

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

ROTHFUS FOR CONGRESS

ADDRESS (number and street)

PO BOX 435

Check if different  
than previously  
reported. (ACC)

SEWICKLEY

PA

15143

2. FEC IDENTIFICATION NUMBER ▼

C

C00497115

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

PA

12

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
01 / 01 / 2014

through

M M / D D / Y Y Y Y  
03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer WILLIAM HASKINS

Signature of Treasurer

WILLIAM HASKINS

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
04 / 15 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 125

Write or Type Committee Name

ROTHFUS FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	239152.00	1447507.68
(b) Total Contribution Refunds (from Line 20(d)) .....	2600.00	12744.45
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	236552.00	1434763.23
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	88893.67	576078.99
(b) Total Offsets to Operating Expenditures (from Line 14).....	1010.88	9538.28
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	87882.79	566540.71
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1019907.85	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	12154.60	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 125

Write or Type Committee Name

**ROTHFUS FOR CONGRESS**

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
01 / 01 / 2014

To:

M M / D D / Y Y Y Y  
03 / 31 / 2014

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees**

(i) Itemized (use Schedule A).....

159925.00

789686.17

(ii) Unitemized.....

7877.00

41463.76

(iii) TOTAL of contributions from individuals ▶

167802.00

831149.93

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

71350.00

616357.75

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

239152.00

1447507.68

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

1090.96

74973.45

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

0.00

0.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

1010.88

9538.28

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

241253.84

1532019.41

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 125

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	88893.67	576078.99
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.19
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.19
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	2600.00	12744.45
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2600.00	12744.45
21. OTHER DISBURSEMENTS .....	2300.00	19550.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	93793.67	608373.63

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	872447.68
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	241253.84
25. SUBTOTAL (add Line 23 and Line 24).....	1113701.52
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	93793.67
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1019907.85

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ELECTRA P AGRAS**

A.

Mailing Address 73 LEBANON HILLS DR.

City

PITTSBURGH

State

PA

Zip Code

15228

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TRIANGLE TECH GROUP

Occupation

CORPORATE SECRETARY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 26 / 2014

Transaction ID : SA11AI.26964

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**JAMES P. BALET**

B.

Mailing Address 6901 PROSPECT AVENUE

City

PITTSBURGH

State

PA

Zip Code

15202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PITTSBURGH UNIVERSAL

Occupation

MANAGER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2014

Transaction ID : SA11AI.26805

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**JENNIFER BALET**

C.

Mailing Address 6901 PROSPECT AVENUE

City

PITTSBURGH

State

PA

Zip Code

15202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

.INFORMATION REQUESTED

Occupation

.INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

900.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2014

Transaction ID : SA11AI.26806

Amount of Each Receipt this Period

900.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BARRY BALLIET**

A.

Mailing Address 213 ST. CHARLES PLACE

City

PITTSBURGH

State

PA

Zip Code

15215

FEC ID number of contributing federal political committee.

C

Name of Employer  
PROVIDENT AGENCY INC.Occupation  
SALES

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27026

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**ROBERT BARKER**

B.

Mailing Address 2971 EASTVIEW ROAD

City

BETHEL PARK

State

PA

Zip Code

15102

FEC ID number of contributing federal political committee.

C

Name of Employer  
DUQUESNE UNIVERSITYOccupation  
LAW PROFESSOR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 07 / 2014

Transaction ID : SA11AI.26778

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**DAVID BERARDINELLI**

C.

Mailing Address 814 OXFORD COURT

City

GIBSONIA

State

PA

Zip Code

15044

FEC ID number of contributing federal political committee.

C

Name of Employer  
DEFOREST KOSCELNIKOccupation  
ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 17 / 2014

Transaction ID : SA11AI.26858

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

850.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>BRIAN S. BERGMANN</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 24 / 2014	
Mailing Address 169 BACKBONE RD.			<b>Transaction ID : SA11AI.26643</b>	
City	State	Zip Code		
SEWICKLEY	PA	15143		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 1000.00	
Name of Employer ESMARK		Occupation COO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>JOHN F BITZER III</b>			Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2014	
Mailing Address 210 CHATHAM LANE			<b>Transaction ID : SA11AI.26849</b>	
City	State	Zip Code		
PITTSBURGH	PA	15238		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 100.00	
Name of Employer ABARTA INC.		Occupation EXECUTIVE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>JOHN F BITZER III</b>			Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2014	
Mailing Address 210 CHATHAM LANE			<b>Transaction ID : SA11AI.26850</b>	
City	State	Zip Code		
PITTSBURGH	PA	15238		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 400.00	
Name of Employer ABARTA INC.		Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			1500.00	
<b>TOTAL</b> This Period (last page this line number only).....				

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JOHN F BITZER III**

A.

Mailing Address 210 CHATHAM LANE

City

PITTSBURGH

State

PA

Zip Code

15238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ABARTA INC.

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 29 / 2014

Transaction ID : SA11AI.27019

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**GEORGIE BLACKBURN**

B.

