### **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	20160	)278			Rep File			CANDI	NDIDATE COMMITTEE V LOBBYIST							
Name of Filing C	Committee, C	andida	ite or Lo	obbyist:		PA C	CAM	PGRO	UND OW	NERS	PAC (	PCOA	PAC)				
Street Address:	200 NOF	RTH TH	HIRD ST	REET,SUIT	E 150	00											
City:	HARRIS	BURG							State:	PA			Zip Cod	de: 1	7101		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRIDAY PRIMARY	/ PRE	- 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTIO		4.	2ND FRIDAY ELECTION	/ PRE	- 5	5.	30 DA ELECT		POST-	6.		TERMIN/ REPORT		Yes	No	<b>~</b>
report type)	ANNUAL RE	PORT	7. <b>X</b>	<b>Year</b> 2017					IG METHO				PAPER		<b>/</b>	DISKE	TTE
Name of Office S	- Sought by Ca	ndidate	e:						DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
									МО	DAY	YE	AR		10000			
									11		7	2017		(SEE IN	STRUCTI	ONS FOR (	CODES)
Summary of Expenditures		nd	МО	DAY	YEAR		_	_	МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY	
-				.1 28	2	017		<u>о</u>	12		31	2017	ļ				
A. Amount Bro				-				\$				008.14					
B. Total Monet	ary Contribut	tions A	and Rece	eipts (From	Sche	dule	I)	\$			1,,	723.00					
C. Total Funds	Available (Si	um Of	Lines A	and B)				\$			4,7	731.14					
D. Total Expen	ditures (Fron	m Sche	dule III	(1)				\$			2,7	00.00					
E. Ending Cash	Balance (Su	btract	Line D	From Line (	<b>C)</b>			\$			2,0	31.14					
F. Value Of In-	Kind Contrib	utions	Receive	ed (From So	hedu	le II	)	\$				0.00					
G. Unpaid Debt	s And Obliga	ations (	(From S	chedule IV	)			\$				0.00			'		
					AFF	IDA	\VI	T SE	CTION								
PART I - If this is	s a Committe	ee repo	rt, treas	surer sign l	nere. I	[f thi	is is	a Can	didate re	eport, o	andi	date sig	jn here.				
I swear (or affirm) correct and complete		ort, inclu	ıding the	attached sch	edules	filed	l on	paper o	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and beli	ef , true
Sworn to and subs	cribed before i	me this		20							s	ignature	of Perso	n Submit	ting Rep	ort	
								-					Prin	ted Nam	<u> </u>		
My Commission Ex		Signatur	e										Ema				
	мо		DA	ΛΥ	YR			-		Are	ea Cod	le		ie Telepl	none Nu	mber	
Part II- If this is	a report of a	a candi	idate's a	authorized	Comn	nitte	e, C	andida	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the be						•			_		y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before m	ne this										s	ignature o	of Candid	ate		
	day of ——							_					B	.d N			
	Sian	ature						-					Printe	d Name			
My Commission Exp	_	.acar C											Ema	il			
	M	10	DA	ΛΥ	YR			•		Area	Code		D	aytime T	elephor	ne Numb	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
PA CAMPGROUND OWNERS PAC (PCOA PAC)	From:	11/28/202	<u>17</u> To:	12/31/2017
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	830.00
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)			\$	893.00
TOTAL for the Reporting	(2)	\$	893.00	
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
			T	
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			\$	1,723.00

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

PAGE TOTAL
0.00

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

## 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 Cand	ame of Filing Committee or Candidate			eriod		
PA CAMPGROUND OWNERS PAC	(PCOA PAC)		From:	11/28/	2017 <b>T</b> o	o: <u>12/31/2017</u>
				DATE		AMOUNT
Full Name of Contributor GEORGE, ELAINE			МО	DAY	YEAR	
Mailing Address 1639 57 DRIVE	=					\$ 58.0
City PALMERTON	<b>State</b> PA	<b>Zip Code (Plus 4</b> 18071	5	24	2017	
Full Name of Contributor KESTERKE, JAMES			МО	DAY	YEAR	
Mailing Address 1639 MARSHAI	LLS CREEK RD					\$ 80.0
City EAST STROUDSBURG	<b>State</b> PA	<b>Zip Code (Plus 4</b> 18302	5	24	2017	
Full Name of Contributor VAUGHAN, JASON S			МО	DAY	YEAR	
Mailing Address RR 2 BOX 219	0					\$ 80.0
City EAST STROUDSBURG	<b>State</b> PA	<b>Zip Code (Plus 4</b> 18301	5	24	2017	
Full Name of Contributor CLAYTON, MARK		-	МО	DAY	YEAR	
Mailing Address 2489 W. LIZAR	RD CREEK RD					\$ 100.0
City LEHIGHTON	<b>State</b> PA	<b>Zip Code (Plus 4</b> 18235	5	24	2017	
Full Name of Contributor MAY, MATTHEW			МО	DAY	YEAR	
Mailing Address 6300 STERRET	TANIA RD					\$ 100.0
<b>City</b> FAIRVIEW	<b>State</b> PA	<b>Zip Code (Plus 4</b> 16415	3	29	2017	
Full Name of Contributor UNTERBERGER, FRANK			МО	DAY	YEAR	
Mailing Address 1639 MARSHAI	LLS CREED RD					\$ 100.0
City EAST STROUDSBURG	<b>State</b> PA	Zip Code (Plus 4 18302	5	24	2017	

