### **Campaign Finance Report**

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

| Filer Identificati<br>Number :           | on 9600                         | 102        |                        |       | Rep<br>File | port<br>ed B |                | CANDI       | DATE     |             | СОМ        | 4ITTEE             | ✓              | LOBI          | BYIST     |          |              |
|--|---------------------------------|------------|------------------------|-------|-------------|--------------|----------------|-------------|----------|-------------|------------|--------------------|----------------|---------------|-----------|----------|--------------|
| Name of Filing C                         | Committee, Candid               | ate or L   | obbyist:               |       | BEN         | ININ         | GHOF           | F FOR R     | EPRES    | ENTA        | TIVE       |                    |                |               |           |          |              |
| Street Address:                          | 328 E. LAMB                     | ST.        |                        |       |             |              |                |             |          |             |            |                    |                |               |           |          |              |
| City:                                    | BELLEFONTE                      |            |                        |       |             |              |                | State:      | PA       |             |            | Zip Cod            | le: 16         | 5823          |           |          |              |
| TYPE OF<br>REPORT                        | 6TH TUESDAY<br>PRE-PRIMARY      | 1.         | 2ND FRIDAY<br>PRIMARY  | PRE-  | - 2         | 2.           | 30 DA<br>PRIMA |             | POST-    | 3. <b>X</b> |            | AMENDM<br>REPORT   |                | Yes           | No        | •        | <b>/</b>     |
| (place X to<br>the right of              | 6TH TUESDAY<br>PRE-ELECTION     | 4.         | 2ND FRIDAY<br>ELECTION | PRE   | - 5         | 5.           | 30 DA<br>ELECT |             | POST-    | 6.          |            | TERMINA<br>REPORT  |                | Yes           | No        | •        | <b>/</b>     |
| report type)                             | ANNUAL REPORT                   | 7.         | <b>Year</b> 2018       |       |             |              |                | IG METHO    |          |             |            | PAPER              |                | $\overline{}$ | DISKE     | TTE      |              |
| Name of Office S                         | Sought by Candida               | te:        | -                      |       |             |              |                | DATE 0      | F ELE    | CTIO        | N          | District<br>Number | Office<br>Code | Par           | ty Code   | Coun     | ty           |
|  | ,                               |            |                        |       |             |              |                | МО          | DAY      | YE          | AR         | Number             | coue           | <u> </u>      |           | couc     |              |
|  |                                 |            |                        |       |             |              |                | 11          |          | 6           | 2018       |                    | (SEE IN        | STRUCTI       | ONS FOR C | ODES)    |              |
|  | Receipts and                    | МО         | DAY Y                  | EAR   |             |              |                | МО          | DAY      | YE          | AR         | FO                 | R OFFI         | CE USE        | ONLY      |          |              |
| Expenditures                             | s trom:                         |            | 5 1                    | 20    | 018         | Т            | 0              | 6           | 5        | 4           | 2018       |                    |                |               |           |          |              |
| A. Amount Bro                            | ught Forward Fro                | n Last R   | eport                  |       |             |              | \$             |             |          | 41,3        | 868.48     |                    |                |               |           |          |              |
| B. Total Monet                           | ary Contributions               | And Rec    | eipts (From S          | che   | dule        | ı)           | \$             |             |          | 52,7        | 750.00     |                    |                |               |           |          |              |
| C. Total Funds                           | Available (Sum O                | f Lines A  | and B)                 |       |             |              | \$             |             |          | 94,1        | 18.48      |                    |                |               |           |          |              |
| D. Total Expend                          | ditures (From Sch               | edule II   | I)                     |       |             |              | \$             |             |          | 22,1        | 78.23      |                    |                |               |           |          |              |
| E. Ending Cash                           | Balance (Subtrac                | t Line D   | From Line C)           |       |             |              | \$             |             |          | 71,9        | 40.25      |                    |                |               |           |          |              |
| F. Value Of In-                          | Kind Contribution               | s Receiv   | ed (From Sch           | edul  | e II        | ()           | \$             |             |          |             | 0.00       |                    |                |               |           |          |              |
| G. Unpaid Debt                           | ts And Obligations              | (From S    | Schedule IV)           |       |             |              | \$             |             |          |             | 0.00       |                    |                |               |           |          |              |
|  |                                 |            | ļ                      | ٩FF   | IDA         | ١٧٢          | T SE           | CTION       |          |             |            |                    |                |               |           |          |              |
| PART I - If this is                      | s a Committee rep               | ort, trea  | surer sign he          | re. 1 | [f thi      | is is        | a Can          | ididate r   | eport, o | candi       | date sig   | ın here.           |                |               |           |          |              |
| I swear (or affirm) correct and comple   | ) that this report, inc<br>ete. | luding the | attached sche          | dules | filed       | d on         | paper (        | or by elect | tronic m | edium       | , are to t | he best o          | f my kno       | wledge        | and belie | ef , tru | ıe           |
| Sworn to and subs                        | cribed before me thi<br>day of  | 5          | 20                     |       |             |              |                |             |          | S           | ignature   | of Perso           | n Submit       | ting Rep      | ort       |          |              |
|  | Signatu                         | re         |                        |       |             |              | -              |             |          |             |            | Prin               | ted Name       | e             |           |          |              |
| My Commission Ex                         | cpires                          |            |                        |       |             |              | _              |             |          |             |            | Ema                | il             |               |           |          |              |
|  | МО                              | D          | AY                     | YR    |             |              |                |             | Ar       | ea Cod      | e          | Daytim             | e Telepl       | one Nu        | mber      |          |              |
| Part II- If this is                      | a report of a can               | didate's   | authorized Co          | omm   | itte        | e, C         | andida         | ate shall   | sign h   | ere.        |            |                    |                |               |           |          |              |
| I swear (or affirm)<br>No 320) as amende | that to the best of i           | ny knowle  | edge and belief        | this  | polit       | tical        | commi          | ittee has n | ot viola | ted an      | y provis   | ions of th         | e act of J     | une 3,1       | 937 (P.L  | . 1333   | i,           |
| Sworn to and subsc                       | ribed before me this            |            |                        |       |             |              |                |             | -        |             | s          | ignature o         | of Candid      | ate           |           |          | -            |
|  | day of                          |            |                        |       |             |              | -              |             |          |             |            | Printe             | d Name         |               |           |          | -            |
| Mar Community is T                       | Signature                       |            |                        |       |             |              | -              |             |          |             |            | Ema                | il             |               |           |          | -            |
| My Commission Exp                        | oires<br>                       |            |                        |       |             |              | _              |             |          |             |            |                    |                |               |           |          |              |
|  | МО                              | D          | AY                     | YR    |             |              | -              |             | Area     | Code        |            | Da                 | ytime T        | elephon       | e Numb    | er       | <sup>-</sup> |

## SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

| , -  |           |                |              |           |
|--|-----------|----------------|--------------|-----------|
| Name of Filing Committee or Candidate  | Reporting | g Period       |              |           |
| BENNINGHOFF FOR REPRESENTATIVE   | From:     | <u>5/1/201</u> | <u>8</u> To: | 6/4/2018  |
| 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)  |           |                | \$           | 48,000.00 |
| All Other Contributions (Part D)   |           |                | \$           | 4,750.00  |
| TOTAL for the Reporting  | ) Period  | (3)            | \$           | 52,750.00 |
| 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 |           |                | \$           | 52,750.00 |

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

|                           | his Part to itemize onl<br>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 | e or Candidate |                   | Rep | porting P | eriod |      |            |       |
|--------------------------|----------------|-------------------|-----|-----------|-------|------|------------|-------|
|                          |                |                   | Fro | om:       |       | To   | <b>)</b> : |       |
|                          |                |                   | •   |           | DATE  |      | Α          | MOUNT |
| Full Name of Contributor |                |                   |     | МО        | DAY   | YEAR |            |       |
| Mailing Address          |                |                   |     |           |       |      | \$         | 0.00  |
| City                     | State          | Zip Code (Plus 4) | ١   |           |       |      |            |       |

