# **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 :	ion 2017(	0119			Report Filed B		CANDI	DATE		СОМІ	MITTEE	✓	LOB	BYIST		
	Committee, Candida	ate or Lo	obbyist:				RICAN PE	NNSYL	VANIA	A FUND	)				-	
Street Address:	552 ELKNUD L	LANE														
City:	JOHNSTOWN						State:	PA			Zip Co	<b>de:</b> 15	905-2	.064		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE-	2. <b>X</b>	30 DA PRIM		POST-	3.		AMENDN REPORT		Yes	V No	C	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	Y PRE-	- 5.	30 D/ ELEC		POST- 6.			TERMIN REPORT		Yes	No	C	$\checkmark$
	ANNUAL REPORT	7.	<b>Year</b> 2021				NG METHO CHECK O				PAPER		$\checkmark$	DISK	ETTE	
Name of Office S	Sought by Candidat	te:					DATE O	FELE	CTIO	N	District Number	Office Code	Par	ty Code	e Cour Code	
							мо	DAY	YE	AR		•				
							11		2	2021		(SEE INS	TRUCTI	ONS FOR	CODES	)
	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY		
Expenditures	; from:		3 30	20	021 <b>T</b>	0	5		3	2021						
A. Amount Bro	ought Forward From	n Last Re	eport			\$			4,3	34.82						
B. Total Moneta	ary Contributions A	And Rece	aipts (From	1 Sched	lule I)	\$				0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 4,334.82																
D. Total Expend	ditures (From Sche	adule III	[)			\$	,		1,7	50.00						
E. Ending Cash	Balance (Subtract	Line D	From Line (	C)		\$	 }		2,5	84.82	-					
F. Value Of In-	Kind Contributions	Receive	ed (From So	chedule	e II)	\$	,			0.00	-					
G. Unpaid Debt	ts And Obligations	(From S	chedule IV	') 		\$	; 			0.00						
				AFFI	IDAVI	T SE	CTION									
	s a Committee repo		-							-						
I swear (or affirm) correct and comple	) that this report, incluete.	uding the	attached sci	hedules	filed on	paper	or by elect	ronic m	edium,	are to t	the best o	of my knov	vledge	and bei	ief , tr	ue
Sworn to and subs	scribed before me this day of		20						S	ignature	e of Perso	n Submitt	ing Rej	ort		-
	Signatur	re				_					Prin	ited Name				-
My Commission Ex	-					_					Ema	il				_
	мо	DA	۱Y	YR				Are	ea Cod	e	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's a	authorized	Commi	ittee, C	andid	ate shall	sign he	ere.							
No 320) as amende		ıy knowle	dge and beli	ef this p	political	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.I	L. 133	3,
Sworn to and subsc	cribed before me this day of		20							s	ignature	of Candida	ite			-
						-					Printe	ed Name				-
My Commission Exp	Signature					-					Ema	iil				_
	мо	DA	4Y	YR		-		Area	Code		D	aytime Te	elephor	ie Numł	ber	-

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** GREAT AMERICAN PENNSYLVANIA FUND From: <u>3/30/2021</u> To: <u>5/3/2021</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PAGE 3

# PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candid	ate		Repor	rting I	Period				
				From:			То:		
					DATE			AMOUNT	
Full Name of Contributing Committee				10	DAY	YEAR			
Mailing Address							\$	0.00	
City State Zip Code (Plus 4)									
							Γ	PAGE TOTAL	

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

0.00

\$

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)									
Name of Filing Committee or Candidate Reporting Period									
From: To:									
					DATE			AMOUNT	
Full Name of Contributor				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									

# 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 Can	ndidate		Reporting	g Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	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.)

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

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address City State Zip Code (Plus 4)							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupation				
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

### 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.

Name of Filing Committee or Candida	te		Report	ting Perio	od				
			From: To:						
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	5	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description						•			
Enter Grand Total of Part E on Sch	dule T. Detailer	l Summary Page	Section	4				PAGE TO	ΓAL
		, sammary 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 Period		
GREAT AMERICAN PENNSYLVANIA FUND	From:	<u>3/30/2021</u> то:	<u>5/3/2021</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	「 F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 Candidate			Reporting	g Period			
			From:			То:	
				DATE		АМО	UNT
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 Schedule II, In-Kind Contributions Detail Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

### SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate					Rej	oorting P	Period			
					Fro	From: To:				
					DATE AM					AMOUNT
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$	0.00	
City	State		Zip Code(F	Plus 4)						
Employer of Contributor					Occupat	tion				
Employer Mailing Address/Principal Place of City State Business			State		Zip 4)	Code(Plus	Descri	ption o	f Contribution	

		I		
Enter Grand Total of Part G on Schedule I	I, In-Kind Co	ntributions Det	ailed	PAGE TOTAL
Summary Page, Section 3.	,			0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Can	didate		Reporti	ng Period				
GREAT AMERICAN PENNSYLVAN			From		<u>)/2021</u>	То:	<u>5/3/2021</u>	
				DATE			AMOUNT	
<b>To Whom Paid</b> Committee to Elect Don Robertsc	วท		мо	DAY	YEAR			
Mailing Address 321 Emerald	Street		4	1,000.00				
CityJohnstownStateZip Code (Plus 4)PA15902				Description of Expenditure Campaign Contribution				
To Whom Paid Committee to Elect Don Robertson				DAY	YEAR			
Mailing Address 321 Emerald	Street		4	12	2021	\$	500.00	
City Johnstown	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	15902	Campaign Contribution					
<b>To Whom Paid</b> Republican River Wards PAC			мо	DAY	YEAR			
Mailing Address 475 Pinewood	l Road		4	30	2021	\$	250.00	
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Ex	oenditure	 ,		
PA 19116			Contrib	oution				
		·					PAGE TOTAL	
Enter Grand Total of Expendit	ures on Page 1, Re	port Cover Page, Item I	<b>)</b> .			\$	1,750.00	