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 201	60278				port ed B		CAN	IDII	DIDATE COMMITTEE LOBBYIST								
Name of Filing C	Committee, Candi	date or L	obbyist:		PA (CAMI	PGRO	UND	OWI	NERS	PAC (PCOA I	PAC)					
Street Address: 200 NORTH THIRD STREET, SUITE 1500																		
City: HARRISBURG State: PA								Zip Cod	le: 17	7101								
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	-	2.	30 DA PRIMA		Р	OST-	3.		AMENDM REPORT?	Yes]	No	\	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA		E-	5.	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	1	No	\
report type)	ANNUAL REPOR	7. X	Year 2016	5				CHECK					PAPER		\	DIS	SKETTE	
Name of Office S	Sought by Candid	ate:			_			DATE	E O	F ELE	CTIO	N	District Number	Office Code	Pa	rty C	ode Co	
	,							МО		DAY	YE	AR	Number	code			100	
									11		8	2016		(SEE IN	STRUCT	IONS I	OR CODE	ES)
	Receipts and	МО	DAY	YEAR	2			МО		DAY	YE	AR	FO	R OFFI	CE USI	ON	LY	
Expenditures	from:		11 29	9 2	016	T	0		12	Š	31	2016						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$					0.00						
B. Total Monet	ary Contributions	And Rec	eipts (Fro	m Sche	edule	e I)	\$				3,2	200.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 3,200.00																		
D. Total Expenditures (From Schedule III) \$ 191.86																		
E. Ending Cash Balance (Subtract Line D From Line C)							\$				3,0	08.14						
F. Value Of In-	Kind Contribution	ns Receiv	ed (From s	Schedu	le II	I)	\$					0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule I	V)			\$					0.00						
				AFF	FID/	AVI	ΓSE	CTIO	N									
PART I - If this is	s a Committee re	port, trea	surer sign	here.	If th	nis is	a Car	ndidate	e re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached s	chedule	s file	d on p	paper (or by e	lectr	onic m	edium	, are to t	he best of	my kno	wledge	and	belief ,	true
Sworn to and subs	cribed before me th day of	is	20								s	ignature	of Persoi	n Submit	ting Re	port		_
	Signat	ure	_				• •						Print	ted Name	e			-
My Commission Ex	pires								-				Emai	I				_
	мо	D	AY	YR						Are	ea Cod	le	Daytim	e Teleph	one N	ımbe	r	
Part II- If this is	a report of a car	ndidate's	authorize	d Comr	nitte	ee, Ca	andid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and be	lief this	s poli	tical	comm	ittee ha	as no	ot viola	ted an	y provisi	ions of the	e act of J	une 3,1	937	(P.L. 13	33,
Sworn to and subsc		5										Si	ignature o	f Candid	ate			-
	day of						-						Printe	d Name				_
	Signature	1					-											
My Commission Exp	ires												Emai	I				
	МО	D	AY	YR	2		•			Area	Code		Da	ytime T	elepho	ne Nı	ımber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period				
PA CAMPGROUND OWNERS PAC (PCOA PAC)	COA PAC) From: <u>11/29/2</u>				
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor					
TOTAL for the Reporting) Period	(1)	\$	50.00	
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)			\$	3,150.00	
TOTAL for the Reporting) Period	(2)	\$	3,150.00	
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			\$	3,200.00	

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			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

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 P	eporting Period						
PA CAMPGROUND OWNERS PAC ((PCOA PAC)		From:	11/29/	2016 T o	<u>12/31/2016</u>				
		I		DATE		AMOUNT				
Full Name of Contributor COURNOYER, RAYMOND			мо	DAY	YEAR					
Mailing Address 11 CROLL RD						\$ 150.00				
City ZION GROVE	State PA	Zip Code (Plus 4) 17985	12	12 12						
Full Name of Contributor FRANKS, ALICE M.			МО	DAY	YEAR					
Mailing Address 277 E 3RD AVE City TRAPPE	State PA	Zip Code (Plus 4) 19426	12	12	2016	\$ 150.00				
Full Name of Contributor LAIRD, SR., WILLIAM K.			МО	DAY	YEAR					
Mailing Address 230 SOUTH 101	TH ST STE C					\$ 150.00				
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	12	12	2016					
Full Name of Contributor ROHLF, JOHN H			МО	DAY	YEAR					
Mailing Address 315 NELSON RE City FARMINGTON	State PA	Zip Code (Plus 4) 15437	12	12	2016	\$ 150.00				
Full Name of Contributor SCHRADER, STEVEN A.			МО	DAY	YEAR					
Mailing Address 236 KENDALLW	OOD RD			12	2016	\$ 150.00				

