

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 : | | 20150209 | | Report Filed By : | | CANDIDATE | | COMMITTEE <input checked="" type="checkbox"/> | | LOBBYIST | | |
| Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF GREG ROTHMAN | | | | | | | | | | | | |
| Street Address: P.O. BOX 1471 | | | | | | | | | | | | |
| City: CAMP HILL | | | | | | State: PA | | | Zip Code: 17001 | | | |
| TYPE OF REPORT (place X to the right of report type) | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRE-PRIMARY | 2. | 30 DAY POST-PRIMARY | 3. | AMENDMENT REPORT? | Yes | No | <input checked="" type="checkbox"/> | | |
| | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY PRE-ELECTION | 5.X | 30 DAY POST-ELECTION | 6. | TERMINATION REPORT? | Yes | No | <input checked="" type="checkbox"/> | | |
| | ANNUAL REPORT | 7. | Year 2015 | | FILING METHOD () CHECK ONE | | PAPER <input checked="" type="checkbox"/> | DISKETTE | | | | |
| Name of Office Sought by Candidate: | | | | | | DATE OF ELECTION | | | District Number | Office Code | Party Code | County Code |
| REPRESENTATIVE IN THE GENERAL ASSEMBLY | | | | | | MO | DAY | YEAR | 87 | STH | REP | 21 |
| | | | | | | 11 | 3 | 2015 | (SEE INSTRUCTIONS FOR CODES) | | | |
| Summary of Receipts and Expenditures from: | | MO | DAY | YEAR | TO | MO | DAY | YEAR | FOR OFFICE USE ONLY | | | |
| | | 9 | 15 | 2015 | | 10 | 19 | 2015 | | | | |
| A. Amount Brought Forward From Last Report | | | | | | \$ | | 51,352.69 | | | | |
| B. Total Monetary Contributions And Receipts (From Schedule I) | | | | | | \$ | | 10,300.00 | | | | |
| C. Total Funds Available (Sum Of Lines A and B) | | | | | | \$ | | 61,652.69 | | | | |
| D. Total Expenditures (From Schedule III) | | | | | | \$ | | 3,252.05 | | | | |
| E. Ending Cash Balance (Subtract Line D From Line C) | | | | | | \$ | | 58,400.64 | | | | |
| F. Value Of In-Kind Contributions Received (From Schedule II) | | | | | | \$ | | 1,593.47 | | | | |
| 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 of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

| | |
|--|--|
| Name of Filing Committee or Candidate | Reporting Period |
| FRIENDS OF GREG ROTHMAN | From: <u>9/15/2015</u> To: <u>10/19/2015</u> |

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

| | |
|--|-------------|
| 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) | |
| Contributions Received From Political Committees (Part A) | \$ 1,250.00 |
| All Other Contributions (Part B) | \$ 6,500.00 |
| TOTAL for the Reporting Period (2) | \$ 7,750.00 |

| | |
|---|-------------|
| 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) | \$ 1,500.00 |
| TOTAL for the Reporting Period (3) | \$ 2,500.00 |

| | |
|--|---------|
| 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.) | \$ 10,300.00 |
|---|--------------|

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 | | | | Reporting Period | | | |
| FRIENDS OF GREG ROTHMAN | | | | From: <u>9/15/2015</u> To: <u>10/19/2015</u> | | | |
| | | | | DATE | | AMOUNT | |

| | | | | | | |
|--|---|--------------|-----------|--------------------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| BUCHANAN INGERSOLL & ROONEY COMM. FOR EFFECTIVE GOV. | | | 10 | 14 | 2015 | |
| Mailing Address | 301 GRANT ST 20TH FLOOR 1 OXFORD CENTER | | | | | |
| City | PITTSBURGH | State | PA | Zip Code (Plus 4) | | |
| | | | | 15219 | | |

| | | | | | | |
|--|----------------------------|--------------|-----------|--------------------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| EQT CORP. STATE PAC | | | 9 | 15 | 2015 | |
| Mailing Address | 625 LIBERTY AVE SUITE 1700 | | | | | |
| City | PITTSBURGH | State | PA | Zip Code (Plus 4) | | |
| | | | | 15222 | | |

| | | | | | | |
|--|---------------|--------------|-----------|--------------------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| MCNEES PAC | | | 10 | 14 | 2015 | |
| Mailing Address | P.O. BOX 1166 | | | | | |
| City | HARRISBURG | State | PA | Zip Code (Plus 4) | | |
| | | | | 17108 | | |

