	33,400.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1, Page 1, Report Cover Page 2, Page			\$	34,100.00

#### **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		Period		
BENNINGHOFF FOR REPRESENTATIVE	From:	<u>5/5/2015</u>	То:	<u>6/8/2015</u>
		DATE		AMOUNT

Full Name of Contributing Comm	МО	DAY	YEAR			
Mailing Address 711 PENN	STONE RD					<b>\$</b> 250.00
City BRYN MAWR	State	Zip Code (Plus 4)	5	7	2015	
	PA	19010				

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

**PAGE TOTAL \$** 250.00

### 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 Repo					porting Period					
BENNINGHOFF FOR REPRESENTATIVE From					<u>5/5/2</u>	o: <u>6/8/2015</u>				
					DATE		AMOUNT			
Full Name of Contributor DAN MEUSER				мо	DAY	YEAR				
Mailing Address 100 OLDFIELD RD				L	7	2015	\$ 250.00			
<b>City</b> SHAVERTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18708		5	7	2015				
Full Name of Contributor DRAKE NAKAISHI				МО	DAY	YEAR				
Mailing Address 541 COLONEL DEWEES RD							\$ 200.00			
City WAYNE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19087		5	7	2015				

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

**PAGE TOTAL \$** 450.00

#### **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			Reporting	Period			
BENNINGHOFF FOR REPRESENTATIVE			From:	<u>5/</u>	<u>/5/2015</u>	То:	6/8/2015
				DA	TE		AMOUNT
Full Name of Contributing Committee PA CONSTRUCTORS (COMMITTEE FOR	AFFORDABLE HOUSI	NG)		МО	DAY	YEAR	
Mailing Address 2509 N. FRONT ST.							<b>\$</b> 1,000.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code</b> 17110	e (Plus 4)	5	7	2015	·
Full Name of Contributing Committee SANOFI AVENTIS				МО	DAY	YEAR	
Mailing Address 550 CORPORATE DE City BRIDGEWATER	State	<b>Zip Code</b> 08807	e (Plus 4)	5	7	2015	\$ 1,000.00
Full Name of Contributing Committee PA DENTAL PAC				МО	DAY	YEAR	
Mailing Address PO BOX 3341							<b>\$</b> 1,000.00
City HARRISBURG	State PA	<b>Zip Code</b> 17105	e (Plus 4)	5	7	2015	
Full Name of Contributing Committee  MCNEES WALLACE & DURICK				МО	DAY	YEAR	
Mailing Address 100 PINE ST.  City HARRISBURG	State	Zip Code	e (Plus 4)	5	7	2015	\$ 1,000.00
	PA	17101					
Full Name of Contributing Committee CAPITAL BLUE CROSS				МО	DAY	YEAR	
Mailing Address 2500 ELMERTON AV	/E.						\$ 1,000.00
City HARRISBURG	<b>State</b> PA	<b>Zip Cod</b>	e (Plus 4)	5	7	2015	