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    |        |      |             |          |
|---|--------------------|----------|------------|-----------|--------|------|-------------|----------|
| BENNINGHOFF FOR REPRESENTATIVE                          |                    |          | From:      | <u>5/</u> | 1/2018 | То:  | <u>6/4/</u> | 2018     |
|   |                    |          |            | DA        | TE     |      | AMOU        | NT       |
| Full Name of Contributing Committee CABOT OIL & DAS PAC |                    |          |            | МО        | DAY    | YEAR |             |          |
| Mailing Address PO BOX 4544                             |                    |          |            |           |        |      | \$          | 1,000.00 |
| City HOUSTON  | State              | Zip Code | e (Plus 4) | 5         | 30     | 2018 |             |          |
| 116651611   | TX                 | 772104   | 544        |           |        |      |             |          |
| Full Name of Contributing Committee                     |                    |          |            | мо        | DAY    | YEAR |             |          |
| ENERGY TRANSFER PAC                                     |                    |          |            |           |        |      |             |          |
| Mailing Address 400 W. 15TH ST. St                      | JITE 720           |          |            | _         |        |      | \$          | 1,000.00 |
| City AUSTIN   | State              | Zip Code | e (Plus 4) | 5         | 30     | 2018 |             |          |
|   | TX                 | 78701    |            |           |        |      |             |          |
| Full Name of Contributing Committee                     |                    |          |            | мо        | DAY    | YEAR |             |          |
| MALADY & WOOTEN PAC                                     |                    |          |            | MO        | DAT    | TEAR |             |          |
| Mailing Address 604 N. 3RD ST.                          |                    |          |            |           |        |      | \$          | 1,000.00 |
| City HARRISBURG   | State              | Zip Code | (Plus 4)   | 5         | 30     | 2018 |             |          |
|   | PA                 | 171011   | 114        |           |        |      |             |          |
| Full Name of Contributing Committee                     | •                  | -        |            | мо        | DAY    | YEAR |             |          |
| MERCK PAC   |                    |          |            | МО        | DAT    | TEAR |             |          |
| Mailing Address 601 PENNSYLVANIA                        | AVE., NW NORTH BLI | DG, SUIT | E 1200     |           |        |      | \$          | 1,000.00 |
| City WASHINGTON   | State              | Zip Code | e (Plus 4) | 5         | 30     | 2018 |             |          |
|   | DC                 | 20004    |            |           |        |      |             |          |
| Full Name of Contributing Committee                     |                    |          |            | мо        | DAY    | YEAR |             |          |
| PENNSYLVANIA EMERGENCY PHYSICIA                         | NS PAC             |          |            | 140       | DAI    | ILAR |             |          |
| Mailing Address 200 N. THIRD ST. S                      | UITE 1500          |          | _          |           |        |      | \$          | 1,000.00 |
| City HARRISBURG   | State              | Zip Code | e (Plus 4) | 5         | 30     | 2018 |             |          |
|   | PA                 | 17101    |            |           |        |      |             |          |

|   |                  |                 |                  | PAGE 6                 |
|---|------------------|-----------------|------------------|------------------------|
| Full Name of Contributing Committee PA ASSN OF DEER FARMERS PAC   | МО               | DAY             | YEAR             |                        |
| Mailing Address 200 N. THIRD ST. SUITE 1500   |                  |                 |                  | <b>\$</b> 1,000.00     |
| City HARRISBURG State Zip Code (Plus 4) PA 17101  | 5                | 30              | 2018             |                        |
| Full Name of Contributing Committee PA TRUCK PAC  | МО               | DAY             | YEAR             |                        |
| Mailing Address 910 LINDA LANE  |                  |                 |                  | <b>\$</b> 500.00       |
| City CAMP HILL PA 2ip Code (Plus 4) 17011   | 5                | 30              | 2018             |                        |
| Full Name of Contributing Committee PA OPHTHALMOLOGY PAC  | МО               | DAY             | YEAR             |                        |
| Mailing Address 200 N. THIRD ST. SUITE 1500   | _                |                 | 2010             | <b>\$</b> 500.00       |
| City HARRISBURG State Zip Code (Plus 4) PA 17101  | 5                | 30              | 2018             |                        |
|   |                  |                 |                  |                        |
| Full Name of Contributing Committee  UPAC UROLOGIST FOR PATIENT ACCESS TO CARE  | мо               | DAY             | YEAR             |                        |
|   | МО               | DAY             | YEAR             | \$ 500.00              |
| UPAC UROLOGIST FOR PATIENT ACCESS TO CARE   | <b>MO</b> 5      | <b>DAY</b> 30   | <b>YEAR</b> 2018 | \$ 500.00              |
| UPAC UROLOGIST FOR PATIENT ACCESS TO CARE  Mailing Address PO BOX 458  City CAMP HILL State Zip Code (Plus 4)   |                  |                 |                  | \$ 500.00              |
| UPAC UROLOGIST FOR PATIENT ACCESS TO CARE  Mailing Address PO BOX 458  City CAMP HILL State PA 170010458  Full Name of Contributing Committee   | - 5<br><b>мо</b> | 30<br>DAY       | 2018<br>YEAR     | \$ 500.00<br>\$ 500.00 |
| Wailing Address PO BOX 458  City CAMP HILL State PA 170010458  Full Name of Contributing Committee PHYSICIAN ASSISTANTS PAC   | - 5              | 30              | 2018             |                        |
| Wailing Address PO BOX 458  City CAMP HILL State PA 170010458  Full Name of Contributing Committee PHYSICIAN ASSISTANTS PAC  Mailing Address 200 N. THIRD ST. SUITE 1500  City HARRISBURG State Zip Code (Plus 4) 170010458                   | - 5<br><b>мо</b> | 30<br>DAY       | 2018<br>YEAR     |                        |
| Mailing Address PO BOX 458  City CAMP HILL State PA 170010458  Full Name of Contributing Committee PHYSICIAN ASSISTANTS PAC  Mailing Address 200 N. THIRD ST. SUITE 1500  City HARRISBURG State PA 17101  Full Name of Contributing Committee | <b>мо</b>        | 30<br>DAY<br>30 | 2018  YEAR  2018 |                        |

| F.,                                      |  |   |                                     |           |               |                  |          |                      |
|--|--|---|-------------------------------------|-----------|---------------|------------------|----------|----------------------|
| ruii Na                                  | ame of Contributing Committee  |   |                                     |           |               |                  |          |                      |
| CHAME                                    | BERPHL PAC   |   |                                     | МО        | DAY           | YEAR             |          |                      |
| Mailing                                  | g Address 200 S. BROAD ST. S   | SUITE 700                                     |                                     |           |               |                  | \$       | 1,000.00             |
| City                                     | PHILADELPHIA   | State   | Zip Code (Plus 4)                   | 5         | 30            | 2018             |          |                      |
|  |  | PA  | 19102                               |           |               |                  |          |                      |
| Full Na                                  | ame of Contributing Committee  |   |                                     | мо        | DAY           | YEAR             |          |                      |
| BAYAD                                    | DA HOME HEALTH CARE PAC  |   |                                     | 110       | 2711          | 12/11            |          |                      |
| Mailing                                  | g Address 1315 WALNUT ST. S  | SUITE 600                                     |                                     |           |               |                  | \$       | 1,000.00             |
| City                                     | PHILADELPHIA   | State   | Zip Code (Plus 4)                   | 5         | 30            | 2018             |          |                      |
|  |  | PA  | 191074726                           |           |               |                  |          |                      |
|  | ame of Contributing Committee  |   |                                     | МО        | DAY           | YEAR             |          |                      |
| PA FUT                                   | TURE FUND  |   |                                     |           |               |                  |          |                      |
| Mailing                                  | g Address PO BOX 6128  |   |                                     | _         | 10            | 2010             | \$       | 1,000.00             |
| City                                     | HARRISBURG   | State   | Zip Code (Plus 4)                   | 5         | 18            | 2018             |          |                      |
|  |  | PA  | 17112                               |           |               |                  |          |                      |
|  | ame of Contributing Committee  |   |                                     | МО        | DAY           | YEAR             |          |                      |
| PHHA I                                   | PAC  |   |                                     |           |               |                  |          |                      |
| Mailing                                  | a Address a  |   |                                     |           |               |                  |          |                      |
|  | 1001 HARRAHS BLV   | D.  |                                     |           |               |                  | \$       | 1,000.00             |
| City                                     | 1001 HARRAHS BLV CHESTER   | State   | Zip Code (Plus 4)                   | 5         | 18            | 2018             | \$       | 1,000.00             |
|  | 1001 HARRAHS BLV   |   | <b>Zip Code (Plus 4)</b><br>19013   | 5         | 18            | 2018             | \$       | 1,000.00             |
| City<br>Full Na                          | 1001 HARRAHS BLV   | State<br>PA                                   |                                     | мо        | DAY           | 2018<br>YEAR     | \$       | 1,000.00             |
| City Full Na PENNS                       | CHESTER  ame of Contributing Committee   | State<br>PA                                   |                                     |           |               |                  | \$<br>\$ | 1,000.00<br>2,500.00 |
| City Full Na PENNS                       | CHESTER  The contributing Committee  SYLVANIANS FOR TOMORROW PARTY AND ST. SUITE SUI | State<br>PA                                   |                                     |           |               |                  |          |                      |
| Full Na PENNS Mailing                    | CHESTER  ame of Contributing Committee  SYLVANIANS FOR TOMORROW PA   | State PA  CC TE 203                           | 19013                               | мо        | DAY           | YEAR             |          |                      |
| Full Na<br>PENNS<br>Mailing              | CHESTER  The contributing Committee  SYLVANIANS FOR TOMORROW PARTY AND ST. SUITE SUI | State PA  CC TE 203  State                    | 19013    Zip Code (Plus 4)          | <b>мо</b> | <b>DAY</b> 18 | <b>YEAR</b> 2018 |          |                      |
| Full Na PENNS Mailing City               | CHESTER  Tame of Contributing Committee  SYLVANIANS FOR TOMORROW PA  G Address 409 N. 2ND ST. SUI  HARRISBURG  | State PA  CC TE 203  State                    | 19013    Zip Code (Plus 4)          | мо        | DAY           | YEAR             |          |                      |
| Full Na PENNS Mailing City Full Na COZEN | CHESTER  The of Contributing Committee  GYLVANIANS FOR TOMORROW PARTICLE  GRAND AND ST. SUITABLE  HARRISBURG  The of Contributing Committee  | State PA  CC TE 203  State PA                 | 19013    Zip Code (Plus 4)          | <b>мо</b> | <b>DAY</b> 18 | YEAR 2018 YEAR   |          |                      |
| Full Na PENNS Mailing City Full Na COZEN | CHESTER  The of Contributing Committee  GYLVANIANS FOR TOMORROW PA  G Address 409 N. 2ND ST. SUI  HARRISBURG  The of Contributing Committee  NO'CONNOR PAC  G Address 1650 MARKET ST. CO   | State PA  CC TE 203  State PA                 | 19013    Zip Code (Plus 4)          | <b>мо</b> | <b>DAY</b> 18 | <b>YEAR</b> 2018 | \$       | 2,500.00             |
| Full Na PENNS Mailing City Full Na COZEN | CHESTER  The of Contributing Committee  SYLVANIANS FOR TOMORROW PA  G Address 409 N. 2ND ST. SUI  HARRISBURG  The of Contributing Committee  N O'CONNOR PAC  | State PA  TE 203  State PA  ONE LIBERTY PLACE | 19013  Zip Code (Plus 4)  171011357 | мо<br>5   | DAY 18        | YEAR 2018 YEAR   | \$       | 2,500.00             |