| | | | | | | |
|--|-------------------|--------------|-----------|--------------------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| RETTEW PAC | | | 9 | 29 | 2015 | |
| Mailing Address | 3020 COLUMBIA AVE | | | | | |
| City | LANCASTER | State | PA | Zip Code (Plus 4) | | |
| | | | | 17603 | | |

| | | | | | | |
|--|------------------------|--------------|-----------|--------------------------|-------------|-----------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ 250.00 |
| TRANSPORTATION CONSTRUCTION INDUSTRIES PAC | | | 10 | 14 | 2015 | |
| Mailing Address | 800 N 3RD ST SUITE 500 | | | | | |
| City | HARRISBURG | State | PA | Zip Code (Plus 4) | | |
| | | | | 17102 | | |

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

PAGE TOTAL

\$ 1,250.00

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 | Reporting Period |
| FRIENDS OF GREG ROTHMAN | From: <u>9/15/2015</u> To: <u>10/19/2015</u> |

| | |
|-------------|---------------|
| DATE | AMOUNT |
|-------------|---------------|

| | | | | |
|--|-----------------|--------------------------------|-------------|-----------|
| Full Name of Contributor | MO | DAY | YEAR | \$ 250.00 |
| DANIEL P MEUSER | | | | |
| Mailing Address 100 OLDFIELD RD | | | | |
| City SHAVERTOWN | State PA | Zip Code (Plus 4) 18708 | 10 13 2015 | |

| | | | | |
|---|-----------------|--------------------------------|-------------|-----------|
| Full Name of Contributor | MO | DAY | YEAR | \$ 250.00 |
| JAMES A MIRANDO, JR. | | | | |
| Mailing Address 6 HIDDEN MEADOW DR | | | | |
| City MECHANICSBURG | State PA | Zip Code (Plus 4) 17050 | 10 13 2015 | |

| | | | | |
|--|-----------------|--------------------------------|-------------|-----------|
| Full Name of Contributor | MO | DAY | YEAR | \$ 250.00 |
| DREW E MURPHY | | | | |
| Mailing Address 15 GUNPOWDER RD | | | | |
| City MECHANICSBURG | State PA | Zip Code (Plus 4) 17050 | 10 14 2015 | |

| | | | | |
|---|-----------------|--------------------------------|-------------|-----------|
| Full Name of Contributor | MO | DAY | YEAR | \$ 250.00 |
| DEBORAH B NICHOLSON | | | | |
| Mailing Address 15 OCEAN HARBOUR CIR | | | | |
| City OCEAN RIDGE | State FL | Zip Code (Plus 4) 33435 | 10 14 2015 | |

| | | | | |
|---------------------------------------|-----------------|--------------------------------|-------------|-----------|
| Full Name of Contributor | MO | DAY | YEAR | \$ 250.00 |
| LOIS A NORRIS | | | | |
| Mailing Address 6 GUNPOWDER RD | | | | |
| City MECHANICSBURG | State PA | Zip Code (Plus 4) 17050 | 10 13 2015 | |

| | | | | | | |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor MARYBETH O OSBORNE | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 101 BRENTWATER RD | | | 10 | 14 | 2015 | |
| City CAMP HILL | State PA | Zip Code (Plus 4) 17011 | | | | |

| | | | | | | |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor DAVID D OSIKOWICZ | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address P.O. BOX 343 | | | 9 | 21 | 2015 | |
| City PUNXSUTAWNEY | State PA | Zip Code (Plus 4) 15767 | | | | |

| | | | | | | |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor DONNA E PARTIN | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 8 STRATFORD LN | | | 10 | 14 | 2015 | |
| City MECHANICSBURG | State PA | Zip Code (Plus 4) 17050 | | | | |

| | | | | | | |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor MARIA LOUISA GAUGHEN | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address P.O. BOX 203 | | | 10 | 19 | 2015 | |
| City CAMP HILL | State PA | Zip Code (Plus 4) 17001 | | | | |

| | | | | | | |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor DONALD M HEALEY | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 4713 MAPLE SHADE DR | | | 10 | 6 | 2015 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 17110 | | | | |

| | | | | | | |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor PEGGY A HILLIARD | | | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 3 HIDDEN MEADOW DR | | | 10 | 19 | 2015 | |
| City MECHANICSBURG | State PA | Zip Code (Plus 4) 17050 | | | | |

| | | | | | | |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor DAVID L HOLLINGER | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 755 WHITE OAK RD | | | 10 | 6 | 2015 | |
| City DENVER | State PA | Zip Code (Plus 4) 17517 | | | | |