				FAGE 6
Full Name of Contributing Committee PA PHARMACISTS ASSOCIATION	МО	DAY	YEAR	
Mailing Address 508 N. THIRD ST.				<b>\$</b> 1,000.00
City HARRISBURG State Zip Code (Plus 4) PA 17101	5	7	2015	
Full Name of Contributing Committee PFMA	МО	DAY	YEAR	
Mailing Address PO BOX 870				<b>\$</b> 1,000.00
City CAMP HILL PA 2ip Code (Plus 4) PA 17001	5	7	2015	
Full Name of Contributing Committee  CERTIFIED PUBLIC ACCOUNTANT	МО	DAY	YEAR	
Mailing Address 500 N. THIRD ST. STE 600A				\$ 1,000.00
City HARRISBURG State Zip Code (Plus 4)	5	7	2015	
PA 17101				
Full Name of Contributing Committee PA HEALTH & Description of the PA HEALTH & Description of	МО	DAY	YEAR	
Full Name of Contributing Committee				\$ 3,000.00
Full Name of Contributing Committee  PA HEALTH & Description Address  Mailing Address	<b>MO</b> 5	DAY 7		\$ 3,000.00
Full Name of Contributing Committee  PA HEALTH & ASSOC  Mailing Address PO BOX 8600  City HARRISBURG  State Zip Code (Plus 4)				\$ 3,000.00
Full Name of Contributing Committee  PA HEALTH & ASSOC  Mailing Address PO BOX 8600  City HARRISBURG  State Zip Code (Plus 4) 17105  Full Name of Contributing Committee	<b>мо</b>	DAY	2015 YEAR	\$ 3,000.00 \$ 3,000.00
Full Name of Contributing Committee  PA HEALTH & SOC  Mailing Address PO BOX 8600  City HARRISBURG  Full Name of Contributing Committee  PENNSYLVANIA AUTOMOTIVE ASSOC	5	7	2015 YEAR	
Full Name of Contributing Committee PA HEALTH & SOC  Mailing Address PO BOX 8600  City HARRISBURG  Full Name of Contributing Committee PENNSYLVANIA AUTOMOTIVE ASSOC  Mailing Address PO BOX 2955  City HARRISBURG  State Zip Code (Plus 4) 17105  Zip Code (Plus 4) 27 Code (Plus 4)	<b>мо</b>	DAY	2015 YEAR	
Full Name of Contributing Committee PA HEALTH & DESCRIPTION DESCRI	5 <b>MO</b> 5	DAY 7	2015  YEAR  2015	

Full N	ame of Contributing Committee			мо	DAY		YEAR	
BAYAI	DA HOME HEALTH CARE			МО	DAT		ILAK	
Mailin	g Address 1315 WALNUT ST.	STE 600						\$ 1,000.00
City	PHILADELPHIA	State	Zip Code (Plus 4)	5		7	2015	
		PA	19107					
Full N	ame of Contributing Committee			мо	DAY		YEAR	
HIGH	COMPANIES							
Mailin	g Address PO BOX 10008							\$ 1,000.00
City	LANCASTER	State	Zip Code (Plus 4)	5		7	2015	
		PA	17605					
	ame of Contributing Committee  MBIA GAS			мо	DAY		YEAR	
Mailin	g Address 800 N. THIRD ST. S			5		7	2015	\$ 500.00
City	HARRISBURG	State	Zip Code (Plus 4)			′	2013	
		PA	17102					
	ame of Contributing Committee	FTITIVENESS		МО	DAY		YEAR	
PENNS	SYLVANIA FOR ECONOMIC COMP			МО	DAY		YEAR	
PENNS					DAY	ı		\$ 1,000.00
PENNS	SYLVANIA FOR ECONOMIC COMP		Zip Code (Plus 4)	<b>MO</b> 5	DAY	7	<b>YEAR</b> 2015	\$ 1,000.00
PENNS <b>Mailin</b>	SYLVANIA FOR ECONOMIC COMP  g Address 1211 CHESTNUT ST	. STE 605	<b>Zip Code (Plus 4)</b> 19107		DAY	7		\$ 1,000.00
Mailin City Full Na	SYLVANIA FOR ECONOMIC COMP  g Address 1211 CHESTNUT ST	State			DAY	7		\$ 1,000.00
Mailin City Full Na	SYLVANIA FOR ECONOMIC COMP  g Address 1211 CHESTNUT ST  PHILADELPHIA  ame of Contributing Committee	State PA		5		7	2015	\$ 1,000.00
Mailin City Full Na	SYLVANIA FOR ECONOMIC COMP  g Address 1211 CHESTNUT ST  PHILADELPHIA  ame of Contributing Committee  IA & Description of American State of Contribution Committee  IA & Description of Com	State PA		5		7	2015	
Mailin City Full Na ULIAN Mailin	SYLVANIA FOR ECONOMIC COMP  g Address 1211 CHESTNUT ST  PHILADELPHIA  ame of Contributing Committee  IA & Company ASSOCIATES	State PA  CLE B20	19107	мо			2015 YEAR	
Mailin City Full Na ULIAN Mailin City	SYLVANIA FOR ECONOMIC COMP  g Address 1211 CHESTNUT ST  PHILADELPHIA  ame of Contributing Committee  IA & Description of American State of Contribution Committee  IA & Description of Com	State PA  CLE B20  State	19107  Zip Code (Plus 4)	<b>MO</b> 5	DAY		2015 YEAR 2015	
Mailin City Full Na ULIAN Mailin City	g Address 1211 CHESTNUT ST  PHILADELPHIA  ame of Contributing Committee  IA & BETHLEHEM  BETHLEHEM  PHILADELPHIA  1211 CHESTNUT ST  1211 C	State PA  CLE B20  State	19107  Zip Code (Plus 4)	мо			2015 YEAR	
Mailin City Full Na ULIAN Mailin City Full Na AT&ar	g Address 1211 CHESTNUT ST  PHILADELPHIA  ame of Contributing Committee  IA & BETHLEHEM  BETHLEHEM  PHILADELPHIA  1211 CHESTNUT ST  1211 C	State PA  CLE B20  State	19107  Zip Code (Plus 4)	<b>MO</b> 5	DAY		2015 YEAR 2015	
Mailin City Full Na ULIAN Mailin City Full Na AT&ar	g Address 1211 CHESTNUT ST  PHILADELPHIA  ame of Contributing Committee  IA & BETHLEHEM  BETHLEHEM  ame of Contributing Committee  physical Stranger Committee  p	State PA  CLE B20  State	19107  Zip Code (Plus 4)	<b>MO</b> 5	DAY		2015 YEAR 2015	\$ 500.00
Full Nation City Full Nation City Full Nation AT&ar Mailin	SYLVANIA FOR ECONOMIC COMP  g Address 1211 CHESTNUT ST  PHILADELPHIA  ame of Contributing Committee  IA & Description Committee  BETHLEHEM  ame of Contributing Committee	State PA  CLE B20  State PA	19107  Zip Code (Plus 4)  18017	мо 5	DAY	7	2015 YEAR 2015	\$ 500.00