Mailing Address 1100 CONSTITUTION DR

City

TARENTUM

State

PA

Zip Code

15084

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BLACKBURN'S

Occupation

VP GOVERNMENT RELATIONS

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 26 / 2014

Transaction ID : SA11AI.26967

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**MARY P. BLAYLOCK**

C.

Mailing Address 451 MAPLE LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE CREATIVE COLLECTION, LTD

Occupation

INTERIOR DESIGNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 24 / 2014

Transaction ID : SA11AI.26878

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3500.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**STANLEY BLAYLOCK**

A.

Mailing Address 451 MAPLE LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

PHYSICIANS IMMEDIATE CARE

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.26879

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**EDWARD BOCZAR**

B.

Mailing Address 600 MAIN STREET

City

PITTSBURGH

State

PA

Zip Code

15215

FEC ID number of contributing federal political committee.

C

Name of Employer

AMGARD

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.26950

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**KAREN BONFIGLIO**

C.

Mailing Address PO BOX 185

City

MURRYSVILLE

State

PA

Zip Code

15668

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.27091

Amount of Each Receipt this Period

2600.00

**SUBTOTAL** of Receipts This Page (optional).....

3800.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WILLIAM BOSWELL****A.**

Mailing Address 405 HARE LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WILLIAM BOSWELL LLC

Occupation

PARTNER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2014

Transaction ID : SA11AI.26729

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**JAMES BOUCHARD****B.**

Mailing Address 3 BEAVER STREET

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ESMARK INC.

Occupation

CHAIRMAN

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2014

Transaction ID : SA11AI.26651

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**CAROLYN BOUCHARD****C.**

Mailing Address 3 BEAVER STREET

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2014

Transaction ID : SA11AI.26652

Amount of Each Receipt this Period

2600.00

**SUBTOTAL** of Receipts This Page (optional).....

2950.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RICHARD BOUCHARD**

A.

Mailing Address 20280 KENSINGTON WAY

City

LAKEVILLE

State

MN

Zip Code

55044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 11 / 2014

Transaction ID : SA11AI.26701

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**MICHAEL BOZZONE**

B.

Mailing Address 20 SERENITY HILL

City

CHESWICK

State

PA

Zip Code

15024

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BOZZONE &amp; ASSOCIATES

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27024

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**R. CHAD BRENNER**

C.

Mailing Address 30050 CHAGRIN BLVD STE 100

City

PEPPER PIKE

State

OH

Zip Code

44124

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BRENNER, KAPROSY, MITCHELL LLP

Occupation

MANAGING PARTNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27113

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WILLIAM BROWN****A.**

Mailing Address 625 EAST DRIVE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MERRILL LYNCH

Occupation

FINANCIAL ADVISOR

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		30		2014

**Transaction ID : SA11AI.26664**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**CHRIS W BRUSSALIS****B.**

Mailing Address 7110 PINEHURST CIR.

City

PRESTO

State

PA

Zip Code

15142

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE HILL GROUP, INC.

Occupation

CONSULTANT

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

**Transaction ID : SA11AI.27042**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**ANTHONY BUCCIERO****C.**

Mailing Address 4974 CLINE HOLLOW ROAD

City

EXPORT

State

PA

Zip Code

15632

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GUARDIAN CONSTRUCTION

Occupation

MANAGEMENT

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2014

**Transaction ID : SA11AI.26966**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

1750.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 125

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>JOHN BUNCE</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	01		24		2014
M M M	/	D D D	/	Y Y Y Y Y									
01		24		2014									
Mailing Address 102 SPENSER LANE		<b>Transaction ID : SA11AI.26633</b>											
City SEWICKLEY	State PA	Zip Code 15143											
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px;">C</div>		Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px;">250.00</div>											
Name of Employer ALENEON SYSTEMS	Occupation MANAGER												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div style="border: 1px solid black; padding: 2px;">250.00</div>												

  

<b>B.</b> Full Name (Last, First, Middle Initial) <b>BRADLEY BUSATTO</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>27</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	01		27		2014
M M M	/	D D D	/	Y Y Y Y Y									
01		27		2014									
Mailing Address 520 WOODLAND ROAD EXT		<b>Transaction ID : SA11AI.26662</b>											
City SEWICKLEY	State PA	Zip Code 15143											
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px;">C</div>		Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px;">1000.00</div>											
Name of Employer INDUSTRY TERMINAL & SALVAGE	Occupation PRESIDENT												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div style="border: 1px solid black; padding: 2px;">1500.00</div>												

  

<b>C.</b> Full Name (Last, First, Middle Initial) <b>DAVID CAHILL</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	01		24		2014
M M M	/	D D D	/	Y Y Y Y Y									
01		24		2014									
Mailing Address 134 DUNCAN CIRCLE		<b>Transaction ID : SA11AI.26646</b>											
City BEAVER	State PA	Zip Code 15009											
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px;">C</div>		Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px;">1000.00</div>											
Name of Employer HERITAGE VALLEY PEDIATRICS	Occupation PEDIATRICIAN												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div style="border: 1px solid black; padding: 2px;">1000.00</div>												

  

<b>SUBTOTAL</b> of Receipts This Page (optional).....		<div style="border: 1px solid black; padding: 2px;">2250.00</div>
<b>TOTAL</b> This Period (last page this line number only).....		<div style="border: 1px solid black; padding: 2px;"></div>

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DAVID CAHILL**

A.

