

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.	30 DAY POST-ELECTION	6. X	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			
		10	20	2015		11	23	2015				
A. Amount Brought Forward From Last Report						\$ 58,400.64						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 3,850.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 62,250.64						
D. Total Expenditures (From Schedule III)						\$ 2,611.64						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 59,639.00						
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 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>10/20/2015</u> To: <u>11/23/2015</u>

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)	\$ 1,250.00
All Other Contributions (Part B)	\$ 2,100.00
TOTAL for the Reporting Period (2)	\$ 3,350.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 0.00
All Other Contributions (Part D)	\$ 500.00
TOTAL for the Reporting Period (3)	\$ 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.)	\$ 3,850.00
---	-------------

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 FRIENDS OF GREG ROTHMAN	Reporting Period From: <u>10/20/2015</u> To: <u>11/23/2015</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee	MO	DAY	YEAR	AMOUNT
ENERGY TRANSFER PAC				
Mailing Address 400 W 15TH ST SUITE 720				
City AUSTIN State TX Zip Code (Plus 4) 78701	11	23	2015	\$ 250.00
Full Name of Contributing Committee	MO	DAY	YEAR	
EQT CORP. STATE PAC				
Mailing Address 625 LIBERTY AVE SUITE 1700				
City PITTSBURGH State PA Zip Code (Plus 4) 15222	11	2	2015	\$ 250.00
Full Name of Contributing Committee	MO	DAY	YEAR	
GGR, INC. PAC				
Mailing Address 212 LOCUST ST SUITE 300				
City HARRISBURG State PA Zip Code (Plus 4) 17101	10	20	2015	\$ 250.00
Full Name of Contributing Committee	MO	DAY	YEAR	
HIGHMARK PAC				
Mailing Address 1800 CENTER ST				
City CAMP HILL State PA Zip Code (Plus 4) 17089	10	20	2015	\$ 250.00
Full Name of Contributing Committee	MO	DAY	YEAR	
PENNSYLVANIANS FOR ECONOMIC COMPETIVENESS				
Mailing Address 1211 CHESTNUT ST SUITE 605				
City PHILADELPHIA State PA Zip Code (Plus 4) 19107	10	22	2015	\$ 250.00

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 FRIENDS OF GREG ROTHMAN				Reporting Period From: <u>10/20/2015</u> To: <u>11/23/2015</u>			
				DATE		AMOUNT	
Full Name of Contributor PATRICK CURRAN				MO	DAY	YEAR	\$ 250.00
Mailing Address 7090 BEAVER SPRING RD				10	22	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17111					
Full Name of Contributor DANIEL DEITCHMAN				MO	DAY	YEAR	\$ 250.00
Mailing Address 5060 RITTER RD SUITE B1				10	20	2015	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055					
Full Name of Contributor PORSHA M GAUGHEN				MO	DAY	YEAR	\$ 250.00
Mailing Address 450 BARBARA DR				10	21	2015	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050					
Full Name of Contributor ANDREW J GIORGIONE				MO	DAY	YEAR	\$ 250.00
Mailing Address 2911 N. 2ND ST				10	29	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110					
Full Name of Contributor MARTIN G LANE, JR.				MO	DAY	YEAR	\$ 250.00
Mailing Address 2407 PARK DR SUITE 200				10	20	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110					
Full Name of Contributor CAROLYN S PLUMMER				MO	DAY	YEAR	\$ 100.00
Mailing Address 6 FOXFIELD CT				10	20	2015	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050					

Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
TAYLOR K RANKER			10	20	2015	
Mailing Address	2375 FOREST HILLS DR					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17112	

Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
JENNIFER ROBINSON			10	21	2015	
Mailing Address	5135 S DEERFIELD AVE					
City	MECHANICSBURG	State	PA	Zip Code (Plus 4)	17050	

Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
SUSANNAH M ROTHMAN			10	21	2015	
Mailing Address	553 BRIDGEVIEW DR					
City	LEMOYNE	State	PA	Zip Code (Plus 4)	17043	

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

PAGE TOTAL

\$ 2,100.00

			DATE			AMOUNT
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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 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>10/20/2015</u> To: <u>11/23/2015</u>
---	--

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
ROBERT P BOWMAN				\$ 500.00
Mailing Address 1190 DILLERVILLE RD	10	20	2015	
City LANCASTER State PA Zip Code (Plus 4) 17601				
Employer Name CHARTER HOMES & NEIGHBORHOODS	Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business 1190 DILLERVILLE RD	City LANCASTER	State PA	Zip Code (Plus 4) 17601	

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

PAGE TOTAL
\$ 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>10/20/2015</u> To: <u>11/23/2015</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	\$ 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	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
FRIENDS OF GREG ROTHMAN	From <u>10/20/2015</u> To: <u>11/23/2015</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
CENTRIC BANK				
Mailing Address 1625 MARKET ST	10	31	2015	\$ 5.00
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure SERVICE FEE	
To Whom Paid	MO	DAY	YEAR	
DTR CONSULTING				
Mailing Address 210 KELKER ST	11	2	2015	\$ 250.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17102	Description of Expenditure PROFESSIONAL SERVICES	
To Whom Paid	MO	DAY	YEAR	
MAVERICK FINANCE				
Mailing Address 403 N SECOND ST 2FL	11	13	2015	\$ 400.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure DESIGN	
To Whom Paid	MO	DAY	YEAR	
MAVERICK FINANCE				
Mailing Address 403 N SECOND ST 2FL	11	16	2015	\$ 693.64
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure PRINTING AND POSTAGE	
To Whom Paid	MO	DAY	YEAR	
POSTMASTER				
Mailing Address 1675 CAMP HILL BYP	11	16	2015	\$ 33.00
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure RENTAL FEE	
To Whom Paid	MO	DAY	YEAR	
MAVERICK FINANCE				
Mailing Address 403 N SECOND ST 2FL	11	19	2015	\$ 1,230.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure COMMISSION	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL
				\$ 2,611.64