| Full Name of Contributing Comm   | nittee  |   | МО         | DAY           | YEAR             |                |
|--|---|---|------------|---------------|------------------|----------------|
| PECOPAC  |   |   | МО         | DAT           | TEAR             |                |
| Mailing Address 2301 MARKE   | T ST., S14-2  |   |            |               |                  | \$<br>1,000.00 |
| City PHILADELPHIA  | State   | Zip Code (Plus 4)                       | 5          | 11            | 2018             |                |
|  | PA  | 19103                                   |            |               |                  |                |
| Full Name of Contributing Comm   | nittee  | ·                                       | МО         | DAY           | YEAR             |                |
| CUPAC  |   |   | 1-10       | DA.           | ILAK             |                |
| Mailing Address 4309 N. FRC  | ONT ST.   |   |            |               |                  | \$<br>1,000.00 |
| City HARRISBURG  | State   | Zip Code (Plus 4)                       | 5          | 11            | 2018             |                |
|  | PA  | 171101618                               |            |               |                  |                |
| Full Name of Contributing Comm<br>JOHNSON & DHNSON PA  |   | ·                                       | мо         | DAY           | YEAR             |                |
| Mailing Address 1350 I ST. 9   |   |   |            |               |                  | \$<br>1,000.00 |
| <b></b>  | State   | Zip Code (Plus 4)                       | 5          | 11            | 2018             | 1,000.00       |
| <b>City</b> WASHINGTON   | DC  | 20005                                   |            |               |                  |                |
|  |   | 20003                                   |            |               |                  |                |
|  | •   |   |            |               |                  |                |
| Full Name of Contributing Comm   | nittee  |   | мо         | DAY           | YEAR             |                |
|  |   |   |            |               |                  | \$<br>1,000.00 |
| FIRSTENERGY PAC  |   | Zip Code (Plus 4)                       | <b>MO</b>  | <b>DAY</b> 11 | <b>YEAR</b> 2018 | \$<br>1,000.00 |
| FIRSTENERGY PAC  Mailing Address 76 S. MAIN S  | ST.   | <b>Zip Code (Plus 4)</b> 443081890      |            |               |                  | \$<br>1,000.00 |
| FIRSTENERGY PAC  Mailing Address 76 S. MAIN S  | State OH  | 443081890                               |            |               |                  | \$<br>1,000.00 |
| FIRSTENERGY PAC  Mailing Address 76 S. MAIN S  City AKRON  Full Name of Contributing Comm  | State OH nittee   | 443081890                               | 5          | 11            | 2018             | 1,000.00       |
| FIRSTENERGY PAC  Mailing Address 76 S. MAIN S  City AKRON  Full Name of Contributing Comm  PREA ACRE ACTION COMMITTE  Mailing Address PO BOX 126   | State OH nittee   | 443081890                               | 5          | 11            | 2018             |                |
| FIRSTENERGY PAC  Mailing Address 76 S. MAIN S  City AKRON  Full Name of Contributing Comm  PREA ACRE ACTION COMMITTE  Mailing Address PO BOX 126   | State OH  nittee EE FOR ELECTRIFICATION                   | 443081890<br>ON                         | мо         | DAY           | 2018<br>YEAR     |                |
| FIRSTENERGY PAC  Mailing Address 76 S. MAIN S  City AKRON  Full Name of Contributing Comm  PREA ACRE ACTION COMMITTE  Mailing Address PO BOX 126   | State OH  nittee EE FOR ELECTRIFICATION  State PA         | 443081890  ON  Zip Code (Plus 4)        | м <b>о</b> | 11 DAY        | 2018  YEAR  2018 |                |
| Mailing Address 76 S. MAIN S  City AKRON  Full Name of Contributing Comm PREA ACRE ACTION COMMITTE  Mailing Address PO BOX 126  City HARRISBURG  | State OH  nittee EE FOR ELECTRIFICATION  State PA         | 443081890  ON  Zip Code (Plus 4)        | мо         | DAY           | 2018<br>YEAR     |                |
| Mailing Address 76 S. MAIN S  City AKRON  Full Name of Contributing Comm PREA ACRE ACTION COMMITTE  Mailing Address PO BOX 126  City HARRISBURG  | State OH  nittee EE FOR ELECTRIFICATION  State PA  nittee | 443081890  ON  Zip Code (Plus 4)        | м <b>о</b> | 11 DAY        | 2018  YEAR  2018 | \$             |
| FIRSTENERGY PAC  Mailing Address 76 S. MAIN S  City AKRON  Full Name of Contributing Common PREA ACRE ACTION COMMITTE  Mailing Address PO BOX 126  City HARRISBURG  Full Name of Contributing Common MONROE ENERGY LLC             | State OH  nittee EE FOR ELECTRIFICATION  State PA  nittee | 443081890  ON  Zip Code (Plus 4)        | м <b>о</b> | 11 DAY        | 2018  YEAR  2018 | \$<br>1,000.00 |
| Mailing Address 76 S. MAIN S  City AKRON  Full Name of Contributing Common PREA ACRE ACTION COMMITTE  Mailing Address PO BOX 126  City HARRISBURG  Full Name of Contributing Common MONROE ENERGY LLC  Mailing Address 4101 POST F | State OH  nittee EE FOR ELECTRIFICATION  State PA  nittee | 443081890  ON  Zip Code (Plus 4)  17108 | мо<br>мо   | 11 DAY        | 2018  YEAR  2018 | \$<br>1,000.00 |