| | | | | | | |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor M TOQUAIAH JACKSON | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 7 E RED GOLD CIR | | | 10 | 8 | 2015 | |
| City CAMP HILL | State PA | Zip Code (Plus 4) 17011 | | | | |

| | | | | | | |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor CYNTHIA D KACHEL | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 6 STRATFORD LN | | | 10 | 13 | 2015 | |
| City MECHANICSBURG | State PA | Zip Code (Plus 4) 17050 | | | | |

| | | | | | | |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor ROBERT L KNUPP | | | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 98 SHETLAND DR | | | 10 | 13 | 2015 | |
| City HUMMELSTOWN | State PA | Zip Code (Plus 4) 17036 | | | | |

| | | | | | | |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor ANDREW N LICK | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 2404 BRADLEY DR | | | 10 | 8 | 2015 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 17110 | | | | |

| | | | | | | |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor THE JASON GRACE GROUP, LLC | | | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 514 JONAGOLD CIR | | | 10 | 6 | 2015 | |
| City MECHANICSBURG | State PA | Zip Code (Plus 4) 17055 | | | | |

| | | | | | | |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor DAVID E BLACK | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 1217 CHELSEN CROSS | | | 10 | 14 | 2015 | |
| City MECHANICSBURG | State PA | Zip Code (Plus 4) 17050 | | | | |

| | | | | | | |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor MARJORIE L BLAZE | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 102 LITTLE RUN RD | | | 10 | 14 | 2015 | |
| City CAMP HILL | State PA | Zip Code (Plus 4) 17011 | | | | |

| | | | | | | |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor DENNIS P BRECKLE | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 300 WILLOW MILL PARK RD | | | 10 | 14 | 2015 | |
| City MECHANICSBURG | State PA | Zip Code (Plus 4) 17050 | | | | |

| | | | | | | |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor MEGAN C CALLAHAN | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 21 SUMMER LN | | | 10 | 14 | 2015 | |
| City MECHANICSBURG | State PA | Zip Code (Plus 4) 17050 | | | | |

| | | | | | | |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor J DUNCAN CAMPBELL | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 505 ELM AVE | | | 10 | 14 | 2015 | |
| City HERSHEY | State PA | Zip Code (Plus 4) 17033 | | | | |

| | | | | | | |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor ALISON D COPPOCK | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 2203 W COVENTRY LN | | | 10 | 14 | 2015 | |
| City ENOLA | State PA | Zip Code (Plus 4) 17025 | | | | |

| Full Name of Contributor | | | MO | DAY | YEAR | \$ 250.00 |
|--------------------------|-------|-------------------|----|-----|------|-----------|
| PAUL D FISHER | | | | | | |
| Mailing Address | | | 10 | 14 | 2015 | |
| 14 CHERISH DR | | | | | | |
| City | State | Zip Code (Plus 4) | | | | |
| CAMP HILL | PA | 17011 | | | | |

| Full Name of Contributor | | | | MO | DAY | YEAR | \$ 150.00 |
|--------------------------|---------------|-------|----|-------------------|-------|------|-----------|
| RICHARD A RUSSELL, JR. | | | | | | | |
| Mailing Address | | | | 10 | 14 | 2015 | |
| 7 GUNPOWDER RD | | | | | | | |
| City | MECHANICSBURG | State | PA | Zip Code (Plus 4) | 17050 | | |

| Full Name of Contributor | | | MO | DAY | YEAR | \$ 100.00 |
|----------------------------------|----------|-------------------------|----|-----|------|-----------|
| VICKI R SHANNON | | | | | | |
| Mailing Address 4451 SAYBROOK LN | | | | | | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 17110 | 8 | 31 | 2015 | |

| | | | | | | |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor FRANK R SOURBEER | | | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 905 KATIE CT | | | 10 | 19 | 2015 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 17109 | | | | |

| Full Name of Contributor | | | MO | DAY | YEAR | \$ 250.00 |
|--------------------------|---------|-------------------|----|-----|------|-----------|
| BLAIR S TROGNER, SR. | | | | | | |
| Mailing Address | | | 10 | 19 | 2015 | |
| 4 SENTRY POINT RD | | | | | | |
| City | LEMOYNE | State | | | | |
| | | PA | | | | |
| | | Zip Code (Plus 4) | | | | |
| | | 17043 | | | | |

| Full Name of Contributor | | | MO | DAY | YEAR | \$ 150.00 |
|--------------------------|-------|-------------------|----|-----|------|-----------|
| STEVEN C WILDS | | | | | | |
| Mailing Address | | | 10 | 14 | 2015 | |
| 4501 LAURELWOOD DR | | | | | | |
| City | State | Zip Code (Plus 4) | | | | |
| HARRISBURG | PA | 17110 | | | | |

