# **Campaign Finance Report**

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

Filer Identificat Number :	<b>ion</b> 2014	0277			Report Filed B		CANDI	DATE		СОМ	AITTEE	✓	LOB	BYIST		
Name of Filing (	Committee, Candid	ate or L	obbyist:			-	R PERRY	,								
Street Address:	PO BOX 147															
City:	RED LION						State: PA Zip Code:					<b>de:</b> 17	<b>:</b> 17356			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. <b>X</b>	2ND FRIE PRIMARY	DAY PRE-	2.	30 DA PRIMA		POST- 3.			AMENDN REPORT		Yes	Nc	· 🗸	
(place X to the right of					5.	30 DA ELECT		POST-	6.		TERMIN REPORT		Yes	Nc	^ <b>~</b>	
report type)	ANNUAL REPORT	7.	<b>Year</b> 201	.6			IG METHO				PAPER		$\checkmark$	DISKE	TTE	
Name of Office Sought by Candidate:							DATE O	F ELEC	CTIC	N	District Number	Office Code	Par	ty Code	County	
								DAY	YI	AR	Number	Code			Code	
							11		8	2016	·	(SEE INS	TRUCTI	ONS FOR	CODES)	
Summary of	Receipts and	мо	DAY	YEAR			мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY		
Expenditures	s from:		1	1 20	16 <b>T</b>	0	3		7	2016						
A. Amount Bro	ught Forward From	n Last R	eport	•		\$		-	265,3	310.77	1					
B. Total Monet	ary Contributions	And Rec	eipts (Fro	om Sched	lule I)	\$			10,6	578.04	1					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$		2	275,9	988.81						
D. Total Expen	ditures (From Sch	edule II	I)			\$			33,6	577.81	1					
E. Ending Cash	Balance (Subtrac	t Line D	From Lin	e C)		\$		2	242,3	811.00						
F. Value Of In-	Kind Contributions	s Receiv	ed (From	Schedule	e II)	\$				0.00	-					
G. Unpaid Deb	ts And Obligations	(From S	Schedule	IV)		\$				0.00						
				AFFI	DAVI	T SE	CTION									
	s a Committee rep		-					• •		-	•					
I swear (or affirm correct and compl	) that this report, incl ete.	luding the	e attached :	schedules	filed on	paper	or by elect	ronic me	edium	, are to f	the best o	f my knov	vledge	and beli	ef , true	
Sworn to and sub	scribed before me this day of	5	20			_			9	Signature	e of Perso	n Submitt	ing Rep	oort		
	Signatu	re				-					Prin	ted Name				
My Commission E	xpires					_					Ema	il				
	МО	D	AY	YR				Are	ea Coo	le	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a cano	didate's	authorize	ed Commi	ittee, C	andid	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amend	) that to the best of n ed.	ny knowle	edge and b	elief this p	political	comm	ittee has n	ot violat	ed an	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.L	1333,	
Sworn to and subscribed before me this day of 20										s	ignature	of Candida	ite			
						-					Printe	ed Name				
My Commission Exp	Signature					-					Ema	il				
	мо		AY	YR		-		Area	<b>0</b> - 4 -			aytime Te				

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** PATRIOTS FOR PERRY From: <u>1/1/2016</u> **To:** <u>3/7/2016</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 0.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 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 \$ 0.00 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 Candidate			Reporting Period					
					:			
				DATE			AMOUNT	
Full Name of Contributing Com	mittee		мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4	)					
						Г	PAGE TOTAL	

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

0.00

\$

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 Candidat	e		Rep Fror	orting P	eriod	Τα	):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 0.00								

# 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	Reporting Period						
			From:			То:				
				DA	TE		А	MOUNT		
Full Name of Contributing Comm	ittee			мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
						ſ		PAGE TOTAL		
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

## 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		Report	ting Perio	od			
			From:			То:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR		
Mailing Address							\$ i	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description					1	1		
Enter Grand Total of Part E	on Schodulo I. Dotailog		Section	4			PAGE TOT	AL
		i Suillilai y Page,	Section	-			\$	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		
PATRIOTS FOR PERRY	From:	<u>1/1/2016</u> <b>To:</b>	<u>3/7/2016</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 Re			Reporting Period					
F						То:		
				DATE		АМС	DUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detail Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	5	0.00	

0.00

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

Name of Filing Committee or Candidate				Re	Reporting Period						
					Fro	From: To:					
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(	Plus 4)							
Employer of Contributor						Occupat	tion	- <b>I</b>			
Employer Mailing Address/Principal Place of City Business				State		Zip 4)	Code(Plus	Descri	ption of	f Contribution	
										PAGE TOTAL	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAGE

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candida	Name of Filing Committee or Candidate						
PATRIOTS FOR PERRY			From	<u>1/</u>	<u>1/2016</u>	То:	<u>3/7/2016</u>
				AMOUNT			
To Whom Paid ALL OTHER DISBURSEMENTS	мо	DAY	YEAR				
Mailing Address				7	2016	\$	32,977.81
City State Zip Code (Plus 4)				tion of Exp	penditure	9	
To Whom Paid FRIENDS OF DAN MOUL			мо	DAY	YEAR		
Mailing Address 335 MAIN STREE	Т		2	23	2016	\$	500.00
City MCSHERRYTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17344		<b>ition of Ex</b>			
To Whom Paid FRIENDS OF GREG ROTHMANS			мо	DAY	YEAR		
Mailing Address 1 GUNPOWDER R	.D		3	5	2016	\$	200.00
City     MECHANICSBURG     State     Zip Code (Plus 4)       PA     17050				otion of Exp			
Enter Grand Total of Expenditure	es on Page 1 R	enort Cover Page Item [	<u> </u>				PAGE TOTAL
	is on ruge 1, N	leport cover ruge, riem i				\$	33,677.81