				PAGE 5	
Full Name of Contributor SHEAFFER, JASON M.	МО	DAY	YEAR		
Mailing Address 2786 CAMP RD				\$ 15	50.00
City MANHEIM State PA 17545	12	12	2016		
Full Name of Contributor VAUGHAN, JASON S	МО	DAY	YEAR		
Mailing Address RR 2 BOX 2190				\$ 15	50.00
City EAST STROUDSBURG State PA 18301	12	12	2016		
Full Name of Contributor WRIGHT, SANDRA	мо	DAY	YEAR		
Mailing Address 1172 ROVER RD P O BOX 118				\$ 15	50.00
City SAXTON State Zip Code (Plus 4) PA 16678	12	12	2016		
Full Name of Contributor YEAGER, DEBBY	МО	DAY	YEAR		
	МО	DAY	YEAR	\$ 15	50.00
YEAGER, DEBBY	мо 12	DAY 12	YEAR 2016	\$ 15	50.00
YEAGER, DEBBY Mailing Address 314 ROSE POINT RD City NEW CASTLE State Zip Code (Plus 4)		12		\$ 15	50.00
YEAGER, DEBBY Mailing Address 314 ROSE POINT RD City NEW CASTLE State PA 2ip Code (Plus 4) 16101 Full Name of Contributor	12	12	2016		50.00
YEAGER, DEBBY Mailing Address 314 ROSE POINT RD City NEW CASTLE State PA 16101 Full Name of Contributor BROWN, RONALD P	12	12	2016		
YEAGER, DEBBY Mailing Address 314 ROSE POINT RD City NEW CASTLE State PA 16101 Full Name of Contributor BROWN, RONALD P Mailing Address 213 ASPEN LANE City NORTHUMBERLAND State Zip Code (Plus 4) Zip Code (Plus 4)	12	12	2016 YEAR		
YEAGER, DEBBY Mailing Address 314 ROSE POINT RD City NEW CASTLE State PA 16101 Full Name of Contributor BROWN, RONALD P Mailing Address 213 ASPEN LANE City NORTHUMBERLAND State PA 2ip Code (Plus 4) 17857 Full Name of Contributor	12	12 DAY	2016 YEAR 2016	\$ 15	

Full Name of Contributor O'HORA, MARTIN J	мо	DAY	YEAR	
Mailing Address 150 MARTYS MAIN ST				
- IJUMAN CITAMN UCI		19	2016	\$ 150.00
City LAKE ARIEL State Zip Code (Plus 4) PA 18436			2010	
PA 18436				
Full Name of Contributor PAONE, MARK S	МО	DAY	YEAR	
Mailing Address 787 TANGLEWOOD RD				\$ 150.00
City COVINGTON State Zip Code (Plus 4)	12	19	2016	
PA 16917				
Full Name of Contributor TAVIANINI JR., JOSEPH	МО	DAY	YEAR	
Mailing Address 2375 RENDERS DR				\$ 150.00
2375 BENDERS DR				
City BATH State Zip Code (Plus 4)	12	19	2016	
State Zin Code (Plus 4)	12	19	2016	
City BATH State Zip Code (Plus 4)	12	DAY	2016 YEAR	
City BATH State Zip Code (Plus 4) 18014 Full Name of Contributor				\$ 150.00
City BATH State Zip Code (Plus 4) PA 18014 Full Name of Contributor TWIN BRIDGE CAMPGROUND				\$ 150.00
City BATH State Zip Code (Plus 4) 18014 Full Name of Contributor TWIN BRIDGE CAMPGROUND Mailing Address 6711 VALLEY CAMP RD	МО	DAY	YEAR	\$ 150.00
City BATH State PA	МО	DAY 19	YEAR	\$ 150.00
City BATH Full Name of Contributor TWIN BRIDGE CAMPGROUND Mailing Address 6711 VALLEY CAMP RD City GREENCASTLE State Zip Code (Plus 4) 18014 Zip Code (Plus 4) 18014 Zip Code (Plus 4) 17225	мо — 12	DAY 19	YEAR 2016	\$ 150.00 \$ 150.00
City BATH State PA 18014 Full Name of Contributor TWIN BRIDGE CAMPGROUND Mailing Address 6711 VALLEY CAMP RD City GREENCASTLE State PA 17225 Full Name of Contributor UNIONTOWN KOA AT RIVERS EDGE	мо — 12	DAY 19	YEAR 2016	
City BATH Full Name of Contributor TWIN BRIDGE CAMPGROUND Mailing Address 6711 VALLEY CAMP RD City GREENCASTLE State Zip Code (Plus 4) 17225 Full Name of Contributor UNIONTOWN KOA AT RIVERS EDGE Mailing Address 1101 RIVERSEDGE RD	мо — 12	DAY 19	YEAR 2016 YEAR	
City BATH State PA	мо — 12	DAY 19	YEAR 2016 YEAR	
City BATH Full Name of Contributor TWIN BRIDGE CAMPGROUND Mailing Address 6711 VALLEY CAMP RD City GREENCASTLE State Zip Code (Plus 4) 17225 Full Name of Contributor UNIONTOWN KOA AT RIVERS EDGE Mailing Address 1101 RIVERSEDGE RD City CONNELLSVILLE State Zip Code (Plus 4) 17225 Full Name of Contributor UNIONTOWN KOA AT RIVERS EDGE Mailing Address 1101 RIVERSEDGE RD Full Name of Contributor	MO 12	DAY 19	YEAR 2016	
City BATH Full Name of Contributor TWIN BRIDGE CAMPGROUND Mailing Address 6711 VALLEY CAMP RD City GREENCASTLE State Zip Code (Plus 4) 17225 Full Name of Contributor UNIONTOWN KOA AT RIVERS EDGE Mailing Address 1101 RIVERSEDGE RD City CONNELLSVILLE State Zip Code (Plus 4) 17225 Full Name of Contributor UNIONTOWN KOA AT RIVERS EDGE Full Name of Contributor UNIONTOWN KOA AT RIVERSEDGE RD City CONNELLSVILLE State Zip Code (Plus 4) 15425 Full Name of Contributor UNTERBERGER, FRANK	MO 12	DAY 19	YEAR 2016	\$ 150.00