Mailing Address 134 DUNCAN CIRCLE

City

BEAVER

State

PA

Zip Code

15009

FEC ID number of contributing federal political committee.

C

Name of Employer

HERITAGE VALLEY PEDIATRICS

Occupation

PEDIATRICIAN

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2014

Transaction ID : SA11AI.26888

Amount of Each Receipt this Period

1600.00

Full Name (Last, First, Middle Initial)

**DAVID CAHILL**

B.

Mailing Address 134 DUNCAN CIRCLE

City

BEAVER

State

PA

Zip Code

15009

FEC ID number of contributing federal political committee.

C

Name of Employer

HERITAGE VALLEY PEDIATRICS

Occupation

PEDIATRICIAN

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2014

Transaction ID : SA11AI.26996

Amount of Each Receipt this Period

1600.00

Full Name (Last, First, Middle Initial)

**KARL A CALANDRA**

C.

Mailing Address 325 FOX HUNT RD.

City

PITTSBURGH

State

PA

Zip Code

15238

FEC ID number of contributing federal political committee.

C

Name of Employer

JENNMAR

Occupation

EXECUTIVE VP

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2014

Transaction ID : SA11AI.26839

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

3300.00

TOTAL This Period (last page this line number only).....

Diagram illustrating the layout of the 15 numbered boxes on the table. The boxes are arranged in two rows. The top row contains boxes 11a, 11b, 11c, and 11d. The bottom row contains boxes 12, 13a, 13b, 14, and 15. Box 11a is marked with an 'X'.

NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

FEC Schedule A (Form 3) (Revised 02/2009)

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. FRANK CALANDRA, JR.**

Mailing Address PO BOX 111253

City

PITTSBURGH

State

PA

Zip Code

15238

FEC ID number of contributing federal political committee.

C

Name of Employer  
JENNMAR CORPORATIONOccupation  
PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2014

Transaction ID : SA11AI.26800

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**MR. FRANK CALANDRA, JR.**

Mailing Address PO BOX 111253

City

PITTSBURGH

State

PA

Zip Code

15238

FEC ID number of contributing federal political committee.

C

Name of Employer  
JENNMAR CORPORATIONOccupation  
PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2014

Transaction ID : SA11AI.27120

Amount of Each Receipt this Period

-500.00

[MEMO ITEM]

REATTRIBUTED TO CALANDRA, ROSEMARIE

Full Name (Last, First, Middle Initial)

**MR. FRANK CALANDRA, JR.**

Mailing Address PO BOX 111253

City

PITTSBURGH

State

PA

Zip Code

15238

FEC ID number of contributing federal political committee.

C

Name of Employer  
JENNMAR CORPORATIONOccupation  
PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 18 / 2014

Transaction ID : SA11AI.26841

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MR. FRANK CALANDRA, JR.**

Mailing Address PO BOX 111253

City

PITTSBURGH

State

PA

Zip Code

15238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JENNMAR CORPORATION

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2014

Transaction ID : SA11AI.27122

Amount of Each Receipt this Period

-1000.00

**[MEMO ITEM]**

REATTRIBUTED TO CALANDRA, ROSEMARIE

Full Name (Last, First, Middle Initial)

**ROBERT M CAMPANA**

Mailing Address 6155 PARK SQUARE DR, SUITE 3

City

LORAIN

State

OH

Zip Code

44053

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.27114

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**LAWRENCE L CARACCIOLO**

Mailing Address 323 RUSTIN WAY

City

WEXFORD

State

PA

Zip Code

15090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

D.B. &amp; S. STEEL COMPANY

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2014

Transaction ID : SA11AI.26828

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional).....

600.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 18 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LAWRENCE L CARACCILO**

A.

Mailing Address 323 RUSTIN WAY

City

WEXFORD

State

PA

Zip Code

15090

FEC ID number of contributing federal political committee.

C

Name of Employer

D.B. &amp; S. STEEL COMPANY

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		18		2014

Transaction ID : SA11AI.26848

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**ROBERT CARPENTER**

B.

Mailing Address 117 WISHART DRIVE

City

BEAVER

State

PA

Zip Code

15009

FEC ID number of contributing federal political committee.

C

Name of Employer

CA COMPANY

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		07		2014

Transaction ID : SA11AI.26761

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**DAVID CASE**

C.

Mailing Address 541 LITTLE SEWICKLEY CREEK ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

PMI

Occupation

PRESIDENT &amp; CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		29		2014

Transaction ID : SA11AI.27021

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

850.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 19 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**VICTORIA CASE**

A.

Mailing Address 541 LITTLE SEWICKLEY CREEK ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

PMI

Occupation

CO-OWNER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		10		2014

Transaction ID : SA11AI.26600

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**M. ELIZABETH CHRISTOF**

B.

Mailing Address 461 MAPLE LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : SA11AI.26815

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**PATRICIA CIESINSKI**

C.