Full Name of Contributing Committee  GREENLEE PARTNERS (FRIENDS OF CARNEGIE MUSEUMS)	МО	DAY	•	YEAR	
Mailing Address 230 STATE ST.					\$ 500.00
City HARRISBURG State Zip Code (Plus PA 17101	<b>s 4)</b> 5		7	2015	
Full Name of Contributing Committee  GREENLEE PARTNERS	МО	DAY	•	YEAR	
Mailing Address 230 STATE ST.					\$ 1,000.00
City HARRISBURG State Zip Code (Plus PA 17101	<b>s 4)</b> 5		7	2015	
Full Name of Contributing Committee  GMEREK GOVERNMENT RELATIONS	МО	DAY	•	YEAR	
Mailing Address 212 LOCUST ST. STE 300					\$ 1,000.00
City HARRISBURG State Zip Code (Plus PA 17101	<b>s 4)</b> 5		7	2015	
Full Name of Contributing Committee  MARKWEST LIBERTY PAC	МО	DAY	,	YEAR	
_	МО	DAY		YEAR	\$ 500.00
MARKWEST LIBERTY PAC			7	<b>YEAR</b> 2015	\$ 500.00
MARKWEST LIBERTY PAC  Mailing Address 300 N. SECOND ST. STE 1202A  City HARRISBURG State Zip Code (Plus			7		\$ 500.00
MARKWEST LIBERTY PAC  Mailing Address 300 N. SECOND ST. STE 1202A  City HARRISBURG State PA 17101  Full Name of Contributing Committee	s 4) 5	DAY	7	2015 YEAR	\$
MARKWEST LIBERTY PAC  Mailing Address 300 N. SECOND ST. STE 1202A  City HARRISBURG State PA 17101  Full Name of Contributing Committee  ALPHA NATURAL RESOURCES	s 4) 5	DAY	7	2015	
MARKWEST LIBERTY PAC  Mailing Address 300 N. SECOND ST. STE 1202A  City HARRISBURG State PA 17101  Full Name of Contributing Committee ALPHA NATURAL RESOURCES  Mailing Address PO BOX 1020  City WAYNESBURG State Zip Code (Plus	s 4) 5	DAY	7	2015 YEAR	
MARKWEST LIBERTY PAC  Mailing Address 300 N. SECOND ST. STE 1202A  City HARRISBURG State PA 17101  Full Name of Contributing Committee ALPHA NATURAL RESOURCES  Mailing Address PO BOX 1020  City WAYNESBURG State PA 15370  Full Name of Contributing Committee	MO 5 4) 5	DAY	7	2015 YEAR 2015	1,000.00

