Campaign Finance Report

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

Filer Identification 2001154 Number :						port ed B		CAND	IDATE		СОМ	4ITTEE	✓	LOBE	YIST	
Name of Filing C	Committee, Candid	late or L	obbyist:		GRE	ATE	R JOH	INSTOW	/N REG	IONA	L PAC					
Street Address:	111 MARKET	ST														
City:	JOHNSTOWN							State:	PA			Zip Cod	le: 1	5901-0	000	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	- [2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDAY ELECTION	PRE	- !	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	~
report type)	ANNUAL REPORT	7.	Year 2016					IG METH CHECK C		•		PAPER		\checkmark	DISKE	ITE
Name of Office S	Cought by Candida	te:						DATE (OF ELE	CTIO	N	District Number	Office Code	Part	ty Code	County Code
	, cag 2, ca							МО	DAY	YE	AR	Number	Code			Code
								11		8	2016		(SEE IN	ISTRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY Y	'EAR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
Expenditures	s trom:		5 17	20	016	Т	0	g	Ð	19	2016					
A. Amount Brought Forward From Last Report							\$			17,0	78.01					
B. Total Monetary Contributions And Receipts (From Schedule						eI)	\$			2,0	00.00					
C. Total Funds Available (Sum Of Lines A and B)							\$			19,0	78.01					
D. Total Expenditures (From Schedule III)						\$			2,8	39.50						
E. Ending Cash Balance (Subtract Line D From Line C)						\$			16,2	38.51						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edu	le II	[)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From	Schedule IV)				\$				0.00			1		
			,	AFF	IDA	٩VI	T SE	CTION								
	s a Committee rep	-	_								_					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sche	dules	filed	d on	paper o	or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge a	nd belie	f , true
Sworn to and subs	cribed before me thi day of	s	20							s	ignature	of Perso	n Submit	ting Rep	ort	
	Signatu		_				- -					Prin	ted Nam	e		
My Commission Ex	_											Ema	il			
	МО	D	AY	YR			-		Ar	ea Cod	le	Daytim	e Telep	hone Nur	nber	
Part II- If this is	a report of a can	didate's	authorized Co	omn	nitte	e, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of i	ny knowl	edge and belief	this	polit	tical	commi	ittee has i	not viola	ted an	y provis	ions of the	e act of J	lune 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	late		
	day of —— ————		_ 20				_					Di	d No			
	Signature						-					Printe	d Name			
My Commission Exp	_											Ema	il			
	МО	D	AY	YR			-		Area	Code		Da	ytime 1	Telephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

betanea banmary rage				
Name of Filing Committee or Candidate	Reporting	Period		
GREATER JOHNSTOWN REGIONAL PAC	From:	<u>5/17/20:</u>	<u>16</u> To:	9/19/2016
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)			\$	2,000.00
TOTAL for the Reporting	Period	(3)	\$	2,000.00
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 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page			\$	2,000.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm	nittee or Candidate		Re					
			Fro	om:		То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•				-		DAGE TOTAL

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

0.00

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 Candid	ate		Reporting Period From: To:					
					DATE		AN	4OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$ \$	0.00
City	State	Zip Code (Plus 4)	1					

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

PAGE TOTAL \$ 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	lame of Filing Committee or Candidate R		Reporting	Period				
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	nmary Pa	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	-				riod				
GREATER JOHNSTOWN REGIONAL PAC			Fron	n:	<u>5/17/2016</u> 1): <u>(</u>	9/19/2016	
				D/	ATE		AMOUNT		
Full Name of Contributor MARK PASQUERILLA				МО	DAY	YEAR			
Mailing 945 MENOHER BOULEVARD State Zip Code (Plus 4)				6			\$	2,000.00	
City JOHNSTOWN	State PA	Zip Code (Plu 15905	p Code (Plus 4) 5905		15	2016			
Employer Name CROWN AMERICAN CO	ORPORATION			Occupation PRESIDENT					
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code (Plus 4)	
1 PASQUERILLA PLAZA		JOHNST	NWC	N PA			15901		
inter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							PAG \$	E TOTAL 2,000.00	

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 Car	ıdidate		Report	ting Perio	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plus 4)				
Receipt Description							
Enter Grand Total of Part E on	Schedule I. Detailed	d Summary Page.	Section	4.			PAGE TOTAL
	20112111112 IJ Dotaine		22300				\$ 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							
GREATER JOHNSTOWN REGIONAL PAC	From:	<u>5/17/2016</u> To:	9/19/2016						
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 Candidate Full Name of Contributor Mailing Address			Reporting Period					
			From:			То:		
				DATE			AMOUNT	
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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL	
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	е				Re	porting	Period			
					Fro	om:		То:		
					•		DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor	-1		•			Occupa	ation			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Cand	idate		Reporti	ng Period					
GREATER JOHNSTOWN REGIONAL	L PAC		From	<u>5/1</u>	7/2016	То:	9/19/2016		
				DATE			AMOUNT		
To Whom Paid WESSEL & COMPANY			МО	DAY	YEAR				
Mailing Address 215 MAIN STRI	EET		7	11	2016	\$	827.50		
City JOHNSTOWN PA Zip Code (Plus 4) 15901				Description of Expenditure ACCOUNTING FEES					
Fo Whom Paid AMERISERV FINANCIAL				DAY	YEAR				
Mailing Address 216 FRANKLIN STREET			5	31	2016	\$	3.00		
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15907		otion of Exp CE CHARGE					
To Whom Paid AMERISERV FINANCIAL	·		мо	DAY	YEAR				
Mailing Address 216 FRANKLIN	STREET		6	30	2016	\$	3.00		
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15907		otion of Exp					
To Whom Paid AMERISERV FINANCIAL	·		мо	DAY	YEAR				
Mailing Address 216 FRANKLIN STREET			7	29	2016	\$	3.00		
City JOHNSTOWN State Zip Code (Plus 4) PA 15907			1	otion of Exp CE CHARGE					

AMERISERV FINANCIAL							
Mailing Address 216 FRANI	KLIN STREET		7	29	2016	\$	3.00
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15907	Descrip SERVIC				
To Whom Paid AMERISERV FINANCIAL			МО	DAY	YEAR		
Mailing Address 216 FRANI	KLIN STREET		8	31	2016	\$	3.00
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15907	Description of Expenditure SERVICE CHARGE				
		·	•				

							FAGL 12
To Whom Paid MIKE TURZAI LEADERSHIP FUND Mailing Address PO BOX 23156			мо	DAY	YEAR		
			9	16	2016	\$	2,000.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15222	Description of Expenditure CONTRIBUTION				
Enter Grand Total of Expend	litures on Page 1, Re	port Cover Page, Item D.				\$	PAGE TOTAL 2,839.50