

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
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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			
FRIENDS OF GREG ROTHMAN				From: <u>10/20/2015</u> To: <u>11/23/2015</u>			
				DATE		AMOUNT	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
ENERGY TRANSFER PAC			11	23	2015	
Mailing Address	400 W 15TH ST SUITE 720					
City	State	Zip Code (Plus 4)				
AUSTIN	TX	78701				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
EQT CORP. STATE PAC			11	2	2015	
Mailing Address						
625 LIBERTY AVE SUITE 1700						
City	State	Zip Code (Plus 4)				
PITTSBURGH	PA	15222				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
GGR, INC. PAC			10	20	2015	
Mailing Address						
212 LOCUST ST SUITE 300						
City	State	Zip Code (Plus 4)				
HARRISBURG	PA	17101				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
HIGHMARK PAC			10	20	2015	
Mailing Address						
1800 CENTER ST						
City	State	Zip Code (Plus 4)				
CAMP HILL	PA	17089				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
PENNSYLVANIANS FOR ECONOMIC COMPETIVENESS			10	22	2015	
Mailing Address						
1211 CHESTNUT ST SUITE 605						
City	State	Zip Code (Plus 4)				
PHILADELPHIA	PA	19107				

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>
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DATE	AMOUNT
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Full Name of Contributor			MO	DAY	YEAR	\$250.00
PATRICK CURRAN						
Mailing Address			10	22	2015	
7090 BEAVER SPRING RD						
City	State	Zip Code (Plus 4)				
HARRISBURG	PA	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				MO	DAY	YEAR	\$ 250.00
PORSHA M GAUGHEN							
Mailing Address 450 BARBARA DR				10	21	2015	
City	MECHANICSBURG	State	Zip Code (Plus 4)				
		PA	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			MO	DAY	YEAR	\$ 250.00
MARTIN G LANE, JR.						
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 TAYLOR K RANKER				MO	DAY	YEAR	\$ 250.00
Mailing Address 2375 FOREST HILLS DR				10	20	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17112					
Full Name of Contributor JENNIFER ROBINSON				MO	DAY	YEAR	\$ 250.00
Mailing Address 5135 S DEERFIELD AVE				10	21	2015	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050					
Full Name of Contributor SUSANNAH M ROTHMAN				MO	DAY	YEAR	\$ 250.00
Mailing Address 553 BRIDGEVIEW DR				10	21	2015	
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

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	
	From:	To:

				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>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
ROBERT P BOWMAN							
Mailing Address 1190 DILLERVILLE RD				10	20	2015	\$ 500.00
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 RECIEVED - 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					
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:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
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 CENTRIC BANK			MO	DAY	YEAR	\$5.00
Mailing Address1625 MARKET ST			10	31	2015	
CityCAMP HILL	StatePA	Zip Code (Plus 4)17011	Description of Expenditure SERVICE FEE			
To Whom Paid DTR CONSULTING			MO	DAY	YEAR	\$250.00
Mailing Address210 KELKER ST			11	2	2015	
CityHARRISBURG	StatePA	Zip Code (Plus 4)17102	Description of Expenditure PROFESSIONAL SERVICES			
To Whom Paid MAVERICK FINANCE			MO	DAY	YEAR	\$400.00
Mailing Address403 N SECOND ST 2FL			11	13	2015	
CityHARRISBURG	StatePA	Zip Code (Plus 4)17101	Description of Expenditure DESIGN			
To Whom Paid MAVERICK FINANCE			MO	DAY	YEAR	\$693.64
Mailing Address403 N SECOND ST 2FL			11	16	2015	
CityHARRISBURG	StatePA	Zip Code (Plus 4)17101	Description of Expenditure PRINTING AND POSTAGE			
To Whom Paid POSTMASTER			MO	DAY	YEAR	\$33.00
Mailing Address1675 CAMP HILL BYP			11	16	2015	
CityCAMP HILL	StatePA	Zip Code (Plus 4)17011	Description of Expenditure RENTAL FEE			

To Whom Paid MAVERICK FINANCE			MO	DAY	YEAR	
Mailing Address 403 N SECOND ST 2FL			11	19	2015	
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

