Image# 201701179041405076			_	PAGE 1 / 5 -
FEC FORM 1	STATEME ORGANIZ	_		FAGE 173
				Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number and street)	PO BOX 67100			
(Check if address	1			
is changed)	, HARRISBURG		PA 1	7106
			STATE	
COMMITTEE'S E-MAIL ADDR				
 (Check if address is changed) 	gfpac@gfnet.com			
	Optional Second E-Mail Ad	ldress		
	mhoff@gfnet.com			
 (Check if address is changed) 				
	17 / Y Y Y Y 2017			
3. FEC IDENTIFICATION N		00141382		
4. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)		
contify that I have meridiant	this Statement and to the base	of my knowledge and balls for		ad complete
certiny that I have examined	unis statement and to the best	t of my knowledge and belief in	us true, correct al	nu complete.
Type or Print Name of Treasu	rer Kessler, Jon, H, ,			
Signature of Treasurer Kes	sler, Jon, H, ,	[Electronically Filed]	Date 01	/ D D / Y Y Y 17 2017
NOTE: Submission of false, erro		may subject the person signing		ne penalties of 2 U.S.C. §437
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	contact:	FEC FORM 1 (Revised 06/2012)

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FEC FC	rm 1 (Revised 02/2009)	Page 2	
	OMMITTEE		
Candidate	e Committee:		
(a) This committee is a principal campaign committee. (Complete the candidate information below.)			
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate	
Name of Candidate	1		
Candidate Party Affiliat	ion Office Sought: House Senate President	State	
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name of Candidate			
Party Cor			
(d)		Democratic, Republican, etc.) Party	
Political A	Action Committee (PAC):		
(e) ×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	nected organization is	
	Corporation Corporation w/o Capital Stock	Labor Organization	
	Membership Organization Trade Association	Cooperative	
	In addition, this committee is a Lobbyist/Registrant PAC.		
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	gregated fund or party	
	In addition, this committee is a Lobbyist/Registrant PAC.		
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
Joint Fund	draising Representative:		
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political	
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political	
Corr	mittees Participating in Joint Fundraiser		
1.	FEC ID number		
2.	FEC ID number		
3.	FEC ID number		

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

GANNETT FLEMING, INC PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

	Sannett Fleming, Inc.			
L				
	Mailing Address	P.O. Box 67100		
		Harrisburg	PA 17106-7	7100
		CITY	STATE	ZIP CODE
	Relationship: x Connected	Organization Affiliated Committee Joint Fundr	aising Representative	eadership PAC Sponsor
7.	Custodian of Records: Iden books and records.	tify by name, address (phone number optional) and	position of the person in po	ossession of committee
	Kessler, Jo	n, H, ,		
	Full Name	1625 Bow Tree Dr		
			PA 19380	
	Title or Position	CITY	STATE	ZIP CODE
	Trocouror		717	760 7011

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Telephone number

Full Name of Treasurer	Kessler, Jon, H, ,
Mailing Address	1625 Bow Tree Dr
	West Chester PA 19380 –
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 717 763 7211

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Full Name of Designated Agent	Scaer, Robert, M, ,
Mailing Address	208 Dunbar Dr
	Mechanicsburg PA 17050
	CITY STATE ZIP CODE
Title or Position Chairman	Telephone number 717 - 763 - 7211

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

PNC B	ank		
Mailing Address	4242 Carlisle Pike		
	Camp Hill	PA 17011	
	CITY	STATE	ZIP CODE
Name of Bank, Depository, e	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1G (Revised	06/2011)		Page 5
Banks or Other Depositories safety deposit boxes or mainta Name of Bank, Depository, et	ains funds.	hich the committee deposits f	unds, holds accounts, rents [ADDITIONAL]
]
Mailing Address			
	L		
	CITY 🗖	STATE 🛆	ZIP CODE 🔺
Name of Any Connected Or	ganization, Affiliated Committee, Joint Fu	ndraising Representative, o	[ADDITIONAL] r Leadership PAC Sponsor
Mailing Address			
Relationship:	CITY	STATE	ZIP CODE
Connected Organization	Affiliated Committee Joint Fu	undraising Representative	Leadership PAC Sponsor
Designated Agent Nowicki, Full Name	Paul, D, ,		[ADDITIONAL]
Mailing Address	56 Jeanine Ct		
	Manalapen	NJ	07726 –
Title or Position	CITY 🖕	STATE	ZIP CODE
ViceChr_Secy_AsstTrs		Telephone number	717 – 763 – 7211
Joint Fundraiser Participant			[ADDITIONAL]
		FEC ID number	с