Full Na	ame of Contributing Committee							
GEISIN	NGER HEALTH SYSTEM			МО	DAY		YEAR	
Mailing	g Address 2601 MARKET PLAC	E COMMERCE COURT	STE 100					\$ 500.00
City	HARRISBURG	State	Zip Code (Plus 4)	5		7	2015	
		PA	17110					
Full Na	ame of Contributing Committee			мо	DAY		YEAR	
HIGHM	1ARK PAC			М			ILAK	
Mailing	g Address 1800 CENTER ST.							\$ 1,000.00
City	CAMP HILL	State	Zip Code (Plus 4)	5		7	2015	
		PA	17089					
	nme of Contributing Committee	BANKERS (FIRST PAG	C)	МО	DAY		YEAR	
Mailing	g Address PO BOX 5319							\$ 3,000.00
City	HARRISBURG	State	Zip Code (Plus 4)	5		7	2015	
		PA	1 7 7 1 1 0					
			17110					
	nme of Contributing Committee I ASSOCIATES	117	17110	мо	DAY		YEAR	
CRISC		117	17110		DAY		YEAR	\$ 1,000.00
CRISC	I ASSOCIATES  g Address 204 STATE ST.	State	Zip Code (Plus 4)	<b>MO</b> 5	DAY	7	<b>YEAR</b> 2015	\$ 1,000.00
CRISC:	I ASSOCIATES				DAY	7		\$ 1,000.00
CRISC: Mailing City Full Na	I ASSOCIATES  g Address 204 STATE ST.	State	Zip Code (Plus 4)		DAY	7		\$ 1,000.00
City  Full Na WASTE	Address 204 STATE ST.  HARRISBURG  The man of Contributing Committee  E MANAGEMENT	State	Zip Code (Plus 4)	мо			2015	\$ 1,000.00
City  Full Na WASTE	I ASSOCIATES  g Address 204 STATE ST.  HARRISBURG  mme of Contributing Committee  E MANAGEMENT  g Address 701 PENNSYLVANIA	State PA	Zip Code (Plus 4)	5		7	2015	
City  Full Na WASTE	Address 204 STATE ST.  HARRISBURG  The man of Contributing Committee  E MANAGEMENT	State PA AVE., NW STE 590	<b>Zip Code (Plus 4)</b> 17101	мо			2015 YEAR	
City  Full Na WASTE Mailing City	I ASSOCIATES  g Address 204 STATE ST.  HARRISBURG  mme of Contributing Committee  E MANAGEMENT  g Address 701 PENNSYLVANIA	State PA AVE., NW STE 590 State	Zip Code (Plus 4) 17101  Zip Code (Plus 4)	<b>MO</b> 5	DAY		2015 YEAR 2015	
City  Full Na WASTE  Mailing  City  Full Na	Address 204 STATE ST.  HARRISBURG  The of Contributing Committee  E MANAGEMENT  G Address 701 PENNSYLVANIA  WASHINGTON	State PA  AVE., NW STE 590  State DC	Zip Code (Plus 4) 17101  Zip Code (Plus 4)	мо			2015 YEAR	
City  Full Na WASTE  Mailing  City  Full Na PENNS	ASSOCIATES  G Address 204 STATE ST.  HARRISBURG  The ame of Contributing Committee  E MANAGEMENT  G Address 701 PENNSYLVANIA  WASHINGTON  The ame of Contributing Committee  The ame of Contributing Committee	State PA  AVE., NW STE 590  State DC  ANS PAC	Zip Code (Plus 4) 17101  Zip Code (Plus 4)	MO 5	DAY	7	2015 YEAR 2015	
City  Full Na WASTE  Mailing  City  Full Na PENNS	Address 204 STATE ST.  HARRISBURG  The many of Contributing Committee  E MANAGEMENT  G Address 701 PENNSYLVANIA  WASHINGTON  The many of Contributing Committee  EYLVANIA EMERGENCY PHYSICIA  The Address of Contributing Committee  EYLVANIA EMERGENCY PHYSICIA  The Address of Contributing Committee  EXAMPLES OF CONTRIBUTION  The Address of Contribution Committee  EXAMPLES OF CONTRIBUTION  The Address of Contribution Committee  EXAMPLES OF CONTRIBUTION  The Address of Contribution Committee  EXAMPLES OF CONTRIBUTION  THE CONT	State PA  AVE., NW STE 590  State DC  ANS PAC	Zip Code (Plus 4) 17101  Zip Code (Plus 4)	<b>MO</b> 5	DAY		2015 YEAR 2015	\$ 500.00

