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 9600	102			Rep File			CAND	IDATE		СОМ	4ITTEE	√	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		BEN	NIN	GHOF	F FOR F	EPRES	ENTA	TIVE						
Street Address:	328 E. LAMB :	ST.															
City:	BELLEFONTE				State: P				PA			Zip Cod	le: 16	5823			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	- 2	2.	30 DA		POST-	3.		AMENDM REPORT		Yes	No	Y	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	<u>-</u> !	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	Y	
report type)	ANNUAL REPORT	7. X	Year 2019			FILING METHOD () CHECK ONE						PAPER DISKETTE					
Name of Office S										Office Code	Par	ty Code	County	,			
								МО	DAY	YI	EAR		1				_
								11		5	2019		(SEE IN	STRUCTI	ONS FOR (ODES)	_
	Summary of Receipts and Expenditures from: MO DAY YEAR MO DAY YEAR TO 10 001								EAR	FO	R OFFI	CE USE	ONLY				
Expenditures	irom:	1	11 26	2	019	Т	0	12	2	31	2019						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			80,	640.75						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 8,000.00																	
C. Total Funds Available (Sum Of Lines A and B) \$88,640.75																	
D. Total Expenditures (From Schedule III) \$ 11,319.12																	
E. Ending Cash Balance (Subtract Line D From Line C) \$ 77,321.63																	
F. Value Of In-	Kind Contributions	Receive	ed (From Se	hedu	le II)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			1			_
				AFF	IDA	١٧٧	T SE	CTION									
	s a Committee rep	-	_														
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached scl	nedule	s filed	d on	paper	or by elec	tronic m	edium	ı, are to t	he best o	f my kno	wledge	and belie	ef , true	4,
Sworn to and subs	cribed before me this day of	i	20							5	Signature	of Perso	n Submit	ting Rep	ort		
	Signatu						- -					Prin	ted Name	e			٠
My Commission Ex	•											Ema	il				٠
	мо	D/	AY	YR					Ar	ea Co	de	Daytim	e Teleph	none Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shall	sign h	ere.							Ī
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	comm	ittee has	not viola	ted ar	ny provis	ions of the	e act of J	une 3,1	937 (P.L	1333,	١
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate			۱
	day of						-					Printe	d Name				.
	Signature						-										
My Commission Exp	-											Ema	il				
	МО	D/	AY	YR	1		•		Area	Code		Da	aytime T	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
BENNINGHOFF FOR REPRESENTATIVE	From:	11/26/201	<u>.9</u> To:	12/31/2019
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)			\$	6,500.00
All Other Contributions (Part D)			\$	1,500.00
TOTAL for the Reporting) Period	(3)	\$	8,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	8,000.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporti	ng Period			
			From:		То	:	
		I		DATE			AMOUNT
Full Name of Contribut	ing Committee		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

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

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

PAGE TOTAL \$0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

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

Name of Filing Committee or Candidate			Reporting	Period			
BENNINGHOFF FOR REPRESENTATIVE			From:	11/2	6/2019	То:	12/31/2019
				DA	TE		AMOUNT
Full Name of Contributing Committee MARATHON PETROLEUM CORP EMPLOY	EES PAC			мо	DAY	YEAR	
Mailing Address 539 S. MAIN ST.							\$ 1,000.00
City FINDLAY	State OH	Zip Code 458403	e (Plus 4) 3229	12	24	2019	
Full Name of Contributing Committee USACS				МО	DAY	YEAR	
Mailing Address 4535 DRESSLER RD. City CANTON	State		e (Plus 4)	12	24	2019	\$ 1,000.00
Full Name of Contributing Committee	OH	44718					
DOMINION PAC				МО	DAY	YEAR	
Mailing Address PO BOX 26666							\$ 500.00
City RICHMOND	State VA	Zip Code 23261	e (Plus 4)	12	19	2019	
Full Name of Contributing Committee DUANE MORRIS LLP GOVERNMENT				МО	DAY	YEAR	
Mailing Address 30 S 17TH ST.				11	29	2019	\$ 1,000.00
City PHILADELPHIA	State PA	Zip Code 19103	e (Plus 4)	11		2019	
Full Name of Contributing Committee CAPITAL BLUE-PAC				мо	DAY	YEAR	
Mailing Address PO BOX 60710							\$ 1,000.00
City HARRISBURG	State PA	Zip Code 171060	e (Plus 4) 9710	11	29	2019	

Full Name of Contributing Committe MERCK EMPLOYEES PAC	ee	МО	DAY	YEAR		
Mailing Address 601 PENNSYLV	ANIA AVE NW NOR	TH BLDG, SUITE 1200				\$ 1,000.00
City WASHINGTON	State	Zip Code (Plus 4)	11	29	2019	
	DC	20004				
Full Name of Contributing Committee INDEPENDENCE PAC	ee	МО	DAY	YEAR		
Mailing Address PO BOX 7465						\$ 500.00
City NEW YORK	State	Zip Code (Plus 4)	11	29	2019	
	PA	10150				
Full Name of Contributing Committee INDEPENDENCE PAC	ee		МО	DAY	YEAR	
Mailing Address PO BOX 7465						\$ 500.00
City NEW YORK	State	Zip Code (Plus 4)	11	29	2019	
	PA	10150				