|   |   |             |            |                  | PAC | E 9      |
|---|---|-------------|------------|------------------|-----|----------|
| Full Name of Contributing Committee   |   |             |            |                  |     |          |
| KINSER GROUP PAC  |   | МО          | DAY        | YEAR             |     |          |
| Mailing Address 200 S. BROAD ST. SUITE 912  |   |             |            |                  | \$  | 500.00   |
| City PHILADELPHIA State   | Zip Code (Plus 4)                                   | 5           | 11         | 2018             |     |          |
| PA  | 191023850   |             |            |                  |     |          |
| Full Name of Contributing Committee   |   | мо          | DAY        | YEAR             |     |          |
| IBC PAC   |   |             |            |                  |     |          |
| Mailing Address 1901 MARKET ST.   |   |             |            |                  | \$  | 500.00   |
| City PHILADELPHIA State   | Zip Code (Plus 4)                                   | 5           | 11         | 2018             |     |          |
| PA  | 19103   |             |            |                  |     |          |
| Full Name of Contributing Committee  IBC PAC  |   | МО          | DAY        | YEAR             |     |          |
| Mailing Address 1901 MARKET ST.   |   |             |            |                  | \$  | 500.00   |
| City PHILADELPHIA State   | Zip Code (Plus 4)                                   | 5           | 11         | 2018             |     |          |
|   |   |             |            |                  |     |          |
| PA  | 19103   |             |            |                  |     |          |
|   | 19103   | МО          | DAY        | YEAR             |     |          |
| Full Name of Contributing Committee   | 19103   |             | DAY        | YEAR             | \$  | 500.00   |
| Full Name of Contributing Committee BIPARTISAN PAC BIPAC/BNYMC  Mailing Address BNY MELLON CENTER, R 3225   | 19103  Zip Code (Plus 4)                            | <b>MO</b> 5 | <b>DAY</b> | <b>YEAR</b> 2018 | \$  | 500.00   |
| Full Name of Contributing Committee BIPARTISAN PAC BIPAC/BNYMC  Mailing Address BNY MELLON CENTER, R 3225   |   |             |            |                  | \$  | 500.00   |
| Full Name of Contributing Committee BIPARTISAN PAC BIPAC/BNYMC  Mailing Address BNY MELLON CENTER, R 3225  City PITTSBURGH  | Zip Code (Plus 4)                                   |             |            |                  | \$  | 500.00   |
| Full Name of Contributing Committee BIPARTISAN PAC BIPAC/BNYMC  Mailing Address BNY MELLON CENTER, R 3225  City PITTSBURGH State PA  Full Name of Contributing Committee  | Zip Code (Plus 4)                                   | мо          | 11 DAY     | 2018             | \$  | 1,000.00 |
| Full Name of Contributing Committee BIPARTISAN PAC BIPAC/BNYMC  Mailing Address BNY MELLON CENTER, R 3225  City PITTSBURGH State PA  Full Name of Contributing Committee PSEA PACE  Mailing Address PO BOX 1724   | Zip Code (Plus 4)                                   | 5           | 11         | 2018             |     |          |
| Full Name of Contributing Committee BIPARTISAN PAC BIPAC/BNYMC  Mailing Address BNY MELLON CENTER, R 3225  City PITTSBURGH  Full Name of Contributing Committee PSEA PACE  Mailing Address PO BOX 1724  | <b>Zip Code (Plus 4)</b> 152580001                  | мо          | 11 DAY     | 2018<br>YEAR     |     |          |
| Full Name of Contributing Committee BIPARTISAN PAC BIPAC/BNYMC  Mailing Address BNY MELLON CENTER, R 3225  City PITTSBURGH State PA  Full Name of Contributing Committee PSEA PACE  Mailing Address PO BOX 1724  City HARRISBURG State PA   | Zip Code (Plus 4)<br>152580001<br>Zip Code (Plus 4) | мо          | 11 DAY     | 2018<br>YEAR     |     |          |
| Full Name of Contributing Committee BIPARTISAN PAC BIPAC/BNYMC  Mailing Address BNY MELLON CENTER, R 3225  City PITTSBURGH State PA  Full Name of Contributing Committee PSEA PACE  Mailing Address PO BOX 1724  City HARRISBURG State PA   | Zip Code (Plus 4)<br>152580001<br>Zip Code (Plus 4) | <b>MO</b> 5 | 11 DAY 5   | 2018  YEAR  2018 |     |          |
| Full Name of Contributing Committee BIPARTISAN PAC BIPAC/BNYMC  Mailing Address BNY MELLON CENTER, R 3225  City PITTSBURGH State PA  Full Name of Contributing Committee PSEA PACE  Mailing Address PO BOX 1724  City HARRISBURG State PA   | Zip Code (Plus 4)<br>152580001<br>Zip Code (Plus 4) | мо<br>5     | 11 DAY 5   | 2018  YEAR  2018 |     |          |
| Full Name of Contributing Committee BIPARTISAN PAC BIPAC/BNYMC  Mailing Address BNY MELLON CENTER, R 3225  City PITTSBURGH State PA  Full Name of Contributing Committee PSEA PACE  Mailing Address PO BOX 1724  City HARRISBURG State PA  Full Name of Contributing Committee PENNSYLVANIA BEER ALLIANCE PAC | Zip Code (Plus 4)<br>152580001<br>Zip Code (Plus 4) | <b>MO</b> 5 | 11 DAY 5   | 2018  YEAR  2018 | \$  | 1,000.00 |

|  |             |     |   |                  | FAGL 10       |
|--|-------------|-----|---|------------------|---------------|
| Full Name of Contributing Committee  | МО          | DAY |   | YEAR             |               |
| CALPINE CORP-FEDERAL PAC   |             |     |   |                  |               |
| Mailing Address 717 TEXAS AVE. SUITE 1000  |             |     |   |                  | \$<br>1,000.0 |
| City HOUSTON State Zip Code (Plus 4)   | 5           |     | 5 | 2018             |               |
| TX 77002   |             |     |   |                  |               |
| Full Name of Contributing Committee  | МО          | DAY |   | YEAR             |               |
| Z PAC PENNSYLVANIA SOCIETY OF ANESTHESIOLOGIST PAC   |             |     |   |                  |               |
| Mailing Address 50 S. PROVIDENCE RD.   |             |     |   |                  | \$<br>1,000.0 |
| City MEDIA State Zip Code (Plus 4)   | 5           |     | 5 | 2018             |               |
| PA 19063   |             |     |   |                  |               |
| Full Name of Contributing Committee  | МО          | DAY |   | YEAR             |               |
| COHEN & amp; GRIGSBY PC PAC  |             |     |   |                  |               |
| Mailing Address 625 LIBERTY AVE.   |             |     |   |                  | \$<br>1,000.0 |
| City PITTSBURGH State Zip Code (Plus 4)  | 5           |     | 5 | 2018             |               |
|  |             |     |   |                  |               |
| PA 152223110   |             |     |   |                  |               |
| Full Name of Contributing Committee  MSOA PAC  | МО          | DAY |   | YEAR             |               |
| Full Name of Contributing Committee  | МО          | DAY |   | YEAR             | \$<br>1,000.0 |
| Full Name of Contributing Committee  MSOA PAC  Mailing Address PO BOX 253  | <b>MO</b> 5 |     | 5 | <b>YEAR</b> 2018 | \$<br>1,000.0 |
| Full Name of Contributing Committee  MSOA PAC  Mailing Address PO BOX 253  |             |     | 5 |                  | \$<br>1,000.0 |
| Full Name of Contributing Committee  MSOA PAC  Mailing Address PO BOX 253  City MEADOW LANDS State Zip Code (Plus 4)   |             |     |   |                  | \$<br>1,000.0 |
| Full Name of Contributing Committee  MSOA PAC  Mailing Address PO BOX 253  City MEADOW LANDS State PA 15347  Full Name of Contributing Committee   | 5           | DAY |   | 2018<br>YEAR     | \$<br>1,000.0 |
| Full Name of Contributing Committee  MSOA PAC  Mailing Address PO BOX 253  City MEADOW LANDS State PA 15347  Full Name of Contributing Committee  UNITED STATE STEEL CORP PAC  Mailing Address 600 GRANT ST.   | 5           | DAY |   | 2018             |               |
| Full Name of Contributing Committee  MSOA PAC  Mailing Address PO BOX 253  City MEADOW LANDS State PA 15347  Full Name of Contributing Committee  UNITED STATE STEEL CORP PAC  Mailing Address 600 GRANT ST.   | 5           | DAY |   | 2018<br>YEAR     |               |
| Full Name of Contributing Committee  MSOA PAC  Mailing Address PO BOX 253  City MEADOW LANDS State PA 15347  Full Name of Contributing Committee  UNITED STATE STEEL CORP PAC  Mailing Address 600 GRANT ST.  City PITTSBURGH State Zip Code (Plus 4)  2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | 5           | DAY | 5 | 2018<br>YEAR     |               |
| Full Name of Contributing Committee  MSOA PAC  Mailing Address PO BOX 253  City MEADOW LANDS State PA 15347  Full Name of Contributing Committee  UNITED STATE STEEL CORP PAC  Mailing Address 600 GRANT ST.  City PITTSBURGH State PA 15219  Full Name of Contributing Committee            | <b>MO</b>   | DAY | 5 | 2018  YEAR  2018 |               |
| Full Name of Contributing Committee  MSOA PAC  Mailing Address PO BOX 253  City MEADOW LANDS State PA 15347  Full Name of Contributing Committee  UNITED STATE STEEL CORP PAC  Mailing Address 600 GRANT ST.  City PITTSBURGH State PA 15219  Full Name of Contributing Committee  NFG PAPAC | <b>MO</b>   | DAY | 5 | 2018  YEAR  2018 | \$<br>1,000.0 |