Full Name of Contributor			мо	DAY	YEAR		
ADAMS, ROBERT H				J			
Mailing Address 2030 FAIR	FIELD RD					<b>\$</b> 15	0.00
City GETTYBURG	State	Zip Code (Plus 4)	2	1	2017		
	PA	17325					
			•	•			
Full Name of Contributor	·	<u> </u>	МО	DAY	VEAD		
Full Name of Contributor STONEYBROOK ESTATES LLC			МО	DAY	YEAR		
STONEYBROOK ESTATES LLC	ROOKE CIRCLE	•	МО	DAY	YEAR	\$ 22	5.00
STONEYBROOK ESTATES LLC	ROOKE CIRCLE State	Zip Code (Plus 4)	<b>MO</b> 3	<b>DAY</b> 30	<b>YEAR</b> 2017	\$ 22	5.00

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

**PAGE TOTAL \$** 893.00

#### **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	ime of Filing Committee or Candidate		Reporting Period						
			From:			То:			
				DA	TE		A	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							<b>-</b>   \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOT	AL
Enter Grand Total of Part C on Scheo	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	1			Repo	orting Pe	riod			
				Fron	n:		To	o:	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address								7	
City	State	Zip Code (F	lus 4	1)					
Employer Name	•	I			Occupa	tion	•	•	
Employer Mailing Address/Principal Pla	ace of Business	City		,		State		Zip C	ode (Plus 4)
Enter Grand Total of Part C on Scho	edule I, Detailed S	ummary Pag	ge, S	ectio	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:			To:		
		•		C	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	<b>.</b>	•		•	•	•	_	
Enton Cuand Total of David	E on Cohodulo I Detailed	Summany Dazz	Costis :-	4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page,	Section	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 Peri	od	
PA CAMPGROUND OWNERS PAC (PCOA PAC)	From:	<u>11/28/2017</u> <b>To:</b>	12/31/2017
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR	2	
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 Candi	idate		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 on	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	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				Re	porting	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	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	Stat	e Zip	Code(Plus 4)	Desci	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.	<b></b>									0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting I	Period		
PA CAMPGROUND OWNERS PAC (PCOA PAC)	From	11/28/2017	То:	12/31/2017

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
COMM. TO ELECT DAVID MILLARD			1.13				
Mailing Address P O BOX 412			6	6	2017	\$	250.00
City HARRISUBRG	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17108					
To Whom Paid			мо	DAY	YEAR		
PEOPLE FOR MATZIE							
Mailing Address 315 WILSON AV	'ENUE		6	6	2017	\$	250.00
City AMBRIDGE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15003					
To Whom Paid			мо	DAY	YEAR		
FRIENDS OF MARK LONGIETTI			М		ILAK		
Mailing Address 3660 CLEARVIE	W DRIVE		6	6	2017	\$	250.00
City HERMITAGE	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	16148					
To Whom Paid			мо	DAY	YEAR		
CHRIS QUINN			МО	DAI	ILAK		
Mailing Address 323 WEST FRONT ST			7	27	2017	\$	250.00
City MEDIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19603					
To Whom Paid			мо	DAY	YEAR		
FRIENDS OF JONATHAN FRITZ			1-10		i Zaux		
Mailing Address PO BOX 213			10	19	2017	\$	250.00
City WHITE MILLS	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	18473					
To Whom Paid			МО	DAY	YEAR		
FRIENDS OF JUDY WARD			МО		ILAK		
Mailing Address 3421 SYLVAN HEIGHTS DR			10	19	2017	\$	250.00
City HOLLIDAYSBURG	Zip Code (Plus 4)	Description of Expenditure					
	PA	16648					
			-				

