# **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 :	i <b>on</b> 2016	C0281			Report Filed B		CANDI	NDIDATE V COMMITTEE LOBBYIST							
	Committee, Candid	ate or Lo	bbyist:		GREG R	-	1AN								
Street Address:															
City:							State: Zip Code: 17050								
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 DA PRIM		POST- 3.			AMENDME REPORT?	ENT	Yes	No	, 🔨
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. <b>X</b>	2ND FRIDA ELECTION	5.	30 DA		POST- 6.			TERMINA REPORT?	Yes	No	~ 🗸		
report type)	ANNUAL REPORT	7.	<b>Year</b> 2016				NG METHO				PAPER		$\checkmark$	DISKE	TTE
Name of Office	Sought by Candidat	te:			<b>!</b>		DATE O	FELE			District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YEA	R					•
		_					11		8	2016		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of Expenditures	Receipts and	мо	DAY	YEAR			мо	DAY	YEA	AR	FOF	R OFFIC	E USE	ONLY	
Expenditure	s from:		5 17	2	016 <b>T</b>	0	9	1	.9	2016					
A. Amount Bro	ought Forward Fron	n Last Re	eport			\$				0.00					
B. Total Monet	tary Contributions	And Rece	eipts (From	1 Sche	dule I)	\$		0.00							
C. Total Funds	Available (Sum Of	Lines A	and B)			\$				0.00					
D. Total Exper	nditures (From Scho	edule III	:)			\$			50	0.00					
E. Ending Cash	n Balance (Subtract	t Line D l	From Line	C)		\$				0.00					
F. Value Of In-	-Kind Contributions	Receive	ed (From S	chedu	le II)	\$				0.00					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')		\$				0.00					
				AFF	IDAVI	T SE	CTION								
	is a Committee repo		-								-				
I swear (or affirm correct and comp	ı) that this report, incl lete.	uding the	attached sc	hedule	s filed on	paper	or by elect	ronic me	edium, a	are to	the best of	my know	ledge	and beli	ef , true
Sworn to and sub	scribed before me this day of	5	20						Sig	gnaturo	e of Person	Submitti	ing Rep	oort	
	Signatu	re	·			-					Printe	ed Name			
My Commission E	xpires					_					Email				
	МО	DA	Y	YR				Are	a Code		Daytime	Telepho	one Nu	mber	
Part II- If this is	a report of a cand	lidate's a	authorized	Comn	nittee, C	andid	ate shall	sign he	ere.						
I swear (or affirm No 320) as amend	) that to the best of n led.	ny knowle	dge and beli	ef this	political	comm	ittee has n	ot viola	ed any	provis	ions of the	act of Ju	ne 3,1	937 (P.I	1333,
Sworn to and subs	cribed before me this day of		20							s	ignature of	Candida	te		
						-					Printed	Name			
My Commission Ex	Signature pires					-		Email							
	мо	DA	Y	YR	1	-		Area	Code		Day	ytime Te	lephon	e Numb	er

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### **SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page**

Name of Filing Committee or Candidate **Reporting Period** GREG ROTHMAN From: <u>5/17/2016</u> **To:** <u>9/19/2016</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ **Contributions Received From Political Committees (Part A)** All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) **TOTAL for the Reporting Period** (4) \$

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.)	\$	0.00
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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						
			From:	:		То	:			
		·			DATE			AMOUNT		
Full Name of Contributing Committee			м	10	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
							Γ	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 Candidate Reporting Period									
Fro					From: 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. \$ 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 Period						
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Commi	ittee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
						ſ		PAGE TOTAL	
Enter Grand Total of Part C on	Schedule I, Detail	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:

				DATE			AMOUNT		
Full Name of Contributor			мо	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)							
Employer Name			Occupation						
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip Code (	(Plus 4)		
Enter Grand Total of Part C on Sch	edule I, Detailed S	ummary Page, Sectio	on 3.		\$		<b>бе тота</b> L 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 C	Name of Filing Committee or Candidate			Reporting Period						
			From:			То:				
			I	D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR				
Mailing Address							\$	i	0.00	
City	State	Zip Code (	Plus 4)							
Receipt Description	I				1					
Enter Grand Total of Part E o	- Schodulo I. Dotailoc	l Summary Page	Section	4				PAGE TOT	AL	
	i Schedule 1, Detailet	summary raye,	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								
GREG ROTHMAN	From:	<u>5/17/2016</u> <b>To:</b>	<u>9/19/2016</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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 Ro				Reporting Period					
	From:			То:					
				DATE		АМО	UNT		
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 Detailed Summary Page, PAGE TO Section 2.						TOTAL			
					4	6	0.00		

0.00

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

Name of Filing Committee or Candidate				Reporting Period							
					Fro	om:		То:			
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(Plus 4)								
Employer of Contributor			I			Occupat	tion	_	I		
Employer Mailing Address/Principal Place of City Business				State		Zip Code(Plus 4)			Description of Contribution		
				_		_				PAGE TOTAL	

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

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
GREG ROTHMAN			From	5/17/2016 <b>To</b> :			<u>9/19/2016</u>
			DATE				AMOUNT
To Whom Paid FRIENDS OF JOHN RAFFERTY			мо	DAY	YEAR		
Mailing Address P.O. BOX 11757			8	30	2016	\$	500.00
City HARRISBURG	State PA	<b>Zip Code (Plus 4)</b> 17108	Description of Expenditure CONTRIBUTION				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	500.00