# **Campaign Finance Report**

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

Filer Identificat	<b>ion</b> 200	)8026			Report		CANDI	DATE		СОМ	MITTEE	<b>√</b>	LOBE	BYIST	
Number :	Committee, Cand	idate or La	hhviet			-	R FOR SI								
	PO BOX 23		JDDyist.		VOGLL,										
Street Address:	FO DOX 23														
City:	BEAVER						State:	PA			<b>Zip Code:</b> 15009				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE		30 DA PRIM		POST-	3.		AMENDMENT REPORT?		Yes	No	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE		30 DA		POST-	6. <b>X</b>		TERMIN REPORT		Yes	No	$\checkmark$
report type)	ANNUAL REPOR	<b>T</b> 7.	<b>Year</b> 2015				NG METHO				PAPER		$\checkmark$	DISKE	TTE
Name of Office	L Sought by Candid	late:					DATE O	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YE	AR	Number	Code			code
							11		3	2015		(SEE INS	STRUCTIO	ONS FOR	CODES)
Summary of	Receipts and	мо	DAY	YEAR	1		мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:	1	LO 20	2	015 <b>T</b>	C	11	2	23	2015					
A. Amount Bro	ught Forward Fr	om Last R	eport		J	\$	<u> </u>	. 1	107,7	33.95	1				
B. Total Monet	B. Total Monetary Contributions And Receipts (From Schedule I)					\$		2,460.00							
C. Total Funds Available (Sum Of Lines A and B)						\$		1	110,1	93.95					
D. Total Expen	D. Total Expenditures (From Schedule III)					\$			6,2	80.99					
E. Ending Cash	Balance (Subtra	act Line D	From Line	C)		\$		1	.03,9	12.96					
F. Value Of In-	Kind Contributio	ns Receive	ed (From S	chedu	le II)	\$				0.00					
G. Unpaid Deb	ts And Obligatior	ns (From S	chedule IV	')		\$				0.00					
				AFF	IDAVIT	SE	CTION								
	s a Committee re	• •	-												
I swear (or affirm correct and compl	) that this report, ir ete.	icluding the	attached sc	hedules	s filed on p	aper	or by elect	ronic me	edium,	are to t	the best o	f my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me tl day of	his	20						S	ignature	e of Perso	n Submitt	ing Rep	ort	
						-					Prin	ted Name	1		
My Commission E	Signa xpires	luie									Ema	il			
	мо	DA	AY	YR		-		Are	a Cod	e	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a ca	ndidate's a	authorized	Comm	nittee, Ca	ndid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amend	) that to the best of ed.	f my knowle	edge and beli	ef this	political	comm	ittee has n	ot violat	ed an	y provis	ions of th	e act of Jı	ine 3,1	937 (P.L	. 1333,
Sworn to and subse	cribed before me thi	is								S	ignature	of Candida	ate		
	day of 										Printe	ed Name			
	Signature	e													
My Commission Ex	pires										Ema	il			
	мо	DA	AY	YR				Area (	Code		D	aytime Te	elephon	e Numb	er

#### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** VOGEL, ELDER FOR SENATE From: <u>10/20/2015</u> **To:** 11/23/2015 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 85.00 **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 350.00 **Contributions Received From Political Committees (Part A)** 1,025.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 1,375.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 1,000.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 1,000.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount 2,460.00 \$ totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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 Candidat	e		Re	porting I	Period			
VOGEL, ELDER FOR SENATE			Fr	om:	<u>10/20/2</u>	. <u>015</u> To	:	<u>11/23/2015</u>
		•			DATE			AMOUNT
Full Name of Contributing Committee Count on Camp for Commissioner				мо	DAY	YEAR		
Mailing Address 252 Center Gran				10	2	2015	\$	200.00
City Aliquippa	State	Zip Code (Plus	4)	_				
	PA	15001						
Full Name of Contributing Committee								
LOCAL 0712 IBEW COPE				мо	DAY	YEAR		
Mailing Address 217 SASSAFRAS	LANE			10	2	2015	\$	150.00
City BEAVER	State	Zip Code (Plus	4)	10	<u> </u>			
	РА	15009-0000						
								PAGE TOTAL

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

350.00

\$

Use this Part to it	emize all other 50.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s wit orting	h an J peri	aggrega iod.			rom
Name of Filing Committee or Candida	te		Repor	rting Pe	eriod			
VOGEL, ELDER FOR SENATE			From:					<u>11/23/2015</u>
					DATE			AMOUNT
Full Name of Contributor Jeffrey McConnell				мо	DAY	YEAR		
Mailing Address 1259 Carter Road	1						\$	75.00
City Volant	<b>State</b> PA	<b>Zip Code (Plus 4</b> 16156	)	10	21	2015		
Full Name of Contributor Ed Cline				мо	DAY	YEAR		
Mailing Address 129 Allen Street							\$	150.00
City Beaver Falls	<b>State</b> PA	<b>Zip Code (Plus 4</b> 15010	)	10	21	2015		
Full Name of Contributor				мо	DAY	YEAR		
David Gabauer								
Mailing Address 112 Watson Trail   City Beaver Falls	State	Zip Code (Plus 4	<u>,</u>	10	21	2015	\$	100.00
	PA	15010	,					
Full Name of Contributor				мо	DAY	YEAR		
Leo Wolfe								
Mailing Address 2 Darlington Road   City Beaver Falls	State	Zip Code (Plus 4	)	10	21	2015	\$	100.00
	PA	15010						
Full Name of Contributor	-			мо	DAY	YEAR		
Deborah Boyd			_					
Mailing Address 202 Hunt Saddle L				10	21	2015	\$	150.00
City New Wilmington	<b>State</b> PA	<b>Zip Code (Plus 4</b> 16142		10	21	2015		
Full Name of Contributor				мо	DAY	YEAR		
Nicholas Unis						TLAN		
Mailing Address 2072 Brodhead Road				10		2015	\$	150.00
City Aliquippa	<b>State</b> PA	<b>Zip Code (Plus 4</b> 15001		10	21	2015		