Mailing Address 659 GROVE STREET

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		24		2014

Transaction ID : SA11AI.26642

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

1400.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>DAVID CIPPEL</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address 2217 CENTER AVE		<b>Transaction ID : SA11AI.26917</b>	
City FORD CITY	State PA	Zip Code 16226	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer KLINGENSMITHS DRUG STORES	Occupation BUSINESS OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>MRS. JILL N. COOPER</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 8017 BREN DINA COURT		<b>Transaction ID : SA11AI.27037</b>	
City MURRYSVILLE	State PA	Zip Code 15668	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NONE	Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 300.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>ROBERT CORSELLO</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 07 / 2014	
Mailing Address 2555B PHEASANT RUN DR,		<b>Transaction ID : SA11AI.26759</b>	
City WEXFORD	State PA	Zip Code 15090	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		_____ 350.00	
<b>TOTAL</b> This Period (last page this line number only).....		_____	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 21 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ELIZABETH CRNKOVICH**

A.

Mailing Address 5907 MOSS WOOD LANE

City

MCLEAN

State

VA

Zip Code

22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 17 / 2014

Transaction ID : SA11AI.26620

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**KATHRYN CULLO**

B.

Mailing Address 315 MEADOW LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 20 / 2014

Transaction ID : SA11AI.26726

Amount of Each Receipt this Period

1700.00

Full Name (Last, First, Middle Initial)

**STEPHAN H DAKE**

C.

Mailing Address 4 DEER SPRING LN.

City

PITTSBURGH

State

PA

Zip Code

15238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SARGENT ELECTRIC

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1700.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 18 / 2014

Transaction ID : SA11AI.26833

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 22 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SHARON S. DANDREA**

A.

Mailing Address 3149 SCENIC COURT

City

ALLISON PARK

State

PA

Zip Code

15101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 26 / 2014

Transaction ID : SA11AI.26971

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**JOSEPH M. DAWLEY**

B.

Mailing Address 19 CANTERBURY RD.

City

PITTSBURGH

State

PA

Zip Code

15202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EQT

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 24 / 2014

Transaction ID : SA11AI.26948

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**NICHOLAS DEBENEDICTIS**

C.

Mailing Address 231 GOLF VIEW RD.

City

ARDMORE

State

PA

Zip Code

19003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AQUA AMERICA, INC.

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 02 / 2014

Transaction ID : SA11AI.26594

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3850.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RALPH DESTEFANO**

A.

Mailing Address 214 TYLER CT

City

GIBSONIA

State

PA

Zip Code

15044

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 20 / 2014

Transaction ID : SA11AI.26732

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**CAROLE A. DICLAUDIO**

B.

Mailing Address 816 11TH STREET

City

OAKMONT

State

PA

Zip Code

15139

FEC ID number of contributing federal political committee.

C

Name of Employer

GILMARY RETREAT CENTER

Occupation

ASSOCIATE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1400.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 28 / 2014

Transaction ID : SA11AI.26751

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**CAROLE A. DICLAUDIO**

C.

Mailing Address 816 11TH STREET

City

OAKMONT

State

PA

Zip Code

15139

FEC ID number of contributing federal political committee.

C

Name of Employer

GILMARY RETREAT CENTER

Occupation

ASSOCIATE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27048

Amount of Each Receipt this Period

1200.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2700.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 24 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ALFRED DOYLE**

A.

Mailing Address 444 WOODLAND ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

UPMC

Occupation

PHYSICIAN

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2014

Transaction ID : SA11Al.26818

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**BRIAN DUGGAN**

B.

Mailing Address 29 WOODLAND ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

WOODLAND &amp; WEST LLC

Occupation

FINANCIAL CONSULTANT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 17 / 2014

Transaction ID : SA11Al.26857

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**DANIEL J EICHENLAUB**

C.

Mailing Address PO BOX 111282

City

PITTSBURGH

State

PA

Zip Code

15238

FEC ID number of contributing federal political committee.

C

Name of Employer

EICHENLAUB, INC.

Occupation

LANDSCAPE CONTRACTOR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2014

Transaction ID : SA11Al.26821

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 25 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PHILIP W ENGLISH****A.**

Mailing Address 1717 K STREET, NW

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

**Transaction ID : SA11AI.27055**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**DAVID FEDERLINE****B.**

Mailing Address 4709 LOGAN FERRY ROAD

City

MURRYSVILLE

State

PA

Zip Code

15668

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ECKERT SEAMANS

Occupation

CFO

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

**Transaction ID : SA11AI.26819**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**CHARLES I. FERRARA****C.**

Mailing Address 7 HUNT CLUB LANE

City

PITTSBURGH

State

PA

Zip Code

15215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NORTHWESTERN MUTUAL LIFE

Occupation

MANAGING DIRECTOR

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		28		2014

**Transaction ID : SA11AI.26992**

Amount of Each Receipt this Period

600.00

**SUBTOTAL** of Receipts This Page (optional).....

1100.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 26 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CHARLES I. FERRARA**

A.