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

PAGE TOTAL

\$ 6,500.00

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 |
| FRIENDS OF GREG ROTHMAN | From: <u>9/15/2015</u> To: <u>10/19/2015</u> |

| DATE | | | | AMOUNT |
|-------------------------------------|-------|-------------------|---|-------------|
| Full Name of Contributing Committee | | | | |
| PA REALTORS PAC | | | | |
| Mailing Address | | | | |
| 500 N 12TH ST | | | | |
| City | State | Zip Code (Plus 4) | | |
| LEMOYNE | PA | 17043 | | |
| | | 10 | 2 | 2015 |
| | | | | \$ 1,000.00 |

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 FRIENDS OF GREG ROTHMAN | Reporting Period From: <u>9/15/2015</u> To: <u>10/19/2015</u> |
|---|---|

| | | | | DATE | | | AMOUNT |
|---|-----------------|--------------------------------|-------------|-------------------|--------------------------|------|-----------|
| Full Name of Contributor | | | | MO | DAY | YEAR | |
| DILWORTH PAXSON, LLP | | | | | | | |
| Mailing Address 1500 MARKET ST SUITE 3500E | | | | 9 | 21 | 2015 | \$ 500.00 |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 19102 | | | | | |
| Employer Name | | | | Occupation | | | |
| Employer Mailing Address/Principal Place of Business | | | City | State | Zip Code (Plus 4) | | |

| Full Name of Contributor | | | | MO | DAY | YEAR | |
|---|-----------------|--------------------------------|-------------|-----------------------------|--------------------------|------|-----------|
| HAROLD E HALDEMAN | | | | | | | |
| Mailing Address 5 HIDDEN MEADOW DR | | | | 10 | 8 | 2015 | \$ 500.00 |
| City MECHANICSBURG | State PA | Zip Code (Plus 4) 17050 | | | | | |
| Employer Name ADM MARKETING GROUP | | | | Occupation INSURANCE | | | |
| Employer Mailing Address/Principal Place of Business | | | City | State | Zip Code (Plus 4) | | |
| 3314 MARKET ST | | | CAMP HILL | PA | 17011 | | |

| Full Name of Contributor | | | | MO | DAY | YEAR | |
|---|-----------------|--------------------------------|---------------|-----------------------------|--------------------------|------|-----------|
| JOHN M ORTENZIO | | | | | | | |
| Mailing Address 4718 GETTYSBURG RD | | | | 10 | 6 | 2015 | \$ 500.00 |
| City MECHANICSBURG | State PA | Zip Code (Plus 4) 17053 | | | | | |
| Employer Name SELECT CAPITAL COMMERCIAL PROPERTIES, INC. | | | | Occupation PRESIDENT | | | |
| Employer Mailing Address/Principal Place of Business | | | City | State | Zip Code (Plus 4) | | |
| 381 INDEPENDENCE AVE | | | MECHANICSBURG | PA | 17055 | | |

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

PAGE TOTAL

\$ 1,500.00

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 | \$ 0.00 |
| Mailing Address | | | | | | |
| 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 | | Reporting Period | |
| FRIENDS OF GREG ROTHMAN | | From: <u>9/15/2015</u> To: <u>10/19/2015</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 RECIEVED - VALUE OVER \$250.00 (FROM PART G) | | | |
| TOTAL for the Reporting Period (3) | | \$ | 1,593.47 |
| 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.) | | \$ | 1,593.47 |

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 | \$ 0.00 |
| Mailing Address | | | | | | | |
| 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 FRIENDS OF GREG ROTHMAN | | | | Reporting Period From: <u>9/15/2015</u> To: <u>10/19/2015</u> | | | |
|---|--|--|--|---|--|--|--|

| | | | | DATE | AMOUNT | | |
|--|--------------------|----------------------------------|-------------|-------------------|-------------------------|---|-------------|
| Full Name of Contributor GREENLEE PARTNERS STATE PAC | | | | MO | DAY | YEAR | \$ 1,593.47 |
| Mailing Address 230 STATE ST | | | | 8 | 18 | 2015 | |
| City HARRISBURG | State PA | Zip Code(Plus 4) 17101 | | | | | |
| Employer of Contributor | | | | Occupation | | | |
| Employer Mailing Address/Principal Place of Business | | | City | State | Zip Code(Plus 4) | Description of Contribution FOOD AND BEVERAGE | |
| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. | | | | | | PAGE TOTAL 1,593.47 | |