|   |                     |                                |               |     |   |                  | PAGI | = 11   |
|---|---------------------|--------------------------------|---------------|-----|---|------------------|------|--------|
| Full Name of Contributing Committee   |                     |                                | мо            | DAY |   | YEAR             |      |        |
| ABBVIE PAC  |                     |                                |               |     |   |                  |      |        |
| Mailing Address 1 N. WAUKEGAN RD  | ·.                  |                                |               |     |   |                  | \$   | 500.00 |
| City N. CHICAGO   | State               | Zip Code (Plus 4)              | 5             |     | 5 | 2018             |      |        |
| N. CHICAGO  | IL                  | 60064                          |               |     |   |                  |      |        |
| Full Name of Contributing Committee   |                     |                                | мо            | DAY |   | YEAR             |      |        |
| PA FRATERNAL ORDER OF POLICE PAC  |                     |                                |               |     |   |                  |      |        |
| Mailing Address 2949 N. FRONT ST.   |                     |                                |               |     |   |                  | \$   | 500.00 |
| City HARRISBURG   | State               | Zip Code (Plus 4)              | 5             |     | 5 | 2018             |      |        |
| , HARRISBURG  | PA                  | 171101250                      |               |     |   |                  |      |        |
|   |                     | 1771101200                     |               |     |   |                  |      |        |
| Full Name of Contributing Committee PA CABLE PAC  |                     |                                | МО            | DAY |   | YEAR             |      |        |
| Mailing Address 127 STATE ST.   |                     |                                |               |     |   |                  | \$   | 500.00 |
| City HARRISBURG   | State               | Zip Code (Plus 4)              | 5             |     | 5 | 2018             |      |        |
|   | PA                  | 17101                          |               |     |   |                  |      |        |
|   |                     |                                |               |     |   |                  |      |        |
| Full Name of Contributing Committee   | <u> </u>            |                                | МО            | DAY |   | YEAR             |      |        |
| Full Name of Contributing Committee VALUE DRUG COMPANY VALUE PAC  | 1                   |                                | МО            | DAY |   | YEAR             |      |        |
|   |                     |                                |               | DAY |   |                  | \$   | 500.00 |
| VALUE DRUG COMPANY VALUE PAC  | State               | Zip Code (Plus 4)              | <b>MO</b> 5   | DAY | 5 | <b>YEAR</b> 2018 | \$   | 500.00 |
| VALUE DRUG COMPANY VALUE PAC  Mailing Address 195 THEATER DR.   | State PA            | <b>Zip Code (Plus 4)</b> 16635 |               | DAY | 5 |                  | \$   | 500.00 |
| VALUE DRUG COMPANY VALUE PAC  Mailing Address 195 THEATER DR.   |                     |                                | 5             |     | 5 | 2018             | \$   | 500.00 |
| VALUE DRUG COMPANY VALUE PAC  Mailing Address 195 THEATER DR.  City DUNCANSVILLE  |                     |                                |               | DAY | 5 |                  | \$   | 500.00 |
| VALUE DRUG COMPANY VALUE PAC  Mailing Address 195 THEATER DR.  City DUNCANSVILLE  Full Name of Contributing Committee  CRISCI ASSOCIATES PAC  |                     |                                | 5             |     | 5 | 2018             | \$   | 500.00 |
| VALUE DRUG COMPANY VALUE PAC  Mailing Address 195 THEATER DR.  City DUNCANSVILLE  Full Name of Contributing Committee   |                     | 16635                          | 5             |     |   | 2018<br>YEAR     | \$   | 500.00 |
| VALUE DRUG COMPANY VALUE PAC  Mailing Address 195 THEATER DR.  City DUNCANSVILLE  Full Name of Contributing Committee  CRISCI ASSOCIATES PAC  |                     |                                | 5             |     | 5 | 2018             |      |        |
| VALUE DRUG COMPANY VALUE PAC  Mailing Address 195 THEATER DR.  City DUNCANSVILLE  Full Name of Contributing Committee  CRISCI ASSOCIATES PAC  Mailing Address 204 STATE ST.   | РА                  | 16635                          | 5             |     |   | 2018<br>YEAR     |      |        |
| VALUE DRUG COMPANY VALUE PAC  Mailing Address 195 THEATER DR.  City DUNCANSVILLE  Full Name of Contributing Committee  CRISCI ASSOCIATES PAC  Mailing Address 204 STATE ST.   | PA                  | 16635  Zip Code (Plus 4)       | 5 <b>MO</b> 5 | DAY |   | 2018  YEAR  2018 |      |        |
| VALUE DRUG COMPANY VALUE PAC  Mailing Address 195 THEATER DR.  City DUNCANSVILLE  Full Name of Contributing Committee  CRISCI ASSOCIATES PAC  Mailing Address 204 STATE ST.  City HARRISBURG  | State PA            | 16635  Zip Code (Plus 4)       | 5             |     |   | 2018<br>YEAR     |      |        |
| VALUE DRUG COMPANY VALUE PAC  Mailing Address 195 THEATER DR.  City DUNCANSVILLE  Full Name of Contributing Committee CRISCI ASSOCIATES PAC  Mailing Address 204 STATE ST.  City HARRISBURG  Full Name of Contributing Committee  | State PA            | 16635  Zip Code (Plus 4)       | 5 <b>MO</b> 5 | DAY |   | 2018  YEAR  2018 |      |        |
| VALUE DRUG COMPANY VALUE PAC  Mailing Address 195 THEATER DR.  City DUNCANSVILLE  Full Name of Contributing Committee CRISCI ASSOCIATES PAC  Mailing Address 204 STATE ST.  City HARRISBURG  Full Name of Contributing Committee RANGE RESOURCES ENERGY INDEPEN  Mailing Address PO BOX 546 | State PA            | 16635  Zip Code (Plus 4)       | 5 <b>MO</b> 5 | DAY |   | 2018  YEAR  2018 | \$   | 500.00 |
| VALUE DRUG COMPANY VALUE PAC  Mailing Address 195 THEATER DR.  City DUNCANSVILLE  Full Name of Contributing Committee CRISCI ASSOCIATES PAC  Mailing Address 204 STATE ST.  City HARRISBURG  Full Name of Contributing Committee RANGE RESOURCES ENERGY INDEPEN                             | State PA  DENCE PAC | Zip Code (Plus 4)<br>  17101   | 5 <b>MO</b>   | DAY | 5 | 2018  YEAR  2018 | \$   | 500.00 |

|   |        |              |     |   |                  | r  | AGE 12   |
|---|--------|--------------|-----|---|------------------|----|----------|
| Full Name of Contributing Committee   |        |              | DAY |   | YEAR             |    |          |
| PA COMMITTEE FOR AFFORDABLE HOUSING   |        | 10           | DAT |   | TEAK             |    |          |
| Mailing Address 2509 N. FRONT ST.   |        |              |     |   |                  | \$ | 1,000.00 |
| City HARRISBURG State Zip Code (Plus  | s 4)   | 5            |     | 3 | 2018             |    |          |
| PA 17110  |        |              |     |   |                  |    |          |
| Full Name of Contributing Committee  THE PENNSYLVANIA INSURANCE PAC   | м      | 10           | DAY |   | YEAR             |    |          |
| Mailing Address 1600 MARKET ST. SUITE 1720  |        |              |     |   |                  | \$ | 1,000.00 |
| City PHILADEL PHIA State Zip Code (Plus   | s 4)   | 5            |     | 3 | 2018             |    |          |
| PA 19103  |        |              |     |   |                  |    |          |
| Full Name of Contributing Committee  NISOURCE INC PAC   | м      | 10           | DAY |   | YEAR             |    |          |
| Mailing Address 290 W. NATIONWIDE BLVD.   |        | F            |     |   | 2010             | \$ | 1,000.00 |
| City COLUMBUS State Zip Code (Plus  | s 4)   | 5            |     | 3 | 2018             |    |          |
| COLUMBUS  | I      |              |     |   |                  |    |          |
| COLUMBUS OH 43215   |        |              |     |   |                  |    |          |
| COLUMBUS  | М      | 10           | DAY |   | YEAR             |    |          |
| Full Name of Contributing Committee   | М      | 10           | DAY |   | YEAR             | \$ | 1,000.00 |
| Full Name of Contributing Committee  FOODPAC OF PENNSYLVANIA  |        | <b>10</b>    | DAY | 3 | <b>YEAR</b> 2018 | \$ | 1,000.00 |
| Full Name of Contributing Committee  FOODPAC OF PENNSYLVANIA  Mailing Address PO BOX 870  |        |              | DAY | 3 |                  | \$ | 1,000.00 |
| Full Name of Contributing Committee  FOODPAC OF PENNSYLVANIA  Mailing Address PO BOX 870  City CAMP HILL State Zip Code (Plus   | s 4)   |              | DAY | 3 |                  | \$ | 1,000.00 |
| Full Name of Contributing Committee  FOODPAC OF PENNSYLVANIA  Mailing Address PO BOX 870  City CAMP HILL State PA 170010870  Full Name of Contributing Committee  | s 4)   | 5            |     |   | 2018<br>YEAR     | \$ | 1,000.00 |
| Full Name of Contributing Committee FOODPAC OF PENNSYLVANIA  Mailing Address PO BOX 870  City CAMP HILL  Full Name of Contributing Committee MCNEES PAC  Mailing Address PO BOX 1166  | s 4)   | 5            |     | 3 | 2018             |    |          |
| Full Name of Contributing Committee FOODPAC OF PENNSYLVANIA  Mailing Address PO BOX 870  City CAMP HILL  Full Name of Contributing Committee PA  MCNEES PAC  Mailing Address PO BOX 1166  | s 4)   | 5            |     |   | 2018<br>YEAR     |    |          |
| Full Name of Contributing Committee FOODPAC OF PENNSYLVANIA  Mailing Address PO BOX 870  City CAMP HILL State PA 170010870  Full Name of Contributing Committee MCNEES PAC  Mailing Address PO BOX 1166  City HARRISBURG State Zip Code (Plus   | s 4)   | 5            |     |   | 2018<br>YEAR     |    |          |
| Full Name of Contributing Committee FOODPAC OF PENNSYLVANIA  Mailing Address PO BOX 870  City CAMP HILL State PA 170010870  Full Name of Contributing Committee MCNEES PAC  Mailing Address PO BOX 1166  City HARRISBURG State PA 171081166  Full Name of Contributing Committee              | s 4)   | 5<br>10<br>5 | DAY | 3 | 2018  YEAR  2018 |    |          |
| Full Name of Contributing Committee FOODPAC OF PENNSYLVANIA  Mailing Address PO BOX 870  City CAMP HILL State PA 170010870  Full Name of Contributing Committee MCNEES PAC  Mailing Address PO BOX 1166  City HARRISBURG State PA 171081166  Full Name of Contributing Committee HIGHMARK PAC | s 4) M | 5<br>10      | DAY |   | 2018  YEAR  2018 | \$ | 1,000.00 |