Mailing Address 7 HUNT CLUB LANE

City

PITTSBURGH

State

PA

Zip Code

15215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NORTHWESTERN MUTUAL LIFE

Occupation

MANAGING DIRECTOR

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2014

Transaction ID : SA11AI.26993

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**BRIAN FETTEROLF**

B.

Mailing Address 524 WOODLAND ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TRISTATE CAPITAL

Occupation

BANKING

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2014

Transaction ID : SA11AI.26639

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**SCOTT E. FIEG**

C.

Mailing Address 3052 STOYSTOWN RD

City

STOYSTOWN

State

PA

Zip Code

15563

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FIEG BROS. COAL COMPANY

Occupation

OWNER

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.26931

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

2400.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 27 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SEAN M FIELER**

Mailing Address 40 HASLET AVE.

City

PRINCETON

State

NJ

Zip Code

08540

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 21 / 2014

Transaction ID : SA11AI.26925

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**SHARON O FLANERY**

Mailing Address 1020 SHAWNEE TRL.

City

ELKVIEW

State

WV

Zip Code

25071

FEC ID number of contributing federal political committee.

C

Name of Employer

STEPTOE &amp; JOHNSON, PLLC

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 26 / 2014

Transaction ID : SA11AI.26963

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**JAMES (CLIFF) C FORREST III**

Mailing Address 3 COLBERT LN.

City

PITTSBURGH

State

PA

Zip Code

15215

FEC ID number of contributing federal political committee.

C

Name of Employer

ROSEBUD MINING CO.

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2014

Transaction ID : SA11AI.26824

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3850.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 28 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LOUIS GALLIKER**

A.

Mailing Address 922 LUZERNE STREET

City

JOHNSTOWN

State

PA

Zip Code

15905

FEC ID number of contributing federal political committee.

C

Name of Employer

GALLIKER DAIRY COMPANY

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 07 / 2014

Transaction ID : SA11Al.26764

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**PATRICIA GALLIKER**

B.

Mailing Address 922 LUZERNE ST

City

JOHNSTOWN

State

PA

Zip Code

15905

FEC ID number of contributing federal political committee.

C

Name of Employer

GALLIKER DAIRY COMPANY

Occupation

SECRETARY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2300.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 07 / 2014

Transaction ID : SA11Al.26783

Amount of Each Receipt this Period

1300.00

Full Name (Last, First, Middle Initial)

**ELINOR GARTNER**

C.

Mailing Address 3051 SCOTTISH RITE LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 07 / 2014

Transaction ID : SA11Al.26770

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 125

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JOHN GAVEL****A.**

Mailing Address 1871 RED COACH ROAD

City

ALLISON PARK

State

PA

Zip Code

15101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTH BUTLER COUNTY SD

Occupation

TEACHER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

**Transaction ID : SA11AI.26880**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**THOMAS P GIBBONS****B.**

Mailing Address 341 HARTSHORN DRIVE

City

SHORT HILLS

State

NJ

Zip Code

07078

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BNY MELLON, INC.

Occupation

BANKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

**Transaction ID : SA11AI.27025**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**MR. ROBERT W. GLENN****C.**

Mailing Address 51 WOODLAND ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2014

**Transaction ID : SA11AI.26817**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

3750.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 30 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BOBBY GORDON**

A.

Mailing Address 333 WOODLAND ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GORDON TERMINAL SERVICE CO.

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 18 2014

Transaction ID : SA11AI.26834

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ELAINE GORSKI**

B.

Mailing Address 190 MEADOWSWEET DR.

City

STATE COLLEGE

State

PA

Zip Code

16801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 29 2014

Transaction ID : SA11AI.27017

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JAMES GREGORY**

C.

Mailing Address 406 TIMBER LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 18 2014

Transaction ID : SA11AI.26831

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 125

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>KIMBERLY A. GREISSINGER</b>			Date of Receipt M M / D D / Y Y Y Y 01 / 24 / 2014	
Mailing Address 317 SCAIFE RD.			<b>Transaction ID : SA11AI.26656</b>	
City	State	Zip Code		
SEWICKLEY	PA	15143		
FEC ID number of contributing federal political committee.		C		
Name of Employer COSMETIC LASER CENTERS		Occupation OFFICE MANAGER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00		
			Amount of Each Receipt this Period 2000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>CHARLES L GRIZZLE</b>			Date of Receipt M M / D D / Y Y Y Y 03 / 07 / 2014	
Mailing Address 2326 CALIFORNIA ST. NW			<b>Transaction ID : SA11AI.26779</b>	
City	State	Zip Code		
WASHINGTON	DC	20008		
FEC ID number of contributing federal political committee.		C		
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
			Amount of Each Receipt this Period 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>GARY GROOM</b>			Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2014	
Mailing Address 608 MAPLE LANE			<b>Transaction ID : SA11AI.26822</b>	
City	State	Zip Code		
SEWICKLEY	PA	15143		
FEC ID number of contributing federal political committee.		C		
Name of Employer SARGENT ELECTRIC COMPANY		Occupation COO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00		
			Amount of Each Receipt this Period 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CHUCK HAMMEL III**

Mailing Address 609 ACADEMY AVE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

PITT OHIO TRUCKING

Occupation

CEO

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3600.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 24 / 2014

Transaction ID : SA11AI.26648

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**COLIN A HANNA**

Mailing Address 603 FAIRWAY DRIVE

City

WEST CHESTER

State

PA

Zip Code

19382

FEC ID number of contributing federal political committee.

