### **Campaign Finance Report**

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

Filer Identification 2008026 Number :					Repo Filed	oort CANDIDA d By :			DATE		соми	<b>ITTEE</b>	✓	LOB	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:	•	VOGE	EL,	ELDE	R FOR S	ENATE								
Street Address:	PO BOX 23																
City:	BEAVER							State:	PA			Zip Cod	<b>le:</b> 15	5009			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	/ PRE-	- 2.		30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	•	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	/ PRE	·- 5.			0 DAY POST- LECTION				TERMINATION REPORT?		Yes	No	•	<b>\</b>
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2016					IG METH CHECK O				PAPER		<b>\</b>	DISKE	TTE	
Name of Office S	- Sought by Candida	te:			-			DATE C	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	ΥI	EAR						
								11		8	2016		(SEE IN	STRUCTI	ONS FOR (	ODES)	)
	Receipts and	МО	DAY	YEAR				МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		11 29	20	016	T	0	12	: :	31	2016						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$	_		92,	781.21						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule 1	[)	\$			į	500.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			93,	281.21						
D. Total Expen	ditures (From Sch	edule II	I)				\$			3,0	048.49						
E. Ending Cash	Balance (Subtract	t Line D	From Line C	C)			\$			90,2	232.72						
F. Value Of In-	Kind Contributions	Receiv	ed (From Sc	hedul	le II)		\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	)			\$				0.00			•			
				AFF	IDA	VΙ	ΓSE	CTION									
	s a Committee rep	•	=														
I swear (or affirm) correct and comple	) that this report, incl ete.	uding the	attached sch	edules	filed	on I	paper (	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , tru	ie.
Sworn to and subs	cribed before me this day of	<b>i</b>	20							S	Signature	of Perso	n Submit	ting Re	ort		_
	Signatu	re					-					Prin	ted Name	e			-
My Commission Ex	cpires											Ema	il				-
	мо	D	AY	YR					Arc	ea Coo	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comm	nittee	, Ca	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ned.	ny knowle	edge and belie	ef this	politic	cal	commi	ittee has r	ot viola	ted ar	ny provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subso	ribed before me this day of		20								s	ignature o	of Candid	ate			_
							-					Printe	d Name				-
My Commission Exp	Signature ires						-					Ema	il				-
	МО	D	AY	YR			•		Area	Code		Da	aytime T	elephor	ne Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
VOGEL, ELDER FOR SENATE	From:	11/29/201	<u>.6</u> To:	12/31/2016
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)			\$	500.00
All Other Contributions (Part D)			\$	0.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	500.00

#### **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 Committee or Candidat	Reporting Period						
			From:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address		_				\$	0.00
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
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	e or Candidate		Rep	orting 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.

Name of Filing Committee or Candidate	Reporting P	Period		
VOGEL, ELDER FOR SENATE	From:	11/29/2016	То:	<u>12/31/2016</u>

DATE AMOUNT

Full Name of Contributing Committee	МО	DAY	YEAR			
TROOPER ASSN PAC (TAP)					1 2711	<b>\$</b> 500.00
Mailing Address 3625 VARTAN WAY				28	2016	
City HARRISBURG	State	Zip Code (Plus 4)	12	20	2010	
	PA	17110-9439				

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

**PAGE TOTAL**\$ 500.00

### 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 Candida	te			Rep	orting Pe	eriod			
				Fror	n:		Т	o:	
					D	ATE		А	MOUNT
Full Name of Contributor					МО	DAY	YEAR	\$	0.00
Mailing Address								7	
City	State	Zi	ip Code (Plus	s 4)					
Employer Name					Occupa	tion			
Employer Mailing Address/Principal F	lace of Business		City		•	State		Zip Cod	de (Plus 4)
Enter Grand Total of Part C on Sc	nedule I, Detaile	ed Sumn	nary Page,	Section	on 3.			\$	PAGE TOTAL 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 Per	iod	
VOGEL, ELDER FOR SENATE	From:	<u>11/29/2016</u> <b>To:</b>	<u>12/31/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T 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 Car	ndidate		Reporting Period					
			From: To:					
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•				
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	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				Rep	orting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								֓֟֟֓֓֟֟֓֓֓֓֓֟֟֓֓֓֟֟֓֓֟֓֓֟֓֓֟֟֓֓֟֓֓֟֓֓֓֟֓֓֓֟֓֓֓֟֓֓֓֟֓֓֓֟֓֓֓֟	\$ 0	.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	State	e Zi	p Code(Plus 4)	Descr	ipti	on of Contribution	1
Enter Grand Total of Part G on Sch	edule II. In-Kir	nd (	Contributions D	etaile	ed				PAGE TOTA	,L
Summary Page, Section 3.									0	.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting I	Period		
VOGEL, ELDER FOR SENATE	From	11/29/2016	То:	12/31/2016

				DATE	AMOUNT			
To Whom Paid			МО	DAY	YEAR			
Cheryl Shriner			1-10					
Mailing Address 207 N 34th Street			11	29	2016	\$	29.15	
City Camp Hill	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	17011	Reimbursement with receipts					
To Whom Paid				DAY	YEAR			
Ellwood City Chamber of Comn	nerce		МО		ILAK			
Mailing Address 806 Lawren	ice Avenue		11	29	2016	\$	70.00	
City Ellwood City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	ı		
	PA	16117	Meeting & Dinner					
To Whom Paid			мо	DAY	YEAR			
Jerry Fisher			140		ILAK			
Mailing Address 1390 Tusca	rawas Road		11	29	2016	\$	30.00	
<b>City</b> Beaver	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	15009	Veterans Donation					
To Whom Paid		·		DAY	YEAR			
Marburger Farm Dairy			МО	DAT	TEAK			
Mailing Address 1506 Mars-Evans City Road			12	28	2016	\$	30.00	
City Evans City	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	16033	Beaver Falls Christmas Parade					
To Whom Paid			мо	DAY	YEAR			
Freedom Area Drama Club			MO	DAI	ILAK			
Mailing Address 1190 Bulldog Drive			12	28	2016	\$	75.00	
City Freedom	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l		
	PA	15042	Ad					
To Whom Paid			МС	DAY	YEAR			
Lawrence County Chamber of Commerce			МО	DAT	TEAK			
Mailing Address 138 W. Washington Street			12	28	2016	\$	100.00	
City New Castle	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	16101	Membership dues					
	<del></del>		-					

To Whom Paid				DAY	YEAR		
Butler County Chamber of Commerce					ILAK		
Mailing Address 101 E. Diamond Street, Suite 116			12	28	2016	\$	350.00
City Butler	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	16003	Membership dues				
To Whom Paid				DAY	YEAR		
Beaver County United Way			МО				
Mailing Address 3582 Brodhead Road, Suite 205			12	28	2016	\$	100.00
City Monaca	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	15061	Donation				
To Whom Paid				DAY	YEAR		
Marquis Strategies LLC			МО		ILAK		
Mailing Address PO Box 2	262		12	28	2016	\$	2,264.34
<b>City</b> Beaver	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	15009	Consult	ing			
							PAGE TOTAL
Enter Grand Total of Expe	enditures on Page 1, Rep	oort Cover Page, Item D	•			\$	3,048.49