Campaign Finance Report

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

Filer Identificati Number :	on 20	170119				Repo Filed		/ :	CA	ANDIDATE COMMITTEE LOBBYIST									
Name of Filing C	ommittee, Cand	lidate or l	.obbyis	st:		GREA	T A	MER	ICAN	PEN	INSYL	VANI	A FUND)					
Street Address:	552 ELKNU	D LANE																	
City:	JOHNSTOW	N							State	e:	PA		Zip Code: 15905-2064						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND I		/ PRE-	2.		30 DA PRIMA			OST-	3.		AMENDMENT REPORT?		Yes		lo	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND I		/ PRE-	- 5.		30 DA		Р	OST-	6. X		TERMINA REPORT		Yes	Ī	lo	/
report type)	ANNUAL REPOR	RT 7.	Year	2019			ı		IG ME					PAPER		\	DIS	ETTE	
Name of Office S	ought by Candi	date:				-			DAT	ΕO	F ELE	CTIC	N	District Number	Office Code	Pai	rty Cod	e Cou	
									МО		DAY	ΥI	AR			-			
										11		5	2019		(SEE IN	STRUCTI	ONS FO	R CODES	5)
	Receipts and	МО	DA	Y	YEAR				МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONL	′	
Expenditures	trom:		10	22	20)19	T)		11	:	25	2019						
A. Amount Brought Forward From Last Report								\$				3,	159.82						
B. Total Moneta	B. Total Monetary Contributions And Receipts (From Schedule I) \$ 2,500.00																		
C. Total Funds	Available (Sum	Of Lines A	A and E	3)				\$				5,	559.82						
D. Total Expend	ditures (From S	chedule I	II)					\$				2,3	325.00						
E. Ending Cash Balance (Subtract Line D From Line C)						\$				3,3	34.82								
F. Value Of In-	Kind Contribution	ns Receiv	ed (Fr	om Sc	hedul	e II)		\$					0.00						
G. Unpaid Debt	s And Obligation	ns (From	Schedu	ule IV)			\$					0.00						
					AFF1	[DA\	/IT	SE	CTIO	NC									
PART I - If this is				_									_		e 1				
I swear (or affirm) correct and comple		nciuaing th	e attaci	iea scr	ieauies	Tilea (on p	aper	ог ву е	electr	onic m	eaium	, are to t	ne best o	г ту кпоч	vieage	and be	eller , tr	ue
Sworn to and subs	cribed before me t day of	his	20							•		5	Signature	of Perso	n Submitt	ing Re	port		
	Signa	nture	_					•						Prin	ted Name	1			
My Commission Ex	xpires													Ema	il				
	МО	0	AY		YR						Are	ea Co	le	Daytim	e Teleph	one Nu	mber		ᆜ
Part II- If this is	a report of a ca	ndidate's	autho	rized	Comm	ittee,	, Ca	ndid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my know	ledge ar	nd belie	ef this	politic	al d	omm	ittee h	as no	ot viola	ted ar	y provis	ions of the	e act of Ju	ıne 3,1	937 (P	.L. 133	3,
Sworn to and subscribed before me this day of 20											s	ignature o	of Candida	ate			_		
			_ 20 _											Printe	d Name				-
My Commission Exp	Signatur	re												Ema	il				- $ $
, commission exp																			_
	МО		PAY		YR						Area	Code		Da	aytime To	elephor	ne Nun	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period						
GREAT AMERICAN PENNSYLVANIA FUND	From:	10/22/20	<u>19</u> To:	11/25/2019				
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor								
TOTAL for the Reporting) Period	(1)	\$	0.00				
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)								
Contributions Received From Political Committees (Part A)			\$	0.00				
All Other Contributions (Part B)			\$	0.00				
TOTAL for the Reporting) Period	(2)	\$	0.00				
3. Contributions Received Over \$250.00 (From Part C and Part D)								
Contributions Received From Political Committees (Part C)			\$	0.00				
All Other Contributions (Part D)			\$	2,500.00				
TOTAL for the Reporting) Period	(3)	\$	2,500.00				
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			\$	2,500.00				

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

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

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

PAGE TOTAL\$ 0.00

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filling Committee of Candidate			Reporting Period From: To:					
			l		DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

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

PAGE TOTAL \$ 0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

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

Name of Filing Committee or Candidate	me of Filing Committee or Candidate Re		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Comn	ne of Filing Committee or Candidate				orting Pe	riod			
GREAT AMERICAN F	PENNSYLVANIA FUN	ND		Fron	m:	10/22/2	<u>019</u> To	o: <u>1</u>	.1/25/2019
					D/	ATE		АМС	DUNT
Full Name of Contrib Robert A. Gleason, J					МО	DAY	YEAR		
Mailing 55 Address	2 Elknud Lane						2010	\$	2,500.00
City Johnstown		State PA	Zip Code (Plus 15905	s 4)	11	11 1 2019		,	
Employer Name Wa	aterford Solutions,	LLC			Occupation Consultant				
Employer Mailing Add Business	lress/Principal Plac	e of	City			State		Zip Code	(Plus 4)
552 Elknud Lane Johnstown				v n		PA	ļ	15905	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Se			Section	on 3.			PAC	GE TOTAL	
		,	, ,		-			\$	2,500.00

OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or	Candidate		Report	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Peri	od						
GREAT AMERICAN PENNSYLVANIA FUND	From:	<u>10/22/2019</u> To:	11/25/2019					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR	t						
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)								
TOTAL for the Reporting Pe	eriod (2)	\$	0.00					
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)								
TOTAL for the Reporting Pe	eriod (3)	\$	0.00					
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00					

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	me of Filing Committee or Candidate				Reporting	Period				
					From:		То:) :		
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address						\$	0.00			
City	State		Zip Code(Plus	4)						
Employer of Contributor					Occupa	ation				
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detail				ailed				PAGE TOTAL		
Summary Page, Section 3.									0.00	

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
GREAT AMERICAN PENNSYLVANIA FUN	D		From	10/2	2/2019	То:	11/25/2019
				AMOUNT			
To Whom Paid Red Maverick Media				DAY	YEAR		
Mailing Address 1426 N 3rd Street; Suite 310				31	2019	\$	1,325.00
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure Dan Miller mailing				
To Whom Paid RCAC			мо	DAY	YEAR		
Mailing Address PO Box 23156			10	31	2019	\$	1,000.00
CityPittsburghStateZip Code (Plus 4)PA15222			Descrip Contrib	otion of Exp oution	penditure		

		!	PAGE TOTAL
Enter Grand Total of Expenditures	on Page 1, Report Cover Page, Item D.	\$	2,325.00