C

Name of Employer

LET FREEDOM RING

Occupation

CONSULTANT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27095

Amount of Each Receipt this Period

2600.00

REATTRIBUTION REQUESTED

Full Name (Last, First, Middle Initial)

**CAROL A HASKINS**

Mailing Address 3908 ASHLAND CT.

City

ALLISON PARK

State

PA

Zip Code

15101

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2014

Transaction ID : SA11AI.26801

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4100.00



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**KATHRIN HAYS**

Mailing Address 524 ACADEMY AVENUE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PARTY ANTS

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.27071

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**JOHN G. HENNE**

Mailing Address 119 SOUTH DRIVE

City

PITTSBURGH

State

PA

Zip Code

15238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HENNE JEWELRY

Occupation

JEWELER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.27044

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. TALBOTT HITESHEW JR.**

Mailing Address 1 OVERLOOK DRIVE

City

PITTSBURGH

State

PA

Zip Code

15238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HUNTER ASSOCIATES INC.

Occupation

STOCKBROKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2014

Transaction ID : SA11AI.26775

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 34 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**C. TALBOTT HITESHEW JR.**

Mailing Address 1 OVERLOOK DRIVE

City

PITTSBURGH

State

PA

Zip Code

15238

FEC ID number of contributing federal political committee.

C

Name of Employer

HUNTER ASSOCIATES INC.

Occupation

STOCKBROKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 18 / 2014

Transaction ID : SA11AI.26851

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**IVAN HOFMANN**

Mailing Address PO BOX 1154

City

CORAOPOLIS

State

PA

Zip Code

15108

FEC ID number of contributing federal political committee.

C

Name of Employer

FEDEX GROUND

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 14 / 2014

Transaction ID : SA11AI.26809

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**THOMAS HOTOPP**

Mailing Address 3072 HENRICH FARMS LANE

City

ALLISON PARK

State

PA

Zip Code

15101

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 07 / 2014

Transaction ID : SA11AI.26777

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**GLORIA HUDOCK**

A.

Mailing Address 102 LANTERN CIRCLE

City

MCMURRAY

State

PA

Zip Code

15317

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALUMISOURCEOccupation  
EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2550.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 11 / 2014

Transaction ID : SA11AI.26708

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**MR. TERRENCE S. JACOBS**

B.

Mailing Address 6608 ROUTE 22

City

DELMONT

State

PA

Zip Code

15626

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PENNECO OIL COMPANYOccupation  
PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 20 / 2014

Transaction ID : SA11AI.26723

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**MR. TERRENCE S. JACOBS**

C.

Mailing Address 6608 ROUTE 22

City

DELMONT

State

PA

Zip Code

15626

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PENNECO OIL COMPANYOccupation  
PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 20 / 2014

Transaction ID : SA11AI.26748

Amount of Each Receipt this Period

-1000.00

[MEMO ITEM]

REATTRIBUTED TO JACOBS, SANDRA

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MRS. SANDRA J. JACOBS****A.**

Mailing Address 6608 RTE. 22

City

DELMONT

State

PA

Zip Code

15626

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 20 / 2014D D / Y Y Y Y Y Y  
20 / 2014Y Y Y Y Y Y Y Y  
2014**Transaction ID : SA11AI.26749**

Amount of Each Receipt this Period

1000.00

**[MEMO ITEM]**

REATTRIBUTED FROM JACOBS, TERRENCE

Full Name (Last, First, Middle Initial)

**JACQUELINE JOHNSON****B.**

Mailing Address 604 MAPLE LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2014D D / Y Y Y Y Y Y  
14 / 2014Y Y Y Y Y Y Y Y  
2014**Transaction ID : SA11AI.26803**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**NATALIE KANIA****C.**

Mailing Address 1616 COOK SCHOOL ROAD

City

PITTSBURGH

State

PA

Zip Code

15241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 28 / 2014D D / Y Y Y Y Y Y  
28 / 2014Y Y Y Y Y Y Y Y  
2014**Transaction ID : SA11AI.27035**

Amount of Each Receipt this Period

1690.00

**SUBTOTAL** of Receipts This Page (optional).....

1790.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DR. ROBERT J KANIA**

Mailing Address 859 BLACKBURN ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

WEST PENN ALLEGHENY HEALTH

Occupation

PHYSICIAN

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2014

Transaction ID : SA11AI.26802

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**ROBERT J. KANIA, JR.**

Mailing Address 1616 COOK SCHOOL ROAD

City

PITTSBURGH

State

PA

Zip Code

15241

FEC ID number of contributing federal political committee.

C

Name of Employer

KANIA ENTERPRISES

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3410.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 28 / 2014

Transaction ID : SA11AI.27034

Amount of Each Receipt this Period

810.00

Full Name (Last, First, Middle Initial)

**WILLIAM KASSLING**

Mailing Address 4601 GULF SHORE BLVD NORTH

City

NAPLES

State

FL

Zip Code

34103

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 28 / 2014

Transaction ID : SA11AI.27004

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2310.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ADAM R KAUFMAN**

A.

