Campaign Finance Report

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

Filer Identificati Number :	on 8000	0661			Rep File			CA	NDI	DATE		СОМІ	COMMITTEE		LUB	DIL	51	
Name of Filing C	Committee, Candid	late or L	obbyist:		LAW	'REN	NCE C	COUNT	ΓY R	EPUBL	ICAN	COMM	IITTEE					_
Street Address:																		
City:	NEW CASTLE							State	e:	PA			Zip Co	de: 16	5105			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	- 2	2.	30 DA		P	POST- 3. X			AMENDMENT REPORT?		Yes		No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	<u>-</u> 5	5.	30 DA		P	POST-	6.		TERMIN. REPORT		Yes		No	\
report type)							NG ME CHEC					PAPER	\	DI	SKETT	E		
Name of Office S	- Sought by Candida	te:						DAT	ΕO	F ELE	CTIC	N	District Number	Office Code	Pa	rty C	ode C	ounty ode
								МО		DAY	YI	AR		•				
									11		8	2016		(SEE IN	STRUCT	IONS	FOR CO	DES)
	Receipts and	МО	DAY	YEAR	2			МО		DAY	ΥI	EAR	FC	R OFFI	CE US	E ON	ILY	
Expenditures	from:		4 12	2 2	016	T	0		5		16	2016						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$	•		•	17,	198.50						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule	I)	\$					0.00						
C. Total Funds Available (Sum Of Lines A and B)											17,	198.50						
D. Total Expenditures (From Schedule III)							\$				2,2	224.26						
E. Ending Cash Balance (Subtract Line D From Line C)							\$				14,9	74.24						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	Schedu	le II))	\$					0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule I\	/)			\$					0.00						
								CTIO										
I swear (or affirm)	s a Committee rep	-	_									_		f my kno	wledge	and	belief	, true
correct and comple	ete. scribed before me thi	s										·	of Perso	- Cbit	D.			
	day of		_ 20				-					oignature	e or Perso	n Submit	ung Ke	рогс		
	Signatu	ire					_						Prin	ted Name	•			
My Commission Ex	· —						_		•				Ema	il				
	МО		AY	YR							ea Cod	le	Daytin	ie Teleph	one N	umbe	er	
	a report of a can					•				_							.	
No 320) as amende		ny knowi	eage and bei	ier this	politi	icai	comm	ittee n	as n	ot viola	ted an	y provis	ions or th	e act of J	une 3,.	1937	(P.L. 1	.333,
SWORN TO AND SUBSC	ribed before me this day of		20									S	ignature	of Candid	ate			
	<u> </u>						- -						Printe	ed Name				-
My Commission Exp	Signature pires									Email						-		
	МО	D	AY	YR			-			Area	Code		D	aytime T	elepho	ne N	umber	$-\mid$

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Detailed Sammary Lag	-			
Name of Filing Committee or Candidate	Reporting	Period		
LAWRENCE COUNTY REPUBLICAN COMMITTEE	From:	<u>4/12/201</u>	<u>б</u> То:	<u>5/16/2016</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)			\$	0.00
All Other Contributions (Part B)			\$	0.00
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
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

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 Committe	Name of Filing Committee or Candidate			Reporting Period						
				Fro	om:		То	I		
			•			DATE			AMOUNT	
Full Name of Contributing	Committee				мо	DAY	YEAR			
Mailing Address								\$	0.00	
City	Si	tate	Zip Code (Plus 4	•)						

PAGE TOTAL
0.00

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

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		Rep	oorting P	eriod			
			Fro	m:		To):	
					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.

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.

ame of Filing Committee or Candidate		Reporting	Period						
			From:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	age, Sectio	n 3.			\$	(0.00

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	lame of Filing Committee or Candidate			Reporting Period					
			Fron	n:		т	o:		
				D	ATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Plus	s 4)						
Employer Name				Occupat	tion				
Employer Mailing Address/Principal Plac	e of Business	City		•	State		Zip	Code (Plus 4)	
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 0.00	
							т	0.00	

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	ing Peri	od			
			From:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<u>'</u>	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	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	d							
LAWRENCE COUNTY REPUBLICAN COMMITTEE	From:	4/12/2016 To:	<u>5/16/2016</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)									
TOTAL for the Reporting Pe	eriod (2)	\$	0.00						
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)									
TOTAL for the Reporting Pe	eriod (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,		\$	0.00						

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Cand	nme of Filing Committee or Candidate			Reporting Period					
				From:					
				DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						7 \$	0.00		
City	State	Zip Code (Plus 4)							
Description of Contribution:	•		•	•	•				
Enter Grand Total of Part F on	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL		
Section 2.						\$	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	me of Filing Committee or Candidate		Re	porting	Period					
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	date Reporting Period					
LAWRENCE COUNTY REPUBLICAN COMMITTEE	From	4/12	<u>2/2016</u>	То:	<u>5/16/2016</u>	
		DATE			AMOUNT	
To Whom Paid	МО	DAY	YEAR			
CRANE ROOM GRILLE	1.10		LAIK			
Mailing Address	5	15	2016	\$	2,089.26	

City NEW CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA 16105 LINCOLN DAY BREAKI							
To Whom Paid			МО	DAY	YEAR			
NORTHWEST CAUCUS			MO		ILAK			
Mailing Address			5	15	2016	\$	135.00	
City ST. MARY'S State Zip Code (Plus 4)			Description of Expenditure					
PA 15857				JES				

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	PAGE TOTAL
	\$ 2,224.26