|  |  |                     |                                    |               |     |      |                      | PAG      | = 13     |
|--|--|---------------------|------------------------------------|---------------|-----|------|----------------------|----------|----------|
| Full Name of Contribut   | ing Committee  |                     |                                    |               |     |      |                      |          |          |
| GENERAL ELECTRIC PA  | AC   |                     |                                    | МО            | DAY |      | YEAR                 |          |          |
| Mailing Address 129  | 99 PENNSYLVANI <i>A</i>  | A AVE., NW SUITE 90 | 0                                  |               |     |      |                      | \$       | 1,000.00 |
| City WASHINGTON  |  | State               | Zip Code (Plus 4)                  | 5             |     | 3    | 2018                 |          |          |
|  |  | DC                  | 20004                              |               |     |      |                      |          |          |
| Full Name of Contribut   | ing Committee  |                     |                                    |               | /   |      | V=45                 |          |          |
| MARATHON PETROLEUM CORP EMPLOYEES PAC  |  |                     | МО                                 | DAY           |     | YEAR |                      |          |          |
| Mailing Address 539 S. MAIN ST.  |  |                     |                                    |               |     |      |                      | \$       | 1,000.00 |
| City FINDLAY   |  | State               | Zip Code (Plus 4)                  | 5             |     | 3    | 2018                 |          |          |
|  |  | ОН                  | 458403229                          |               |     |      |                      |          |          |
| Full Name of Contribut   |  |                     |                                    | МО            | DAY |      | YEAR                 |          |          |
| AT&T PAC PENNSYLVANIA  |  |                     |                                    |               |     |      |                      |          |          |
| Mailing Address 351  | STANLEY DR.  |                     |                                    | 5 3           |     | 2018 | \$                   | 1,000.00 |          |
| <b>City</b> PALMYRA  |  | State               | Zip Code (Plus 4)                  | 5             |     | ٥    | 2016                 |          |          |
|  |  | PA                  | 17078                              |               |     |      |                      |          |          |
| Full Name of Contributing Committee  BIKEPAC   |  |                     |                                    |               |     |      |                      |          |          |
| Full Name of Contribut   | ing Committee  |                     |                                    | МО            | DAY |      | YEAR                 |          |          |
| BIKEPAC  | BOX 564  |                     |                                    |               | DAY |      | YEAR                 | \$       | 1,000.00 |
| BIKEPAC  | BOX 564  | State               | Zip Code (Plus 4)                  | <b>MO</b> 5   | DAY | 3    | <b>YEAR</b> 2018     | \$       | 1,000.00 |
| Mailing Address PO   | BOX 564  | <b>State</b><br>PA  | <b>Zip Code (Plus 4)</b><br>17055  |               | DAY | 3    |                      | \$       | 1,000.00 |
| Mailing Address PO   | BOX 564<br>JRG   |                     |                                    | 5             |     | 3    | 2018                 | \$       | 1,000.00 |
| Mailing Address PO  City MECHANICSBU   | BOX 564  JRG  ing Committee  | РА                  |                                    |               | DAY | 3    |                      | \$       | 1,000.00 |
| Mailing Address PO  City MECHANICSBU  Full Name of Contribut PENNSYLVANIA HEALT  | BOX 564  JRG  ing Committee  | РА                  |                                    | 5             |     |      | 2018<br>YEAR         | \$       | 1,000.00 |
| Mailing Address PO  City MECHANICSBU  Full Name of Contribut PENNSYLVANIA HEALT  | BOX 564  JRG  ing Committee  TH CARE ASSOC F   | РА                  |                                    | 5             |     | 3    | 2018                 |          |          |
| Mailing Address PO  City MECHANICSBU  Full Name of Contribut PENNSYLVANIA HEALT  Mailing Address 315   | BOX 564  JRG  ing Committee  TH CARE ASSOC F   | PAC 2               | 17055                              | 5             |     |      | 2018<br>YEAR         |          |          |
| Mailing Address PO  City MECHANICSBU  Full Name of Contribut PENNSYLVANIA HEALT  Mailing Address 315   | BOX 564  JRG  JING  JING | PAC 2               | 17055  Zip Code (Plus 4)           | 5 <b>MO</b> 5 | DAY |      | 2018<br>YEAR<br>2018 |          |          |
| Mailing Address PO  City MECHANICSBU  Full Name of Contribut PENNSYLVANIA HEALT  Mailing Address 315  City HARRISBURG  | BOX 564  JRG  JRG  JRG  Committee  TH CARE ASSOC F  N. 2ND ST.   | PAC 2               | 17055  Zip Code (Plus 4)           | 5             |     |      | 2018<br>YEAR         |          |          |
| Mailing Address PO  City MECHANICSBU  Full Name of Contribut PENNSYLVANIA HEALT  Mailing Address 315  City HARRISBURG  Full Name of Contribut PPL PEOPLE FOR GOO                       | BOX 564  JRG  JRG  JRG  Committee  TH CARE ASSOC F  N. 2ND ST.   | PAC 2               | 17055  Zip Code (Plus 4)           | 5 <b>MO</b> 5 | DAY | 3    | 2018  YEAR  2018     |          |          |
| Mailing Address PO  City MECHANICSBL  Full Name of Contribut PENNSYLVANIA HEALT  Mailing Address 315  City HARRISBURG  Full Name of Contribut PPL PEOPLE FOR GOO  Mailing Address TWG  | BOX 564  JRG  JRG  Cing Committee  TH CARE ASSOC F  S N. 2ND ST.  Cing Committee  D GOVT   | PAC 2               | 17055  Zip Code (Plus 4)           | 5 <b>MO</b> 5 | DAY |      | 2018<br>YEAR<br>2018 | \$       | 1,000.00 |
| Mailing Address PO  City MECHANICSBU  Full Name of Contribut PENNSYLVANIA HEALT  Mailing Address 315  City HARRISBURG  Full Name of Contribut PPL PEOPLE FOR GOOD  Mailing Address TWO | BOX 564  JRG  JRG  Cing Committee  TH CARE ASSOC F  S N. 2ND ST.  Cing Committee  D GOVT   | PAC 2  State PA     | <b>Zip Code (Plus 4)</b> 171011305 | 5 <b>MO</b>   | DAY | 3    | 2018  YEAR  2018     | \$       | 1,000.00 |

| Full Name of Contributing Committee  GEISINGER HEALTH PAC |   |                   | МО | DAY | YEAR |                  |
|---|---|-------------------|----|-----|------|------------------|
| Mailing Address 409 N. SECOND ST.                         | Mailing Address 409 N. SECOND ST. SUITE 500 |                   |    |     |      | <b>\$</b> 500.00 |
| City HARRISBURG   | State                                       | Zip Code (Plus 4) | 5  | 3   | 2018 |                  |
|   | PA  | 17101             |    |     |      |                  |

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

| PAGE TOTAL      |
|-----------------|
| \$<br>48,000.00 |

## 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 Candid                        | ame of Filing Committee or Candidate Rep |         |   | Rep   | orting Pe          | riod         |                |           |                   |  |
|---|--|---------|---|-------|--------------------|--------------|----------------|-----------|-------------------|--|
| BENNINGHOFF FOR REPRESENTAT                               | ΓΙVE                                     |         |   | Fron  | n:                 | <u>5/1/2</u> | <u>2018</u> To | 6/4/2018  |                   |  |
|   |  |         | •   |       | D                  | ATE          |                | AMOUNT    |                   |  |
| Full Name of Contributor OBERMAYER REBMANN MAXWELL 8      | & HIPPEL LLP                             |         |   |       | МО                 | DAY          | YEAR           |           |                   |  |
| Mailing 1500 MARKET ST                                    | . CENTRE SQUARE                          | W, 34TH | 1 FL  |       |                    |              |                | \$        | 500.00            |  |
| City PHILADELPHIA   | State                                    | Zi      | p Code (Plus  | 4)    | 5                  | 3            | 2018           | 3         |                   |  |
|   | PA                                       | 19      | 9102  |       |                    |              |                |           |                   |  |
| Employer Name SAME  |  |         |   |       | Occupat            | tion         | ATTORN         | EYS AT LA | W                 |  |
| Employer Mailing Address/Principal Place of City Business |  |         |   |       | State              |              | Zip Code       | (Plus 4)  |                   |  |
| SAME ADDRESS  |  |         |   |       |                    |              |                |           |                   |  |
| Full Name of Contributor ERIC R. CLANCY                   |  |         |   | МО    | DAY                | YEAR         |                |           |                   |  |
| Mailing 2000 TECHNOLO                                     | GY PKWY                                  |         |   |       |                    |              |                | \$        | 500.00            |  |
| City MECHANICSBURG  | State                                    | Zi      | p Code (Plus  | 4)    | 5                  | 5            | 2018           | •         |                   |  |
|   | PA                                       | 17      | 7050  |       |                    |              |                |           |                   |  |
| Employer Name DELTA DEVELOPN                              | MENT GROUP INC.                          | •       |   |       | Occupation EXEC VP |              |                |           |                   |  |
| Employer Mailing Address/Principal<br>Business            | Place of                                 |         | City  |       | l                  | State        |                | Zip Code  | Zip Code (Plus 4) |  |
| 2000 TECHNOLOGY PKWY                                      |  |         | MECHANI   | CSBUF | RG                 | PA           |                | 17050     |                   |  |
| Full Name of Contributor                                  |  |         |   |       |                    |              |                |           |                   |  |
| LEROY D. KLINE, JR.                                       |  |         |   |       | МО                 | DAY          | YEAR           |           |                   |  |
| Mailing 2000 TECHNOLOG                                    | GY PKWY                                  |         |   |       |                    |              |                | \$        | 500.00            |  |
| City MECHANICSBURG  | State                                    | Zi      | p Code (Plus  | 4)    | 5                  | 5            | 2018           | ;         |                   |  |
|   | PA                                       | 17      | 7050  |       |                    |              |                |           |                   |  |
| Employer Name DELTA DEVELOPMENT GROUP INC.                |  |         | Occupation PRES & Description PRES & |       |                    |              |                |           |                   |  |
| Employer Mailing Address/Principal Place of City Business |  |         | State Zip Code (Plus 4)   |       |                    | (Plus 4)     |                |           |                   |  |
| 2000 TECHNOLOGY PKWY MECHANICSBUR                         |  |         | RG  | PA    |                    | 17050        |                |           |                   |  |

