

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		8000661		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> LAWRENCE COUNTY REPUBLICAN COMMITTEE												
<b>Street Address:</b>												
<b>City:</b> NEW CASTLE						<b>State:</b> PA		<b>Zip Code:</b> 16105				
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2018	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>				
						11	6	2018				
									(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		10	23	2018		11	26	2018				
<b>A. Amount Brought Forward From Last Report</b>						\$ 2,103.55						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 17,330.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 19,433.55						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 1,446.97						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 17,986.58						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 0.00						

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
LAWRENCE COUNTY REPUBLICAN COMMITTEE	From: <u>10/23/2018</u> To: <u>11/26/2018</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 4,030.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 2,200.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 2,200.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 10,100.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 10,100.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 1,000.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 17,330.00
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# PART B

## 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)**

<b>Name of Filing Committee or Candidate</b> LAWRENCE COUNTY REPUBLICAN COMMITTEE				<b>Reporting Period</b> From: <u>10/23/2018</u> To: <u>11/26/2018</u>			
				<b>DATE</b>		<b>AMOUNT</b>	

  

<b>Full Name of Contributor</b> ROBERT DELSIGNORE (AD)			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 75.00
<b>Mailing Address</b>			10	19	2018	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105				

  

<b>Full Name of Contributor</b> LESLIE BUCCI (AD)			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>			10	24	2018	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105				

  

<b>Full Name of Contributor</b> LAWRENCE COUNTY SOCIAL SERVICES (AD)			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>			10	19	2018	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101				

  

<b>Full Name of Contributor</b> ANGELO PAPA (AD)			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>			10	15	2018	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105				

  

<b>Full Name of Contributor</b> ROBERT DELSIGNORE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 75.00
<b>Mailing Address</b>			10	26	2018	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105				

  

<b>Full Name of Contributor</b> DAN VOGLER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 75.00
<b>Mailing Address</b>			10	18	2018	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105				

  

<b>Full Name of Contributor</b> DONNA SMARRELLI			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 125.00
<b>Mailing Address</b>			10	24	2018	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105				

Full Name of Contributor VIRGINIA HAMILTON			MO	DAY	YEAR	\$ 75.00
Mailing Address			10	22	2018	
City	NEW CASTLE	State PA				
Full Name of Contributor LYNNE RYAN			MO	DAY	YEAR	\$ 150.00
Mailing Address			10	26	2018	
City	NEW CASTLE	State PA				
Full Name of Contributor ELDER VOGEL FOR SENATE			MO	DAY	YEAR	\$ 150.00
Mailing Address			10	23	2018	
City	ROCHESTER	State PA				
Full Name of Contributor AARON TERVO			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	24	2018	
City	NEW WILMINGTON	State PA				
Full Name of Contributor JIM ADAMS			MO	DAY	YEAR	\$ 125.00
Mailing Address			10	25	2018	
City	EVANS CITY	State PA				
Full Name of Contributor ELECT PARKE WENTLING			MO	DAY	YEAR	\$ 150.00
Mailing Address			10	21	2018	
City	GREENVILLE	State PA				
Full Name of Contributor DOM MARZANO			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	22	2018	
City	NEW CASTLE	State PA				
Full Name of Contributor CHRIS MITSOS			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	19	2018	
City	NEW CASTLE	State PA				
Full Name of Contributor CLAUDIA NELSON			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	22	2018	
City	NEW CASTLE	State PA				

Full Name of Contributor HOWARD LENT			MO	DAY	YEAR	\$ 75.00
Mailing Address			10	26	2018	
City	NEW CASTLE	State PA				
Full Name of Contributor KEN JONES			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	22	2018	
City	NEW CASTLE	State PA				
Full Name of Contributor TERVO MASONRY (AD)			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	24	2018	
City	NEW WILMINGTON	State PA				
Full Name of Contributor FIBERCON INTERNATIONAL (AD)			MO	DAY	YEAR	\$ 125.00
Mailing Address			10	25	2018	
City	EVANS CITY	State PA				
Full Name of Contributor PAULA PRENTICE			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	14	2018	
City	EDINBURG	State PA				

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

**PAGE TOTAL**

\$ 2,200.00

**PART C**

# Contributions Received From Political Committees

## OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate	Reporting Period	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$	0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

