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 8000	661				port		CAND	CANDIDATE COMMITTEE V LOBBYIST								
Number : Filed By : Element																	
Street Address:	3001 WILMIN	GTON R	ROAD														
City:	NEW CASTLE							State:	PA			Zip Code: 16105					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	-	2.	30 DA		POST-	3.		AMENDM REPORT		Yes	No	~		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDA' ELECTION	y pre	≣-	5.	30 DA		POST-	6.		TERMIN/ REPORT		Yes	No	~	
report type)	ANNUAL REPORT	7.	Year 2020					NG METH CHECK (PAPER		/	DISKE	ГТЕ	
Name of Office S	Sought by Candida	te:	•					DATE (OF ELE	CTIC	N	District Number	Office Code	Par	ty Code	County Code	
	, , , , , , , , , , , , , , , , , , ,							МО	DAY	YI	AR	Number	Code			Code	
								1:	1	3	2020		(SEE IN	ISTRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	DAY YEAR FOR OFFICE USE ONL							
Expenditures	from:		6 23	2	020	Т	0		9	14	2020)20					
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			5,4	478.18						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	· I)	\$			10,0	511.00						
C. Total Funds Available (Sum Of Lines A and B)							\$			16,0	089.18						
D. Total Expenditures (From Schedule III)							\$			2,5	37.93						
E. Ending Cash	Balance (Subtract	t Line D	From Line (C)			\$			13,5	51.25						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II	()	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			,			
				AFF	ID/	\VI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign l	here.	If th	is is	a Car	ndidate ı	eport,	candi	date sig	jn here.					
I swear (or affirm) correct and complete) that this report, incl ete.	uding the	e attached scl	nedule	s file	d on	paper	or by elec	tronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , true	
Sworn to and subs	cribed before me this	•	20							5	Signature	of Perso	n Submit	ting Rep	ort		
	- 		_				- -					Prin	ted Nam	e			
My Commission Ex	Signatu opires	re										Ema	il				
	мо	D	AY	YR			_		Ar	ea Coo	le	Daytim	e Telepi	none Nu	mber	_	
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shal	l sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	tical	comm	ittee has	not viola	ited ar	y provis	ions of th	e act of J	une 3,1	937 (P.L.	1333,	
Sworn to and subso	ribed before me this										s	ignature (of Candid	ate			
	day of		_ 20				_					Printe	d Name				
	Signature						-										
My Commission Exp	_											Ema	il	_			
	МО	D	AY	YR	1		-		Area	Code		D	aytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
LAWRENCE COUNTY REPUBLICAN COMMITTEE	From:	<u>6/23/202</u>	<u>0</u> To:	9/14/2020
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	5,511.00
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)	\$	100.00		
TOTAL for the Reporting	\$	100.00		
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)			\$	5,000.00
TOTAL for the Reporting) Period	(3)	\$	5,000.00
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	d enter am ge, Item B.	ount)	\$	10,611.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value		\$2) in the			
Nume of Fining Comm		From:			To:			
					DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	!	I	!		<u> </u>			DAGE 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 Filing Committee or Candidate

Reporting Period

LAWRENCE COUNTY REPUBLICAN COMMITTEE

From: 6/23/2020 To:

DATE

9/14/2020

AMOUNT

Full Name of Contributor CYNTHIA FOX	МО	DAY	YEAR			
Mailing Address 170 DOUGLASS ROAD						\$ 100.00
City BEAVER FALLS State Zip Code (Plus 4) 15010		8	24	2020		

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

PAGE TOTAL \$ 100.00

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:			То:			
				DA	TE		Α	MOUNT	
Full Name of Contributing Commit	tee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00	

ALL OTHER CONTRIBUTIONS

OVER \$250.00

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

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

Name of Filing Committee or Candidate					Reporting Period						
LAWRENCE COUNTY REPUBLICAN CON	LAWRENCE COUNTY REPUBLICAN COMMITTEE Fro					<u>020</u> To	To: 9/14/2020				
					ATE		AMOUNT				
Full Name of Contributor PA FUTURE FUND ROBERT ASHER				МО	DAY	YEAR					
Mailing P.O. BOX 6128							\$	5,000.00			
City HARRISBURG	State PA	Zip Code (Plus 17112	4)	6	30	2020					
Employer Name PA FUTURE FUND				Occupation CHAIRMAN							
Employer Mailing Address/Principal Place Business	ce of	City			State		Zip Code (I	Plus 4)			
80 WAMBOLD ROAD		SOUDER	ΓON		PA		18964				
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			PAGI	5,000.00			

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		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	MOUNT
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. Detailed	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 1, Betanet	. Jammar y r uge,	500.011				\$	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 Peri	od							
LAWRENCE COUNTY REPUBLICAN COMMITTEE	From:	6/23/2020 To :	9/14/2020						
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	TF)								
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 Candidate Re				Reporting 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	ge,		PAGE TOTAL		
Section 2.						\$	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate			Re	Reporting Period					
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (Contributions De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
LAWRENCE COUNTY REPUBLICAN COM	IMITTEE		From	<u>6/23</u>	9/14/2020		
				DATE	AMOUNT		
To Whom Paid STACY GARRITY			мо	DAY	YEAR		
Mailing Address P.O. BOX 62224				5	2020	\$	100.00
City HARRISBURG	1 -	otion of Exp					
To Whom Paid DONALD TRUMP FOR PRESIDENT % RNC				DAY	YEAR		
Mailing Address P.O. BOX 96994			8	5	2020	\$	1,000.00
City WASHINGTON	State DC	Zip Code (Plus 4) 200906994		otion of Exp IGN DONA			
To Whom Paid THE LETTERPRESS SHOPPE			МО	DAY	YEAR		
Mailing Address RJ CASEY INDUSTRI	AL PARK		8	5	2020	\$	300.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15233	1	otion of Exp	penditure		
To Whom Paid MHR RENTALS			МО	DAY	YEAR		
Mailing Address 2023 MERCER NEW	WILMINGTON ROAD		8	31	2020	\$	1,137.93
City NEW WILMINGTON	State PA	Zip Code (Plus 4) 16142	1	otion of Exp			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

2,537.93