Mailing Address 31 ASTOR PL

City

ROCKY RIVER

State

OH

Zip Code

44116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27111

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**TIMOTHY F KEANEY**

B.

Mailing Address 2 RIVER TER.

APT. 8H

City

NEW YORK

State

NY

Zip Code

10286

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 26 / 2014

Transaction ID : SA11AI.26968

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**JEFFREY KENDALL**

C.

Mailing Address 515 EAST DRIVE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIBERTY TIRE RECYCLING

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 24 / 2014

Transaction ID : SA11AI.26655

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 39 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SUSAN L KENGOR****A.**

Mailing Address 187 DAUGHERTY RD.

City

GROVE CITY

State

PA

Zip Code

16127

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2014

Transaction ID : SA11AI.26820

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**THEODORE KERR****B.**

Mailing Address 7432 FRANKLIN ROAD

City

CRANBERRY TWP

State

PA

Zip Code

16066

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TOUCHSTONE CAPITAL INC.

Occupation

FINANCIAL ADVISOR

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2014

Transaction ID : SA11AI.27009

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**KARL KIMMICH****C.**

Mailing Address 5636 N MONTOUR ROAD

City

GIBSONIA

State

PA

Zip Code

15044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TRINITY ENERGY CORP.

Occupation

OWNER

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2014

Transaction ID : SA11AI.26843

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

1300.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 40 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ROBERT KIRST****A.**

Mailing Address 268 SHADY HOLLOW RD

City

SOMERSET

State

PA

Zip Code

15501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GLOBAL/SFCOccupation  
EXECUTIVE

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2014

Transaction ID : SA11AI.26872

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ANDREW KLABER****B.**

Mailing Address 335 GRANT STREET

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.26943

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**FRANK KOZEL****C.**

Mailing Address 560 EPSILON DRIVE

City

PITTSBURGH

State

PA

Zip Code

15238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

8200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2014

Transaction ID : SA11AI.26970

Amount of Each Receipt this Period

2600.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4600.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ANN LANGERHOLC**

Mailing Address 1716 BRIARWOOD LANE

City

PITTSBURGH

State

PA

Zip Code

15239

FEC ID number of contributing federal political committee.

C

Name of Employer

WW INVESTMENTS, LLC

Occupation

EXECUTIVE ASSISTANT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2014

Transaction ID : SA11AI.26889

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**JOHN J LETIZIA**

Mailing Address 140 GARNET ST

City

JOHNSTOWN

State

PA

Zip Code

15909

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2014

Transaction ID : SA11AI.27010

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**ELSIE LEWIS**

Mailing Address 607 POIA ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4877.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2014

Transaction ID : SA11AI.26740

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2350.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CHUCK LEYH**

Mailing Address 35 BELAIRE DRIVE

City

DELMONT

State

PA

Zip Code

15626

FEC ID number of contributing federal political committee.

C

Name of Employer  
ENTERPRISE BANKOccupation  
PRESIDENT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5100.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 11 / 2014

Transaction ID : SA11AI.26707

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**KARL LOHWATER**

Mailing Address 5331 HILLSIDE WAY

City

WILLIAMSBURG

State

VA

Zip Code

23185

FEC ID number of contributing federal political committee.

C

Name of Employer  
MEADOWVALE ADVISORS, LLCOccupation  
ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 03 / 2014

Transaction ID : SA11AI.26752

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**KEITH E. LOISELLE**

Mailing Address 180 WEDGEWOOD DRIVE

City

GIBSONIA

State

PA

Zip Code

15044

FEC ID number of contributing federal political committee.

C

Name of Employer  
CDL NUCLEAR TECHNOLOGIES INCOccupation  
OWNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27051

Amount of Each Receipt this Period

2600.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6100.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 43 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CAROL D. LOISELLE**

A.

Mailing Address 180 WEDGEWOOD DRIVE

City

GIBSONIA

State

PA

Zip Code

15044

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2800.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27050

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**CAROL D. LOISELLE**

B.

Mailing Address 180 WEDGEWOOD DRIVE

City

GIBSONIA

State

PA

Zip Code

15044

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2800.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27052

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

**JAMES R LONGON**

C.

Mailing Address 4 WINGATE COURT

City

FLOURTOWN

State

PA

Zip Code

19031

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27109

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

900.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 44 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RICHARD W LOWRIE JR**

Mailing Address 400 TIMBERIDGE TRAIL

City

GATES MILLS

State

OH

Zip Code

44040

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 31 2014

Transaction ID : SA11AI.27112

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**DAVID A. LUPTAK**

Mailing Address 14 BLACKBURN RD.

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

ESMARK INDUSTRIAL, LLC

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
01 24 2014

Transaction ID : SA11AI.26631

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**DR. JOSEPH C. MAROON**

Mailing Address 703 MAIN ST.