| Full Name of Cont   | tributor                      |                  |                   | МО                                | DAY               | YEAR              |                   |  |  |
|---|-------------------------------|------------------|-------------------|-----------------------------------|-------------------|-------------------|-------------------|--|--|
| CHIEF POWER FI  | NANCE, LLC                    |                  |                   | МО                                | DAI               | ILAK              |                   |  |  |
| Mailing<br>Address  | 67 PARK PLACE EAST            | 4TH FL           |                   |                                   |                   |                   | <b>\$</b> 500.00  |  |  |
| City MODDIST  |                               | State            | Zip Code (Plus 4) | 5                                 | 5                 | 2018              |                   |  |  |
| MORRIST   | OWN                           | NJ               | 07960             |                                   |                   |                   |                   |  |  |
|   |                               | 143              | 07960             |                                   |                   |                   |                   |  |  |
| Employer Name   | SAME                          |                  |                   | Occupation POWER PLANT            |                   |                   |                   |  |  |
| Employer Mailing<br>Business                              | Address/Principal Plac        | e of             | City              | 1                                 | Zip Code (Plus 4) |                   |                   |  |  |
| SAME ADDRESS  |                               |                  |                   |                                   |                   |                   |                   |  |  |
| SAME ADDRESS  |                               |                  |                   |                                   | l                 |                   |                   |  |  |
| Full Name of Cont   | ributor<br>/ HOLDINGS, LLC    |                  |                   | мо                                | DAY               | YEAR              |                   |  |  |
| Mailing   |                               |                  |                   |                                   |                   |                   | 4                 |  |  |
| Address   | 67 PARK PLACE EAST            | 4TH FL           |                   |                                   |                   |                   | \$ 500.00         |  |  |
| City MORRIST  | OWN                           | State            | Zip Code (Plus 4) | 5                                 | 5                 | 2018              |                   |  |  |
| MORRIST   | OWN                           | NJ               | 07960             |                                   |                   |                   |                   |  |  |
|   |                               |                  |                   |                                   |                   |                   |                   |  |  |
| Employer Name   | SAME                          |                  |                   | Occupation POWER PLANT            |                   |                   |                   |  |  |
| Employer Mailing Address/Principal Place of City Business |                               |                  |                   |                                   | State             |                   | Zip Code (Plus 4) |  |  |
| SAME ADDRESS  |                               |                  |                   |                                   |                   |                   |                   |  |  |
| Full Name of Cont   | ributor                       |                  |                   |                                   |                   |                   |                   |  |  |
| K&L GATES   | LLP                           |                  |                   | МО                                | DAY               | YEAR              |                   |  |  |
| Mailing<br>Address  | 210 SIXTH AVE. K&a            | mp;L GATES CENTR | E                 |                                   |                   |                   | \$ 1,000.00       |  |  |
| City PITTSBUF   | 2GH                           | State            | Zip Code (Plus 4) | 5                                 | 11                | 2018              |                   |  |  |
| 11113501  | COLI                          | PA               | 15222             |                                   |                   |                   |                   |  |  |
| Employer Name   | SAME                          |                  |                   | Occupation INTERNATIONAL LAW FIRM |                   |                   |                   |  |  |
|   | Address/Principal Plac        | e of             | City              |                                   | State             |                   | Zip Code (Plus 4) |  |  |
| Business  |                               |                  |                   |                                   |                   |                   |                   |  |  |
| SAME ADDRESS  |                               |                  |                   |                                   |                   |                   |                   |  |  |
| Full Name of Cont   | ributor<br>LLP GOVT COMMITTEE |                  |                   | МО                                | DAY               | YEAR              |                   |  |  |
| Mailing<br>Address  | 30 S. 17TH ST.                |                  |                   |                                   |                   |                   | <b>\$</b> 750.00  |  |  |
| City PHILADEL   | DUTA                          | State            | Zip Code (Plus 4) | 5                                 | 11                | 2018              |                   |  |  |
| PHILADEL  | PHIA                          | PA               | 19103             |                                   |                   |                   |                   |  |  |
|   |                               | FA               | 19103             |                                   |                   |                   |                   |  |  |
| Employer Name SAME  |                               |                  |                   | Occupat                           | tion L            | AW FIRI           | М                 |  |  |
| Employer Mailing Address/Principal Place of City          |                               |                  | 1                 | State                             |                   | Zip Code (Plus 4) |                   |  |  |
| Business  |                               |                  |                   |                                   |                   |                   |                   |  |  |
| SAME ADDRESS  |                               |                  |                   |                                   |                   |                   |                   |  |  |
|   |                               |                  |                   |                                   |                   |                   |                   |  |  |

| Full Name of Contributor NICHOLAS DEBENEDICITIS           | МО   | DAY       | YEAR                         |           |      |                   |  |  |
|---|--|-----------|------------------------------|-----------|------|-------------------|--|--|
| Mailing Address 231 GOLFVIEW RD.                          | 5  | 18        |                              | \$ 500.00 |      |                   |  |  |
| City ARDMORE  | State         Zip Code (Plus 4)           PA         190031019 |           |                              |           | 2018 |                   |  |  |
| Employer Name AQUA AMERICA, INC.                          |  |           | Occupation CHAIRMAN EMERITUS |           |      |                   |  |  |
| Employer Mailing Address/Principal Place of City Business |  |           | State                        |           |      | Zip Code (Plus 4) |  |  |
| 762 W. LANCASTER AVE.                                     |  | BRYN MAWR | PA 19010                     |           |      | 19010             |  |  |

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

| PAGE TOTAL     |
|----------------|
| \$<br>4,750.00 |

# 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   | ame of Filing Committee or Candidate |                 | Report  | ing Perio | od  |      |           |           |
|-------------------------------|--------------------------------------|-----------------|---------|-----------|-----|------|-----------|-----------|
|                               |                                      |                 | From:   |           |     | То:  |           |           |
|                               |                                      |                 |         | D         | ATE |      | A         | AMOUNT    |
| Full Name                     |                                      |                 |         | МО        | DAY | YEAR |           |           |
| Mailing Address               |                                      |                 |         |           |     |      | <b>\$</b> | 0.00      |
| City                          | State                                | Zip Code (      | Plus 4) |           |     |      |           |           |
| Receipt Description           | ·                                    | ·               |         | •         |     | •    | •         |           |
| Enter Grand Total of Part E o | on Schedule I. Detailer              | d Summary Page  | Section | 4         |     |      | Р         | AGE TOTAL |
|                               | Jonedane 1, Betanet                  | . Jammary ruge, | 200.011 | ••        |     |      | \$        | 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 |                            |          |  |  |  |  |  |  |
|--|------------------|----------------------------|----------|--|--|--|--|--|--|
| BENNINGHOFF FOR REPRESENTATIVE   | From:            | <u>5/1/2018</u> <b>To:</b> | 6/4/2018 |  |  |  |  |  |  |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR  |                  |                            |          |  |  |  |  |  |  |
| 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 Candida | ame of Filing Committee or Candidate |                       |          | Reporting Period |      |           |            |  |
|-------------------------------------|--------------------------------------|-----------------------|----------|------------------|------|-----------|------------|--|
|                                     | Fr                                   |                       |          |                  |      | То:       |            |  |
|                                     |                                      |                       |          | DATE             |      |           | AMOUNT     |  |
| Full Name of Contributor            |                                      |                       | МО       | DAY              | YEAR |           |            |  |
| Mailing Address                     | Mailing Address                      |                       |          |                  |      | <b>\$</b> | 0.00       |  |
| City                                | State                                | Zip Code (Plus 4)     |          |                  |      |           |            |  |
| Description of Contribution:        |                                      |                       |          |                  |      |           |            |  |
| Enter Grand Total of Part F on So   | chedule II, In-Kir                   | nd Contributions Deta | iled Sum | mary Pag         | je,  |           | PAGE TOTAL |  |
| Section 2.                          |                                      |                       |          |                  |      | \$        | 0.00       |  |