						17102 10
Full Name of Contributing Committee PA ASSN OF DEER FARMERS PAC			МО	DAY	YEAR	
Mailing Address 200 N. THIRD ST. S	TE 1500		_	_		<b>\$</b> 300.00
City HARRISBURG	State PA	<b>Zip Code (Plus 4)</b> 17101	6	6	2015	
Full Name of Contributing Committee PHYSICIAN ASSISTANTS PAC			мо	DAY	YEAR	
Mailing Address 200 N. THIRD ST. S	TE 1500					<b>\$</b> 300.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	6	6	2015	
Full Name of Contributing Committee PA TRUCK PAC, PENNA MOTOR TRUCK	ASSOC		МО	DAY	YEAR	
Mailing Address 910 LINDA LANE						<b>\$</b> 500.00
City CAMP HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170116409	6	6	2015	
Full Name of Contributing Committee ELI LILLY AND CO PAC			мо	DAY	YEAR	
Mailing Address  City INDIANAPOLIS	State IN	<b>Zip Code (Plus 4)</b> 46285	6	6	2015	\$ 500.00
Full Name of Contributing Committee  JOHNSON & DHNSON PAC			МО	DAY	YEAR	
Mailing Address 1 JOHNSON & amp;	JOHNSON PLAZA-WT4	05				<b>\$</b> 1,000.00
City NEW BRUSWICK	State NJ	<b>Zip Code (Plus 4)</b> 089337204	6	6	2015	
	•	•		•		•

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

**PAGE TOTAL** 33,400.00

### 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.)

ame of Filing Committee or Candidate				Reporting Period					
	Fro					To	То:		
				D	ATE		А	MOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plu	s 4)						
Employer Name		•		Occupa	tion		•		
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	Section	on 3.			\$	PAGE TOTAL 0.00	