Full Name of Contributor			мо	DAY	YEAR	
Sherman Hostetter				DAT	ILAK	
Mailing Address 607 Westvi	ew Drive					\$ 200.00
City Beaver	State	Zip Code (Plus 4)	10	21	2015	
	PA	15009				
Full Name of Contributor			мо	DAY	YEAR	
Ellen Lilly				DAT	TEAN	
Mailing Address 130 Laurel	Rd					\$ 100.00
City Darlington	State	Zip Code (Plus 4)	11	16	2015	
	PA	16115				
						PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.						\$ 1,025.00

# 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	g Period				
VOGEL, ELDER FOR SENATE			From:	<u>10/2</u>	20/2015	То:	<u>11</u>	1 <u>/23/2015</u>
				DA	TE		A	MOUNT
Full Name of Contributing Committee GLAXOSMITHKLINE LLC PAC (FKA SMIT	HKLINE BEECHAM CO	ORP PAC)		мо	DAY	YEAR	\$	500.00
Mailing Address FIVE MOORE DR				11	16	2015		
City RESEARCH TRIANGLE	State NC	<b>Zip Code (Plus 4)</b> 277090000						
Full Name of Contributing Committee MICHAEL BAKER INTERNATIONAL PAC				мо	DAY	YEAR	\$	500.00
Mailing Address 100 AIRSIDE DR				11	16	2015	<b>-</b>	500100
City MOON TOWNSHIP	State	Zip Cod	e (Plus 4)		10	2015		
	РА	15108-	0000					
		_		_				PAGE TOTAL
Enter Grand Total of Part C on Scheo	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	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			Repo	orting Pe	riod			
			Fron	n:		Тс	:	
				DA	ATE		AI	MOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	ion			
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Cod	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Sectio	on 3.			P \$	<b>AGE TOTAL</b> 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 Candidat	e		Report	ing Perio	od				
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (	Plus 4)						
Receipt Description						•	-		
			o					PAGE TO	TAL
Enter Grand Total of Part E on Sche	duie I, Detailed	Summary Page,	Section	4.			\$		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 Perio	od	
VOGEL, ELDER FOR SENATE	From:	<u>10/20/2015</u> то:	<u>11/23/2015</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	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:			То:		
				DATE			AMOUNT	
Full Name of Contributor				DAY	YEAR			
Mailing Address						<b>\$</b>		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:						-		
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	e,		PAGE TOTA	<u>، ۱</u>
						\$		0.00

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

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

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
VOGEL, ELDER FOR SENATE			From	<u>10/20</u>	0/2015	То:	<u>11/23/2015</u>
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
Beaver County Festival of Trees							
Mailing Address PO Box F			10	27	2015	\$	200.00
City Koppel	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	РА	16136	Tree Sp	onsor			
To Whom Paid CCBC			мо	DAY	YEAR		
Mailing Address 1 Campus Drive			10	28	2015	\$	200.00
City Monaca	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure		
	PA	15061	Veteran	's Breakfas	st - 2 tab	les	
<b>To Whom Paid</b> Beaver County Tourism			мо	DAY	YEAR		
Mailing Address 121 Bradys Run Road			10	28	2015	\$	75.00
City Beaver Falls	State	Zip Code (Plus 4)	Descript	l tion of Exp	l enditure	I	
	PA	15010	Member	r Dues			
To Whom Paid			мо	DAY	YEAR		
Friends of David J. Gabauer			10		2015	\$	750.00
Mailing Address PO Box 175		<b>I</b>	10	28	2015	<b>₽</b>	/ 50.00
City Beaver Falls	State	Zip Code (Plus 4)		tion of Exp	enditure		
	PA	15010	Contribu	ution		1	
<b>To Whom Paid</b> Citizens for Jim Christiana			мо	DAY	YEAR		
Mailing Address 420 Turnpike Street			10	28	2015	\$	500.00
City Beaver	State	Zip Code (Plus 4)	) Description of Expenditure				
	РА	15009	Event Table				
To Whom Paid Beaver County NAACP			мо	DAY	YEAR		
			10	28	2015	\$	50.00
<b>City</b> Aliquippa	State	Zip Code (Plus 4)	Descript	 tion of Exp	enditure		
	PA	15001	Ad				

To Whom Paid			мо	DAY	YEAR			
Marquis Strategies, LLC			MO		TLAN			
Mailing Address PO Box	x 262		10	28	2015	\$	4,117.09	
City Beaver	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	15009	Fundraising Consulting					
To Whom Paid				DAY	VEAD			
Cascade Park Swimming P	Pool		мо	DAY	YEAR			
Mailing Address 223 No	orth Mercer Street, Suite 101		11	11	2015	\$	25.00	
City New Castle	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	16101	Event T	icket				
To Whom Paid			мо	DAY	YEAR			
InkStar			MO	DAT	TEAK			
Mailing Address 2243 [	Darlington Road		11	11	2015	\$	333.90	
City Beaver Falls	State	Zip Code (Plus 4)	Description of Expenditure					
	РА	15010	Invites for events					
To Whom Paid			мо	DAY	YEAR			
Marburger Dairy			MO		TEAN			
Mailing Address 1506 M	Iars-Evans City Road		11	11	2015	\$	30.00	
City Evans City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
PA 16033 Drinks for Beaver Falls Par				Falls Para	ade			
							PAGE TOTAL	
Enter Grand Total of Ex	penditures on Page 1, Rep	ort Cover Page, Item D	•			\$	6,280.99	