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

| Name of Filing Committee or Candidate   | ame of Filing Committee or Candidate |      |            |         | Re  | porting                | Period    |      |       |          |              |
|---|--------------------------------------|------|------------|---------|-----|------------------------|-----------|------|-------|----------|--------------|
|   |                                      |      |            |         | Fro | om:                    |           | То   |       |          |              |
|   |                                      |      |            |         | •   |                        | DATE      |      |       |          | AMOUNT       |
| Full Name of Contributor  |                                      |      |            |         |     | мо                     | DAY       | YEAR |       |          |              |
| Mailing Address   |                                      |      |            |         |     |                        |           |      | \$    | 0.00     |              |
| City  | State                                |      | Zip Code(F | Plus 4) |     |                        |           |      |       |          |              |
| Employer of Contributor   | -1                                   |      |            |         |     | Occupation             |           |      |       |          |              |
| Employer Mailing Address/Principal Pla<br>Business  | ce of                                | City |            | State   |     | Zip<br>4)              | Code(Plus | Desc | ripti | ion of C | Contribution |
| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. |                                      |      |            |         |     | <b>PAGE TOTAL</b> 0.00 |           |      |       |          |              |

## SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or C               | Candidate |                   | Reporti   | ng Period   |           |          |          |  |
|---|-----------|-------------------|---|-------------|-----------|----------|----------|--|
| BENNINGHOFF FOR REPRESE                     | NTATIVE   |                   | From  | <u>5/:</u>  | 1/2018    | То:      | 6/4/2018 |  |
|   |           |                   |   | DATE AN     |           |          |          |  |
| To Whom Paid PHOENIX FUNDRAISING PART       | NERS, LLC |                   | МО  | DAY         | YEAR      |          |          |  |
| Mailing Address 2601 N. FRONT ST. SUITE 101 |           |                   |   | 6           | 2018      | \$       | 4,700.00 |  |
| City HARRISBURG                             | State     | Zip Code (Plus 4) | Descrip   | tion of Exp | enditure  | :        |          |  |
|   | PA        | 17110             |   | AISING CO   |           |          | VENT     |  |
| To Whom Paid<br>SHEETZ                      | мо        | DAY               | YEAR  |             |           |          |          |  |
| Mailing Address RTE 322                     | 5         | 10                | 2018  | \$          | 32.50     |          |          |  |
| City DUNCANNON                              | State     | Zip Code (Plus 4) | Descrip   | tion of Exp | enditure  | ·<br>:   |          |  |
|   | PA        | 17020             | LEADE   | RSHIP CAM   | 1PAIGN T  | RAVEL EX | (PENSE   |  |
| <b>To Whom Paid</b> PALM RESTAURANT         |           |                   | МО  | DAY         | YEAR      |          |          |  |
| Mailing Address 200 S. BRG                  | OAD ST.   |                   | 5   | 11          | 2018      | \$       | 1,271.45 |  |
| City PHILADELPHIA                           | State     | Zip Code (Plus 4) | Descrip   | tion of Exp | enditure  | :<br>:   |          |  |
|   | PA        | 19102             | FUNDR   | AISER EVE   | ENT       |          |          |  |
| <b>To Whom Paid</b> PARKING GARAGE          | •         | •                 | МО  | DAY         | YEAR      |          |          |  |
| Mailing Address 1919 MARI                   | KET ST.   |                   | 5   | 11          | 2018      | \$       | 29.00    |  |
| City PHILADELPHIA                           | State     | Zip Code (Plus 4) | Descrip   | tion of Exi | enditure  | <u>'</u> |          |  |
|   | PA        | 19103             | Description of Expenditure FUNDRAISER-PARKING FEE |             |           |          |          |  |
| To Whom Paid ALZHEIMER'S ASSOCIATION        |           |                   | МО  | DAY         | YEAR      |          |          |  |
| Mailing Address 917 HALFMOON ST.            |           |                   | 5   | 11          | 2018      | \$       | 75.00    |  |
| City BELLEFONTE State Zip Code (Plus 4)     |           |                   |   | tion of Exp | penditure | <u> </u> |          |  |

16823

DAVID'S DREAMERS SOFTBALL TOURNAMENT SPONSOR

|   |       |                   |   |                            |          | PA | AGE 23    |  |  |
|---|-------|-------------------|---|----------------------------|----------|----|-----------|--|--|
| To Whom Paid KERRY BENNINGHOFF            |       |                   |   | DAY                        | YEAR     |    |           |  |  |
| Mailing Address 704 W. LAMB ST.           |       |                   |   | 14                         | 2018     | \$ | 500.11    |  |  |
| City BELLEFONTE                           | State | Zip Code (Plus 4) | Descrip   | tion of Exp                | enditure |    |           |  |  |
| DEELEI OM E                               | PA    | 16823             | REIMBURSEMENTS-CAMPAIGN EXPENSES                    |                            |          |    |           |  |  |
| To Whom Paid GOVERNORS PUB                |       |                   |   | DAY                        | YEAR     |    |           |  |  |
| Mailing Address 211 W. HIGH ST.           |       |                   |   | 18                         | 2018     | \$ | 50.00     |  |  |
| City BELLEFONTE                           | State | Zip Code (Plus 4) | Descrir   | tion of Exr                | enditure |    |           |  |  |
| - BELLET ONTE                             | PA    | 16823             | Description of Expenditure  LOCAL FUNDRAISER DINNER |                            |          |    |           |  |  |
| To Whom Paid MARATHON PETRO               |       |                   |   | DAY                        | YEAR     |    |           |  |  |
| Mailing Address 4180 WM PENN HWY          |       |                   | 5   | 22                         | 2018     | \$ | 52.01     |  |  |
| City MURRYSVILLE                          | State | Zip Code (Plus 4) | Description of Expenditure                          |                            |          |    |           |  |  |
|   | PA    | 15668             | LEADERSHIP CAMPAIGN TRAVEL EXPENSE                  |                            |          |    |           |  |  |
| To Whom Paid HRCC                         |       |                   |   | DAY                        | YEAR     |    |           |  |  |
| Mailing Address PO BOX 11787              |       |                   |   | 23                         | 2018     | \$ | 13,000.00 |  |  |
| City HARRISBURG                           | State | Zip Code (Plus 4) | Description of Expenditure SUPPORT                  |                            |          |    |           |  |  |
|   | PA    | 17108             |   |                            |          |    |           |  |  |
| To Whom Paid CBICC                        |       |                   |   | DAY                        | YEAR     |    |           |  |  |
| Mailing Address 131 S. FRASER ST. SUITE 1 |       |                   |   | 25                         | 2018     | \$ | 268.00    |  |  |
| City STATE COLLEGE                        | State | Zip Code (Plus 4) | Description of Expenditure                          |                            |          |    |           |  |  |
| J 2 3322232                               | PA    | 16801             | DUES  |                            |          |    |           |  |  |
| To Whom Paid THE HOME DEPOT               |       |                   |   | DAY                        | YEAR     |    |           |  |  |
| Mailing Address 2615 GREEN TECH DR.       |       |                   |   | 29                         | 2018     | \$ | 73.03     |  |  |
| City STATE COLLEGE                        | State | Zip Code (Plus 4) | Descrip   | Description of Expenditure |          |    |           |  |  |
|   | PA    | 16803             | HRCC EVENT MATERIALS                                |                            |          |    |           |  |  |

|                                      |                     |                                   |   |     |      |    | AGL 24     |
|--------------------------------------|---------------------|-----------------------------------|---|-----|------|----|------------|
| To Whom Paid<br>USPS                 | мо                  | DAY                               | YEAR  |     |      |    |            |
| Mailing Address 132 N. ALLEGHENY ST. |                     |                                   |   | 29  | 2018 | \$ | 50.00      |
| City BELLEFONTE                      | State<br>PA         | <b>Zip Code (Plus 4)</b> 16823    | Description of Expenditure POSTAGE                        |     |      |    |            |
| To Whom Paid APPLEBEES               |                     |                                   |   | DAY | YEAR |    |            |
| Mailing Address 12 COLONNADE WAY     |                     |                                   |   | 29  | 2018 | \$ | 42.19      |
| City STATE COLLEGE                   | State<br>PA         | <b>Zip Code (Plus 4)</b><br>16803 | Description of Expenditure STRATEGY CAMPAIGN MEETING 2018 |     |      |    |            |
| To Whom Paid HRCC                    |                     |                                   |   | DAY | YEAR |    |            |
| Mailing Address PO BOX 11787         |                     |                                   |   | 4   | 2018 | \$ | 2,000.00   |
| City HARRISBURG                      | <b>State</b><br>PA  | <b>Zip Code (Plus 4)</b> 17108    | Description of Expenditure EVENT SPONSORSHIP/TICKETS      |     |      |    |            |
| To Whom Paid DUNHAMS SPORTING GOODS  |                     |                                   |   | DAY | YEAR |    |            |
| Mailing Address 2901 E. COLLEGE AVE  |                     |                                   |   | 4   | 2018 | \$ | 34.94      |
| City STATE COLLEGE                   | <b>State</b><br>PA  | <b>Zip Code (Plus 4)</b><br>16801 | Description of Expenditure EVENT GAMES                    |     |      |    |            |
| Enter Grand Total of Expendi         | tures on Page 1 Pa  | unort Cover Page Item D           |   |     |      |    | PAGE TOTAL |
| Liner Grand Total of Expendi         | tures on Paye 1, Re | port cover rage, Item D           | -   |     |      | \$ | 22,178.23  |