### 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:			
				D	ATE		АМС	DUNT	
Full Name				МО	DAY	YEAR			
Mailing Address							<b>\$</b>	0.00	
City	State	Zip Code (	Plus 4)						
Receipt Description		•		•	•	•	•		
Enter Grand Total of Part E	on Schedule T. Detailer	d Summary Page	Section	4			PAG	E TOTAL	
	on concadio 1, betanet	a cammur, ruge,	200.011	••			\$	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									
BENNINGHOFF FOR REPRESENTATIVE	From:	<u>5/5/2015</u> <b>To:</b>	<u>6/8/2015</u>							
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR										
TOTAL for the Reporting Pe	eriod (1)	\$	0.00							
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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,		\$	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			МО	DAY	YEAR			
Mailing Address						<b>\$</b>	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL	
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		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:			То:		
						DAT	E			AMOUNT
Full Name of Contributor					мо	DAY	,	YEAR		
Mailing Address								\$	0.00	
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						PAGE TOTAL				
Summary Page, Section 3.										0.00

#### **SCHEDULE III STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate			Reporting Period						
BENNINGHOFF FOR REPRESENTATIVE F			From <u>5/5/2015</u> To:				6/8/2015		
				DATE			AMOUNT		
To Whom Paid PENN STRATEGIES			мо	DAY	YEAR				
Mailing Address 300 N. 2ND ST. STE 1002				5	2015	\$	3,670.00		
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	Description of Expenditure  EVENT EXPENSES / CONSULTANT						
To Whom Paid COMMITTEE FOR CHRISTINE MILLIND	≣R		МО	DAY	YEAR				
Mailing Address 501 W. LAMB ST.			5	6	2015	\$	1,500.00		
City BELLEFONTE	State PA	<b>Zip Code (Plus 4)</b> 16823	Description of Expenditure DONATION						
To Whom Paid CBICC			МО	DAY	YEAR				
Mailing Address 200 INNOVATION E	BLVD. STE 150		5	9	2015	\$	245.00		
City STATE COLLEGE	State PA	<b>Zip Code (Plus 4)</b> 16803	Description of Expenditure MEMBERSHIP						
To Whom Paid RICHARD BENNINGHOFF			МО	DAY	YEAR				
Mailing Address 233 OLD MILL RD.			5	12	2015	\$	350.00		

I						l		
City STATE COLLEGE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16801	Description of Expenditure EVENT ENTERTAINMENT					
To Whom Paid KERRY BENNINGHOFF			МО	DAY	YEAR			
Mailing Address 704 W. LAMB ST.		5	15	2015	\$	330.94		
City BELLEFONTE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16823	Description of Expenditure POSTAGE / CAMPAIGN EXPENSES					

To Whom Paid GARY LUCAS			МО	DAY	YEAR		
Mailing Address AXEMANN R	D.		6	1	2015	\$	200.00
City BELLEFONTE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16823	Description of Expenditure  ARTISTIC CREATION FOR ROUNDUP				
To Whom Paid HRCC			МО	DAY	YEAR		
Mailing Address PO BOX 117	87		6 1 2015 <b>\$</b> 2				
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	Description of Expenditure REPUBLICAN ROUNDUP / SPONSORSHIP				
To Whom Paid FRIENDS OF CHRIS EXARCHOS			МО	DAY	YEAR		
Mailing Address PO BOX 102	7		6	5	2015	\$	1,500.00
City LEMONT	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16851	Description of Expenditure DONATION				
Enter Grand Total of Expend	itures on Page 1 P	enort Cover Page Item D	•				PAGE TOTAL
Linter Grand Fotal of Expend	itules oli Faye 1, K	eport Cover rage, Item D	•			\$	9,995.94

### STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period					
BENNINGHOFF FOR REPRESENTATIVE From			From:		<u>5/5/2015</u>	То:		6/8/2015
					DATE			Outstanding Balance of Debt
Name of Creditor HOMETOWN SPORTS, LLC					DAY	YEAR		
Mailing Address 469 PLUM ST.	iling Address 469 PLUM ST.			5	8	2015	\$	215.00
City BELLEFONTE	<b>State</b> PA	<b>Zip Code (PI</b> 16823	us 4)	Description of Debt AD				
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.								<b>PAGE TOTAL</b> 215.00