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

<b>PAGE TOTAL</b>
\$ 0.00

**PART D**  
**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.)**

<b>Name of Filing Committee or Candidate</b>  LAWRENCE COUNTY REPUBLICAN COMMITTEE	<b>Reporting Period</b>  <b>From:</b> <u>10/23/2018</u> <b>To:</b> <u>11/26/2018</u>
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				DATE	AMOUNT		
<b>Full Name of Contributor</b> FLEMING STEEL (AD)				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b>				10	26	2018	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105					
<b>Employer Name</b> FLEMING STEEL				<b>Occupation</b> OWNER			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	
<b>Full Name of Contributor</b> ROBERT BRUCE				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,500.00
<b>Mailing Address</b>				10	26	2018	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101					
<b>Employer Name</b> BRUCE & MERRILEES				<b>Occupation</b> OWNER			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	
<b>Full Name of Contributor</b> ROBERT PRESTON				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,500.00
<b>Mailing Address</b>				10	23	2018	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105					
<b>Employer Name</b> PRESTON MOTORS				<b>Occupation</b> OWNER			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	
<b>Full Name of Contributor</b> JOHN MILES				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b>				10	26	2018	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105					
<b>Employer Name</b> STEELITE INTERNATIONAL				<b>Occupation</b> OWNER			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	



<b>Full Name of Contributor</b> MIKE KELLY FOR CONGRESS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 600.00
<b>Mailing Address</b>			10	23	2018	
<b>City</b> LYNDORA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16045				
<b>Employer Name</b> UNITED STATES CONGRESS			<b>Occupation</b> CONGRESSMAN			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>		<b>Zip Code (Plus 4)</b>	

<b>Full Name of Contributor</b> DAVID BARENSFELD			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 5,000.00
<b>Mailing Address</b>			10	18	2018	
<b>City</b> ELLWOOD CITY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16117				
<b>Employer Name</b> ELLWOOD QUALITY STEEL			<b>Occupation</b> OWNER			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>		<b>Zip Code (Plus 4)</b>	

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

<b>PAGE TOTAL</b>
<b>\$</b> 10,100.00

## PART E 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.**

<b>Name of Filing Committee or Candidate</b>  LAWRENCE COUNTY REPUBLICAN COMMITTEE	<b>Reporting Period</b>  <b>From:</b> <u>10/23/2018</u> <b>To:</b> <u>11/26/2018</u>
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DATE				AMOUNT
<b>Full Name</b>				
MIKE KELLY FOR CONGRESS				
<b>Mailing Address</b>				
<b>City</b> LYNDORA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16045	<b>MO</b> 10 <b>DAY</b> 25 <b>YEAR</b> 2018	\$ 1,000.00
<b>Receipt Description</b> HE RETURNED A CAMPAIGN CONTRIBUTION SO I HAD TO VOID THE CHECK FROM OCTOBER				

**Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.**

<b>PAGE TOTAL</b>
\$ 1,000.00

## 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
LAWRENCE COUNTY REPUBLICAN COMMITTEE		From: <u>10/23/2018</u> To: <u>11/26/2018</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	0.00

**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
LAWRENCE COUNTY REPUBLICAN COMMITTEE	From <u>10/23/2018</u> To: <u>11/26/2018</u>

				DATE		AMOUNT	
To Whom Paid PAULA PRENTICE				MO	DAY	YEAR	\$ 100.99
Mailing Address				11	9	2018	
City	EDINBURG	State	PA	Zip Code (Plus 4)	16116	Description of Expenditure REIMB FOR FALL DINNER DECORATIONS	
To Whom Paid COPY SHOP				MO	DAY	YEAR	\$ 992.00
Mailing Address				11	9	2018	
City	NEW CASTLE	State	PA	Zip Code (Plus 4)	16105	Description of Expenditure FALL DINNER PROGRAM	
To Whom Paid HENRY KARKI				MO	DAY	YEAR	\$ 51.94
Mailing Address				11	21	2018	
City	NEW CASTLE	State	PA	Zip Code (Plus 4)	16101	Description of Expenditure REIMB FOR WENDELL AUGUST FORGE PLATE FOR DINNER	
To Whom Paid PAULA PRENTICE				MO	DAY	YEAR	\$ 202.04
Mailing Address				11	21	2018	
City	EDINBURG	State	PA	Zip Code (Plus 4)	16116	Description of Expenditure REIMB FALL DINNER DECORATIONS AND PENS	
To Whom Paid CHUCK AND/OR LINDA SONNTAG				MO	DAY	YEAR	\$ 100.00
Mailing Address				10	22	2018	
City	NEW CASTLE	State	PA	Zip Code (Plus 4)	16101	Description of Expenditure REIMB FOR PENS FOR FALL DINNER	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL \$ 1,446.97