TO NOTION TO NOTICE TO NO									
Mailing   Address   36 E NORTHAMP  State   PA   100   190   2017   \$ 300.000	To Whom Paid			MO	DAY	VEAD			
State   PA	FRIENDS OF MARCIA HAHN			МО	DAT	ILAK			
PA   18014   PA   18014   PA   PA   PA   PA   PA   PA   PA   P	Mailing Address 136 E NORTHAMPTON			10	19	2017	\$	300.00	
To Whom Paid   COMMITTEE TO ELECT JIM BREWSTER   Mo   DAY   YEAR   State   Zip Code (Plus 4)   PA   State   PA   State   PA   PA   PA   PA   PA   PA   PA   P	City BATH State Zip Code (Plus 4)			Description of Expenditure					
Mode		PA	18014						
COMMITTEE TO ELECT JIM BREWSTER         State PAGE TOTAL         State PAGE TOTAL         211 29 2017         \$ 300.00           City MCKEESPORT         State PAGE TOTAL         State PAGE TOTAL         State PAGE TOTAL         Description of Expenditure           TO Whom Paid TIM BREWSTER FEP.         Mailing Address PO BOX 62193         State PAGE TOTAL         Zip Code (Plus 4) PA         Description of Expenditure           TO Whom Paid PAUL COSTA FOR STATE REP         Mailing Address PAGE STATE REP         Mo DAY YEAR         YEAR         May 300.00           TO WHOM PAID PAGE TOTAL         TOTAL         Description of Expenditure         PAGE TOTAL           TO WHOM PAID PAGE TOTAL         TO WHOM PAID PAGE TOTAL         May 100.00         PAGE TOTAL	To Whom Paid				DAY	VEAD			
City         MCKEESPORT         State PA         Zip Code (Plus 4) 15132         Description of Expenditure           To Whom Paid TIM BRIGGS FOR STATE REP.         MO DAY YEAR           Mailing Address         PO BOX 62193         11         29         2017         \$ 300.00           City         KING OF PRUSSIA         State PA         Zip Code (Plus 4)         Description of Expenditure           To Whom Paid PAUL COSTA FOR STATE REP         MO DAY YEAR         YEAR         300.00           Mailing Address         526 LUCIA DRIVE         Lip Code (Plus 4)         Description of Expenditure           City         PITTSBURGH         State PA         Zip Code (Plus 4)         Description of Expenditure           PAGE TOTAL	COMMITTEE TO ELECT JIM BREWSTER			МО	DAY	YEAK			
TO Whom Paid   TIM BRIGGS FOR STATE REP.   MO   DAY   YEAR   State   PA   PA   PA   PA   PA   PA   PA   P	Mailing Address 455 29TH STREET			11	29	2017	\$	300.00	
To Whom Paid  TIM BRIGGS FOR STATE REP.  Mailing Address PO BOX 62193  City KING OF PRUSSIA  State PA  11 29 2017  State PA  19406  To Whom Paid PAUL COSTA FOR STATE REP  Mo DAY  YEAR  Mo DAY  YEAR  PA  300.00  PAY  YEAR  MO DAY  YEAR  PA  300.00  State PA  19406  To Whom Paid PAUL COSTA FOR STATE REP  Mo DAY  YEAR  PA  300.00  To Whom Paid PAIL PAR  PAGE TOTAL  PAGE TOTAL	City MCKEESPORT State Zip Code (Plus 4) Description of					enditure			
Mo		PA	15132						
Mailing   Address   PO BOX 62193   State   Zip Code (Plus 4)   11   29   2017   \$ 300.00	To Whom Paid			MO	DAY	VEAD			
City KING OF PRUSSIA  State PA 19406  To Whom Paid PAUL COSTA FOR STATE REP  Mailing Address 526 LUCIA DRIVE  State PA 15221  Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.  State PA 19406  Zip Code (Plus 4) Description of Expenditure  MO DAY YEAR  11 29 2017 \$ 300.00  PAGE TOTAL	TIM BRIGGS FOR STATE REP.			MO	DAT	TEAR			
PA	Mailing Address PO BOX 62193			11	29	2017	\$	300.00	
To Whom Paid PAUL COSTA FOR STATE REP  Mo DAY  YEAR  Mo DAY  YEAR  11 29 2017  \$ 300.00  City PITTSBURGH PA  State PA  15221  PAGE TOTAL	City KING OF PRUSSIA State Zip Code (Plus 4) Description of				tion of Exp	enditure			
PAUL COSTA FOR STATE REP  Mo DAY YEAR  Mailing Address 526 LUCIA DRIVE  11 29 2017 \$ 300.00  City PITTSBURGH State PA  PA 15221  PAGE TOTAL		PA	19406						
PAUL COSTA FOR STATE REP  Mailing Address 526 LUCIA DRIVE  State PAUL COSTA FOR STATE REP  State PAUL COSTA FOR STATE REP  State PAUL COSTA FOR STATE REP  State State PAUL COSTA FOR STATE REP  State PAUL COSTA FOR STATE REP  State PAUL COSTA FOR STATE REP  State State PAUL COSTA FOR STATE REP  State PAUL COSTA FOR STATE REP  State State PAUL COSTA FOR STATE REP  STATE PAUL COSTA FOR	To Whom Paid			MO	DAY	VEAD			
City PITTSBURGH State 2ip Code (Plus 4) Description of Expenditure  PA 15221  PAGE TOTAL  PAGE TOTAL	PAUL COSTA FOR STATE REP				DAT	TEAR			
PA 15221  PAGE TOTAL  Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	Mailing Address 526 LUCIA DRIVE			11	29	2017	\$	300.00	
PAGE TOTAL Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	City PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.		PA	15221						
								PAGE TOTAL	
	Enter Grand Total of Expenditures o	on Page 1, Report C	over Page, Item D.	•			\$	2,700.00	