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

PAGE TOTAL \$ 6,500.00

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 Ca	Name of Filing Committee or Candidate					Reporting Period					
BENNINGHOFF FOR REPRESEN	ITATIVE			Fror	n:	11/26/2	<u>019</u> To	<u>12/31/201</u>			
			•		D	ATE		АМО	UNT		
Full Name of Contributor K&L GATES LLP					мо	DAY	YEAR				
Mailing 210 SIXTH AV	/E. K&L GATES	CENTER						\$	1,000.00		
City PITTSBURGH	State	Zi	p Code (Plus	4)	12	21	2019				
	PA	15	5222								
Employer Name K&L GATES				Occupat	tion I	NTERNATIONAL LAW FIRM					
Employer Mailing Address/Principal Place of City Business						State		Zip Code ((Plus 4)		
210 SIXTH AVE.K&L GATES CENTER PITTSBURGH				RGH		PA		15222			
Full Name of Contributor CLIFFORD S. KERSTETTER					МО	DAY	YEAR				
Mailing PO BOX 575								\$	500.00		
City MILROY	State	Zi	p Code (Plus	4)	12	24	2019				
	PA	17	70630575								
Employer Name THE LONDON	DERRY RESTAURANT	l			Occupat	tion	WNER				
Employer Mailing Address/Princ Business	ipal Place of		City			State		Zip Code ((Plus 4)		
47 AUTO AUCTION CIRCLE			DEED CV (TI			PA		17084			
47 AOTO ACCTION CIRCLE			REEDSVII	LLE		1.7		17004			

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 Ca	Name of Filing Committee or Candidate			ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•				•	•	
Enter Grand Total of Part E on	Schedule T Detailed	l Summary Page	Section	4			ı	PAGE TOTAL
zinci. Grana rotal or rait z on	ocilculate 1, Detailet	. Janimary rage,	Section				\$	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	
BENNINGHOFF FOR REPRESENTATIVE	From:	<u>11/26/2019</u> To:	12/31/2019
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR	ł .	
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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	Name of Filing Committee or Candidate						
			From:				
				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	те 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					Re	porting l	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									- \$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II, I	n-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
BENNINGHOFF FOR REPRESENTATIVE			From	11/20	5/2019	То:	12/31/2019	
				DATE			AMOUNT	
To Whom Paid GIANT FUEL				DAY	YEAR			
Mailing Address 12 NEWPORT PLAZA			11	27	2019	\$	25.02	
City NEWPORT	State PA	Zip Code (Plus 4) 17074	Description of Expenditure TRAVEL EXPENSE-CAMPAIGN REPORT TO HARRISBURG				RT TO	
To Whom Paid THE GOVERNORS PUB				DAY	YEAR			
Mailing Address 211 W. HIGH ST.			12	5	2019	\$	30.25	
City BELLEFONTE	State PA	Zip Code (Plus 4) 16823	Description of Expenditure CAMPAIGN ORGANIZATION LUNCH MEETING					
To Whom Paid USPS			мо	DAY	YEAR			
Mailing Address 132 N. ALLEGHENY ST.			12	5	2019	\$	55.00	
City BELLEFONTE	State PA	Zip Code (Plus 4) 16823	Description of Expenditure CAMPAIGN MAILING					
To Whom Paid SHEETZ				DAY	YEAR			
Mailing Address 108 SAVANNAH LANE				9	2019	\$	25.00	
City CENTRE HALL	State PA	Zip Code (Plus 4) 16828		tion of Exp EXPENSE			CONSTITUENT	
To Whom Paid WARWICK HOTEL				DAY	YEAR			
Mailing Address 65 W. 54TH ST. AVE OF AMERICAS				8	2019	\$	957.12	
City NEW YORK	State NY	Zip Code (Plus 4) 10019		Description of Expenditure HRCC EVENT				

							PAGE 13	
To Whom Paid LONG ISLAND TAXI SERVICE				DAY	YEAR			
Mailing Address 37-26 34TH ST.				8	2019	\$	21.36	
City LONG ISLAND CITY	State	Zip Code (Plus 4)	Description of Expenditure				A LIDOS EVENT	
	NY	11101	FARE FOR RIDE TO AMTRAK FROM HRCC EVENT					
To Whom Paid HRCC				DAY	YEAR			
Mailing Address PO BOX 11787				13	2019	\$	100.00	
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	17108	SUPPLIES					
To Whom Paid MARK LONG				DAY	YEAR			
Mailing Address 129 SPOTTS RD.			12	15	2019	\$	90.00	
City MILL HALL	State PA	Zip Code (Plus 4) 17751	Description of Expenditure EVENT TICKET					
To Whom Paid ROXY CAFE				DAY	YEAR			
Mailing Address 274 NORTH ST.			12	16	2019	\$	15.37	
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	17101	CAMPAIGN 2020 MEETING					
To Whom Paid HRCC				DAY	YEAR			
Mailing Address PO BOX 11787			12	29	2019	\$	10,000.00	
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	Description of Expenditure				
	PA	17108	DONATION					
Enter Grand Total of Expendit	uros on Poss 1 Ps	nort Cover Page Them D					PAGE TOTAL	
Linter Grand Total of Expendit	uies vii raye 1, Ke	port Cover Page, Item D	•			\$	11,319.12	
						•		