SCHEDULE III STATEMENT OF EXPENDITURES

| | |
|--|---|
| Name of Filing Committee or Candidate | Reporting Period |
| FRIENDS OF GREG ROTHMAN | From <u>9/15/2015</u> To: <u>10/19/2015</u> |

| DATE | | | | AMOUNT | | |
|---|----------|-------------------------|---|--------|------|-------------|
| To Whom Paid FRIENDS OF JESSICA BREWBAKER | | | MO | DAY | YEAR | \$ 1,000.00 |
| Mailing Address C/O CLAUDIA WILLIAMS 5123 S DEERFIELD AVE | | | 8 | 29 | 2015 | |
| City MECHANICSBURG | State PA | Zip Code (Plus 4) 17050 | Description of Expenditure CONTRIBUTION | | | |
| To Whom Paid CENTRIC BANK | | | MO | DAY | YEAR | \$ 5.00 |
| Mailing Address 1625 MARKET ST | | | 8 | 31 | 2015 | |
| City CAMP HILL | State PA | Zip Code (Plus 4) 17011 | Description of Expenditure SERVICE FEE | | | |
| To Whom Paid DTR CONSULTING | | | MO | DAY | YEAR | \$ 500.00 |
| Mailing Address 210 KELKER ST | | | 9 | 1 | 2015 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 17102 | Description of Expenditure PROFESSIONAL SERVICES | | | |
| To Whom Paid HAMPDEN TOWNSHIP REPUBLICAN ASSOC. | | | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 2438 LAMBS GAP RD | | | 9 | 3 | 2015 | |
| City ENOLA | State PA | Zip Code (Plus 4) 17025 | Description of Expenditure CONTRIBUTION | | | |
| To Whom Paid HTVRC | | | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address ATTN: CHARLES SACAVALG 4900 CARLISLE PK, PMB #267 | | | 9 | 3 | 2015 | |
| City MECHANICSBURG | State PA | Zip Code (Plus 4) 17050 | Description of Expenditure CONTRIBUTION | | | |

| | | | | | | |
|--|--------------------|-----------------------------------|--|------------|-------------|--|
| To Whom Paid MAVERICK FINANCE | | | MO | DAY | YEAR | |
| Mailing Address 403 N SECOND ST 2FL | | | 9 | 3 | 2015 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 17101 | Description of Expenditure POSTAGE | | | |

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|--|--------------------|-----------------------------------|--|------------|-------------|--|
| To Whom Paid GK VISUAL, LLC | | | MO | DAY | YEAR | |
| Mailing Address 2941 NORTH FRONT ST. #305 | | | 9 | 14 | 2015 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 17110 | Description of Expenditure PHOTO SHOOT | | | |

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|---------------------------------------|--------------------|-----------------------------------|--|------------|-------------|--|
| To Whom Paid DOUG RICKARDS | | | MO | DAY | YEAR | |
| Mailing Address 210 KELKER ST. | | | 9 | 23 | 2015 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 17102 | Description of Expenditure REIMBURSEMENT | | | |

| | | | | | | |
|---------------------------------------|--------------------|-----------------------------------|--|------------|-------------|--|
| To Whom Paid CENTRIC BANK | | | MO | DAY | YEAR | |
| Mailing Address 1625 MARKET ST | | | 9 | 30 | 2015 | |
| City CAMP HILL | State PA | Zip Code (Plus 4) 17011 | Description of Expenditure SERVICE FEE | | | |

| | | | | | | |
|---------------------------------------|--------------------|-----------------------------------|--|------------|-------------|--|
| To Whom Paid DTR CONSULTING | | | MO | DAY | YEAR | |
| Mailing Address 210 KELKER ST | | | 10 | 1 | 2015 | |
| City HARRISBURG | State PA | Zip Code (Plus 4) 17102 | Description of Expenditure PROFESSIONAL SERVICES | | | |

| | | | | | | |
|---|--------------------|-----------------------------------|---|------------|-------------|--|
| To Whom Paid CUMBERLAND COUNTY REPUBLICAN COMMITTEE | | | MO | DAY | YEAR | |
| Mailing Address P.O. BOX 1495 | | | 10 | 2 | 2015 | |
| City CAMP HILL | State PA | Zip Code (Plus 4) 17001 | Description of Expenditure CONTRIBUTION | | | |

| | | | | | | |
|--|--|--|--|--|--|-------------------|
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | PAGE TOTAL |
| | | | | | | \$ 3,252.05 |