Full Name of Contributor WRIGHT, NELLIE			мо	DAY	YEAR	
Mailing Address 2381 PLANK RD	[a		12	19	2016	\$ 150.00
City DUNCANSVILLE	State PA	Zip Code (Plus 4) 16635				
Full Name of Contributor SHADY GROVE CAMPGROUND			МО	DAY	YEAR	
Mailing Address 65 POPLAR DRIVE						\$ 150.00
City DENVER	State PA	Zip Code (Plus 4) 17517	12	29	2016	
Full Name of Contributor WILDWOOD FAMILY CAMPGROUND LLC			МО	DAY	YEAR	
Mailing Address 1901 LUXEMBURG	RD					\$ 150.00
City LYKENS	State PA	Zip Code (Plus 4) 17048	12	29	2016	
Full Name of Contributor WORK, RANDALL E			МО	DAY	YEAR	
Mailing Address DO BOY 01						
P O BOX 91			12	29	2016	\$ 150.00

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

PAGE TOTAL \$ 3,150.00

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 Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	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 Re				Reporting Period					
Fro					From: To:				
				D	ATE		АМО	DUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plu	s 4)						
Employer Name				Occupat	tion				
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PAG	GE 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 Car	Name of Filing Committee or Candidate			Reporting Period						
			From:			To:				
				D	ATE		A	MOUNT		
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 T. Detailed	d Summary Page	Section	4			P	AGE TOTAL		
	2, 200 0000		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 Peri	od	
PA CAMPGROUND OWNERS PAC (PCOA PAC)	From:	<u>11/29/2016</u> To:	<u>12/31/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR	1	
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 Candidate			Reporting Period					
Fr				From: To:				
				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	odulo II. In Vir	d Contributions Data	ilad Sum	mary Dag			DAGE TOTAL	
Section 2.	edule II, III-KIN	iu Contributions Deta	ilieu Sum	шагу Рас	je,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period								
					Fro	m:		То	:			
							DATE				AMOUNT	
Full Name of Contributor						мо	DAY	YEAR	1			
Mailing Address										\$		0.00
City	State		Zip Code(F	Plus 4)								
Employer of Contributor					Occupation							
Employer Mailing Address/Principal Place of Business		City	ity State			Zip Code(Plus 4)		Desc	Description of Contribution			
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed							PAGE TOTAL					
Summary Page, Section 3.						0.00						

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period					
PA CAMPGROUND OWNERS PAC (PCOA PAC)	From	11/29/2016	То:	<u>12/31/2016</u>		
	DATE AM			AMOUNT		

				DATE	AMOUNT		
To Whom Paid SAFEGUARD/SANDERS & amp; ASSOCIATES				DAY	YEAR		
Mailing Address 3110 E MARKET STREET			12	23	2016	\$	191.86
City YORK	State PA	Zip Code (Plus 4) 17402	Description of Expenditure CHECK STOCK/DEPOSIT SLIPS				
Enter Grand Total of Exp	\$	PAGE TOTAL 191.86					