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 2017	70119				port ed B		CANDI	DATE		СОМ	4ITTEE	✓	LOBI	BYIST	
Name of Filing C	Committee, Candid	late or L	obbyist:	•	GRE	EAT /	AMER	ICAN PEI	NNSYL	/ANI	A FUND)				
Street Address:	552 ELKNUD	LANE														
City:	JOHNSTOWN							State:	PA			Zip Cod	ie: 1!	5905		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDMENT REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	<u>-</u>	5.	30 DA ELECT		POST-	6. X		TERMINATION REPORT?		Yes	No	\
report type)	ANNUAL REPORT	7.	Year 2017					IG METHO				PAPER DIS			DISKE	TTE
Name of Office S	Sought by Candida	ite:	-					DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
								МО	DAY	YE	AR	- rumber	Todac			Couc
								11		7	2017		(SEE IN	ISTRUCTI	ONS FOR O	ODES)
•	Receipts and	МО	DAY	YEAR	2			МО	DAY	YE	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures	irom:		10 24	2	017	' T	<u> </u>	11	. :	27	2017					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			168,4	167.00					
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$			250,0	00.00					
C. Total Funds Available (Sum Of Lines A and B)					\$,	418,4	167.00							
D. Total Expenditures (From Schedule III) \$ 25,500.0					500.00											
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$		392,967.00							
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sc	hedu	le II	I)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			1		
				AFF	IDA	AVI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere. I	If th	nis is	a Can	ididate r	eport, d	andi	date sig	ın here.				
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached sch	edules	s file	ed on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , true
Sworn to and subs	cribed before me thi day of	s	20							s	ignature	of Perso	n Submit	ting Rep	ort	
	Signatu	ire	_				-					Prin	ted Nam	e		
My Commission Ex	cpires						_					Ema	il			
	мо	D	AY	YR					Arc	ea Cod	le	Daytim	e Telepi	none Nu	mber	
Part II- If this is	a report of a can	didate's	authorized (Comn	nitte	ee, C	andida	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of e	ny knowl	edge and belie	f this	poli	itical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this day of		20								s	ignature o	of Candid	ate		
							-					Printe	d Name			
My Commission Exp	Signature						-					Ema	il			
·																
	МО	D	AY	YR					Area	Code		Da	aytime T	elephor	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

betailed Sammary 1 age									
Name of Filing Committee or Candidate	Reporting	Period							
GREAT AMERICAN PENNSYLVANIA FUND	From:	10/24/201	<u>.7</u> To:	11/27/2017					
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)			\$	250,000.00					
TOTAL for the Reporting	Period	(3)	\$	250,000.00					
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	250,000.00					

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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 or Candi	date		Re _l Fro	oorting P m:	eriod	To	o:	
					DATE			AMOUNT
Full Name of Contributor				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

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 Scho	edule 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				Rep	orting Pe	riod			
GREAT AMERICAN PENNSYLVANIA FUI	ND			Fror	m:	10/24/2	<u>017</u> To	: <u>11/2</u>	<u>7/2017</u>
					D/	ATE		AMOUN'	г
Full Name of Contributor JOSEPHINE TEMPLETON					мо	DAY	YEAR		
Mailing 601 PEMBROKE ROAL	_				11	17	2017	\$ 2	50,000.00
City BRYN MAWR	State PA		p Code (Plus 9010	s 4)	11	17	2017		
Employer Name RETIRED					Occupat	ion			
Employer Mailing Address/Principal Plac Business	ce of		City			State		Zip Code (Plu	s 4)
Enter Grand Total of Part C on Sche	dule I, Deta	iled Sumr	mary Page,	Section	on 3.		4	PAGE T 250,	OTAL 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	Candidate		Report	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	E TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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	
GREAT AMERICAN PENNSYLVANIA FUND	From:	<u>10/24/2017</u> To:	11/27/2017
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	र	
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 Candid	late		Reportin	g Period			
			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 S	Schedule II. In-Kir	nd Contributions Deta	iled Sum	mary Pag	ae. F		PAGE TOTAL
Section 2.				,;	,-,	\$	
1						Ψ	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

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate		Reporti	ng Period			
GREAT AMERICAN PENNSYLV	ANIA FUND		From	10/2	4/2017	То:	11/27/2017
				DATE	AMOUNT		
To Whom Paid FRIENDS OF KRISTEN PHILLIP	S HILL		МО	DAY	YEAR		
Mailing Address PO BOX 14	9		10	28	2017	\$	2,500.00
City JACOBUS	State PA	Zip Code (Plus 4) 17407	Description of Expenditure CAMPAIGN CONTRIBUTION				
To Whom Paid JERRY MORGAN			МО	DAY	YEAR		
Mailing Address 141 VILLAG	GE COURT		11	7	2017	\$	10,000.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15241	Description of Expenditure PARTY BUILDING				
To Whom Paid CAMBRIA COUNTY REPUBLICA	N COMMITTEE		мо	DAY	YEAR		
Mailing Address 1222 SCAL	P AVENUE		11	9	2017	\$ \$	5,000.00
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15904		ption of Exp BUILDING		<u>.</u>	
To Whom Paid WATERFORD SOLUTIONS, LLC			МО	DAY	YEAR		
Mailing Address 552 ELKNU	D LANE		11	10	2017	\$	5,000.00
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15905		ption of Exp OMINISTRA		<u>.</u>	
To Whom Paid 31ST WARD REPUBLICAN COM	IMITTEE	•	МО	DAY	YEAR		
Mailing Address 2520 EDGEMONT STREET				10	2017	- \$	500.00

Zip Code (Plus 4)

19125

City

PHILADELPHIA

State

PΑ

Description of Expenditure

CONTRIBUTION

							PAGE 12		
m Paid MAN FOR JUDGE			мо	DAY	YEAR				
Address PO BOX 431			9	27	2017	\$	2,500.00		
HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure						
					CAMPAIGN CONTRIBUTION				
							PAGE TOTAL		
Grand Total of Expend	litures on Page 1, Re	port Cover Page, Item D	•			\$	25,500.00		
	MAN FOR JUDGE Address PO BOX 431 HARRISBURG	Address PO BOX 431 HARRISBURG State PA	Address PO BOX 431 HARRISBURG State Zip Code (Plus 4) PA 17108	MAN FOR JUDGE Address PO BOX 431 HARRISBURG State Zip Code (Plus 4) Descrip	MAN FOR JUDGE Address PO BOX 431 9 27 HARRISBURG State Zip Code (Plus 4) Description of Exp PA 17108 CAMPAIGN CONT	MAN FOR JUDGE Address PO BOX 431 HARRISBURG State Zip Code (Plus 4) PA 17108 Description of Expenditure CAMPAIGN CONTRIBUTION	MO DAY YEAR Address PO BOX 431 HARRISBURG State PA 17108 PA 17108		