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 960	00102				port ed B		CA	NDII	DATE		COMN	1ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, Cand	idate or L	obbyist:		BEN	ININ	GHOF	F, KE	RRY	/ FOR	REP	СОМ						
Street Address:	335 E. LAM	3 ST																
City:	BELLEFONT	Ē						State	e:	PA			Zip Cod	le: 16	823			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRI		-	2.	30 DA		Р	OST-	3.		AMENDM REPORT?		Yes	N)	√
(place X to the right of							30 DA		Р	OST-	6. X	(TERMINA REPORT?		Yes	N)	\
report type)									PAPER		√	DISK	TTE					
Name of Office S	ought by Candid	ate:	-		•			DAT	E O	F ELE	CTI	ON	District Number	Office Code	Par	ty Code	Code	
REPRESENTATI	VE IN THE GENI	FRAL ASS	SEMBLY					МО		DAY	Y	EAR		STH	REF)	14	
- REFRESERIATI	VE IIV IIIE GENI		, LI IDLI						11		2	2010		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of Expenditures		МО	DAY	YEAF		_	_	МО		DAY		EAR	FO	R OFFIC	E USE	ONLY		
			1	1 2	2010		<u>о</u>		11		22	2010						
A. Amount Bro	ught Forward Fr	om Last F	Report				\$				20,	079.90						
B. Total Moneta	ary Contribution	s And Rec	eipts (Fr	om Sche	dule	· I)	\$					500.00						
C. Total Funds	Available (Sum (Of Lines A	and B)				\$				20,	579.90						
D. Total Expend	ditures (From So	hedule II	(I)				\$				2,	689.38						
E. Ending Cash	Balance (Subtra	ct Line D	From Lin	e C)			\$				17,	890.52						
F. Value Of In-	Kind Contributio	ns Receiv	ed (From	Schedu	ile II	:)	\$					0.00						
G. Unpaid Debt	s And Obligation	s (From	Schedule	IV)			\$					0.00						
				AFF	FIDA	\VI	T SE	CTIC	NC									
PART I - If this is	a Committee re	port, trea	asurer sig	n here.	If th	is is	a Car	ndidat	te re	port, o	cand	idate sig	ın here.					
I swear (or affirm) correct and comple		cluding th	e attached	schedule	s file	d on	paper	or by e	electr	onic m	ediun	n, are to t	he best o	f my knov	vledge	and bel	ief , tr	ue
Sworn to and subs	cribed before me ti day of	nis	20									Signature	of Perso	n Submitt	ing Re _l	port		_
	Signa	ture					- -		•				Prin	ted Name				_
My Commission Ex	pires						_						Emai	il				
	МО	D	AY	YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	art II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.																	
I swear (or affirm) No 320) as amende		my knowl	edge and b	elief this	s polit	tical	comm	ittee h	as no	ot viola	ted a	ny provisi	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before me th	s	20									Si	ignature o	of Candida	ite			_
			_ 20				-						Printe	d Name				-
	Signature	<u> </u>					-						Ema	il				_
My Commission Exp	ires						_						Ema					
	МО	D	AY	YF	₹		-			Area	Code		Da	ytime Te	elephor	ne Numi	er	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
BENNINGHOFF, KERRY FOR REP COM	From:	1/1/201	<u>0</u> To:	11/22/2010
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	g Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	500.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	500.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use	this Part to itemize onl with an aggregate valu							
Name of Filing Comn	nittee or Candidate		Rep	orting I	Period			
			Fron	n:		То	:	
					DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address			T				\$	0.00
City	State	Zip Code (Plus 4)						
	'	<u>I</u>				-	╦	DAGE TOTAL

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

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 Cand	Name of Filling Committee of Camulate			Reporting Period					
			Fro	m:		To):		
					DATE		АМ	OUNT	
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 Per	iod		
BENNINGHOFF, KERRY FOR REP COM	From:	1/1/2010	То:	11/22/2010

DATE AMOUNT

Full Name of Contributing Committee ANADARKO PETROLEUM CORP PAC	IADARKO PETROLEUM CORP PAC iiling Address 1201 LAKE ROBBINS DR.					
Mailing Address 1201 LAKE ROBBINS DR.					2010	\$ 500.00
City THE WOODLANDS	State TX	Zip Code (Plus 4) 77380	10	22	2010	

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

PAGE TOTAL 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 Candida	ate			Rep	orting Pe	riod			
				Froi	n:		То	:	
					D	ATE		AN	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•	•			Occupa	tion	•	•	
Employer Mailing Address/Principal Business	Place of		City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on So	chedule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	AGE TOTAL
								•	0.00

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 Period		
BENNINGHOFF, KERRY FOR REP COM	From:	<u>1/1/2010</u> To:	11/22/2010
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
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 Candidat	:e		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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

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

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

					oiii.		10.		
						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, Business	Principal Place of	City	State		Zip 4)	Code(Plus	Descri	ption of C	ontribution
Enter Grand Total of P Summary Page, Sectio		 In-Kind	 Contributions De	etail	ed		1	ı	PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

			,					
Name of Filing Committee or Candidate			Reporting Period					
BENNINGHOFF, KERRY FOR REP COM			From	<u>1/</u>	1/2010	То:	11/22/2010	
				DATE			AMOUNT	
To Whom Paid KERRY BENNINGHOFF			мо	DAY	YEAR			
Mailing Address 702 W. LAMB ST.			10	19	2010	\$	222.78	
City BELLEFONTE	State PA	Zip Code (Plus 4) 16823	Descrip	Description of Expenditure REIMBURSEMENTS-CAMPAIGN EXPENSES				
To Whom Paid LYNN HERMAN				DAY	YEAR			
Mailing Address 121 GRANDVIEW RD			10	20	2010	\$	1,500.00	
City STATE COLLEGE	State PA	Zip Code (Plus 4) 16801	PARTIA	Description of Expenditure PARTIAL PAYMENT-CONSULTING SPRING BREAKFAST				
To Whom Paid FIRST MEDIA			мо	DAY	YEAR			
Mailing Address 863 BENDER PIKE			11	5	2010	\$	135.00	
City STATE COLLEGE	State PA	Zip Code (Plus 4) 16801	Descrip	Description of Expenditure AD (RADIO)/TV				
To Whom Paid KERRY BENNINGHOFF				DAY	YEAR			
Mailing Address 702 W. LAMB ST.				12	2010	\$	179.60	
City BELLEFONTE	State PA	Zip Code (Plus 4) 16823	REIMBI	Description of Expenditure REIMBURSEMENTS-CAMPAIGN COMPUTER SUPPLIES				
To Whom Paid SCOTT'S ROASTING LLC				DAY	YEAR			
Mailing Address 120 SYLVAN ACRES LANE				20	2010	\$	100.00	

To Whom Paid RHONDALEITER/BELLEFONTE BOYS BASKETBALL BOOSTER			МО	DAY	YEAR			
Mailing Address 102 JENJO DR				19	2010	\$	52.00	
City BELLEFONTE	State PA	Zip Code (Plus 4) 16823	Description of Expenditure DONATION					
To Whom Paid LYNN HERMAN				DAY	YEAR			
Mailing Address 121 GRANDVIEW RD			11	22	2010	\$	500.00	
City STATE COLLEGE	State PA	Zip Code (Plus 4) 16801	Description of Expenditure BALANCE-CONSULTING SPRING BREAKFAST					
Enter Grand Total of Evnerdi	turos en Dago 1. Da	opert Cover Dage Item D	•				PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	2,689.38	