City

BRIDGEPORT

State

OH

Zip Code

43912

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1750.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 14 2014

Transaction ID : SA11AI.26810

Amount of Each Receipt this Period

750.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 45 OF 125

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MARIAN MARQUIS</b>			Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2014	
Mailing Address 235 RIDGEVIEW DRIVE			<b>Transaction ID : SA11AI.26874</b>	
City WEXFORD	State PA	Zip Code 15090	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer UPMC		Occupation PHYSICIAN		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>WILLIAM E. MARQUIS</b>			Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2014	
Mailing Address 235 RIDGEVIEW DRIVE			<b>Transaction ID : SA11AI.26875</b>	
City WEXFORD	State PA	Zip Code 15090	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer ERMI		Occupation PHYSICIAN		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>CHRISTOPHER S. MARTIN</b>			Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 621 12TH ST.			<b>Transaction ID : SA11AI.27046</b>	
City OAKMONT	State PA	Zip Code 15139	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer NONE		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....			2000.00	
<b>TOTAL</b> This Period (last page this line number only).....				

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MARK W MCCLYMONDS****A.**

Mailing Address PO BOX 296

City

PORTERSVILLE

State

PA

Zip Code

16051

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MCCLYMONDS SUPPLY &amp; TRANSIT

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2014

Transaction ID : SA11AI.26838

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**CHRIS MCMAHON****B.**

Mailing Address 125 JAMES PLACE

City

PITTSBURGH

State

PA

Zip Code

15228

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MCMAHON FINANCIAL LLC

Occupation

PARTNER

Receipt For: 2014

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		22		2013

Transaction ID : SA11AI.26252

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**CHRIS MCMAHON****C.**

Mailing Address 125 JAMES PLACE

City

PITTSBURGH

State

PA

Zip Code

15228

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MCMAHON FINANCIAL LLC

Occupation

PARTNER

Receipt For: 2014

☐ Primary    ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		19		2014

Transaction ID : SA11AI.26684

Amount of Each Receipt this Period

-600.00

[MEMO ITEM]

REATTRIBUTED TO MCMAHON, MARY

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2600.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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PAGE 47 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CHRIS MCMAHON**

Mailing Address 125 JAMES PLACE

City

PITTSBURGH

State

PA

Zip Code

15228

FEC ID number of contributing federal political committee.

C

Name of Employer

MCMAHON FINANCIAL LLC

Occupation

PARTNER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 19 / 2014

Transaction ID : SA11AI.26686

Amount of Each Receipt this Period

-200.00

[MEMO ITEM]

REATTRIBUTED TO MCMAHON, MARY

Full Name (Last, First, Middle Initial)

**MARY MCMAHON**

Mailing Address 125 JAMES PLACE

City

PITTSBURGH

State

PA

Zip Code

15228

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2800.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 19 / 2014

Transaction ID : SA11AI.26685

Amount of Each Receipt this Period

600.00

[MEMO ITEM]

REATTRIBUTED FROM MCMAHON, CHRIS

Full Name (Last, First, Middle Initial)

**MARY MCMAHON**

Mailing Address 125 JAMES PLACE

City

PITTSBURGH

State

PA

Zip Code

15228

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

2800.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 19 / 2014

Transaction ID : SA11AI.26687

Amount of Each Receipt this Period

200.00

[MEMO ITEM]

REATTRIBUTED FROM MCMAHON, CHRIS

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial)

ROBERT MENDOZA

A.

Mailing Address 409 W. CRUIKSHANK RD

City

VALENCIA

State

PA

Zip Code

16059

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DELOITTE TAX

Occupation

DIRECTOR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		02		2014

Transaction ID : SA11AI.26593

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

PETER V MERRITTS

B.

Mailing Address 128 ODINWOOD COURT

City

GREENSBURG

State

PA

Zip Code

15601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMFIRE MINING COMPANY, LLC

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : SA11AI.26984

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

ANNE METCALF

C.

Mailing Address 938 BLACKBURN ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : SA11AI.26812

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>ROBERT MILLER</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>03 / 31 / 2014</div> </div>
Mailing Address 2271 COUNTRY CLUB DRIVE		<b>Transaction ID : SA11AI.27028</b>
City PITTSBURGH	State PA	Zip Code 15241
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <div> <div></div> <div>400.00</div> </div>
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>1400.00</div> </div>	

Full Name (Last, First, Middle Initial) <b>MICHAEL MILLER</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>02 / 06 / 2014</div> </div>
Mailing Address 527 N. ACADIAN TWY		<b>Transaction ID : SA11AI.26688</b>
City BATON ROUGE	State LA	Zip Code 70806
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <div> <div></div> <div>1000.00</div> </div>
Name of Employer STAR SERVICE INC.	Occupation CONTRACTOR	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>1000.00</div> </div>	

Full Name (Last, First, Middle Initial) <b>PETRA B MITCHELL</b>		Date of Receipt <div> <div>M M / D D / Y Y Y Y</div> <div>03 / 24 / 2014</div> </div>
Mailing Address 602 VICTORY RD.		<b>Transaction ID : SA11AI.26942</b>
City PITTSBURGH	State PA	Zip Code 15237
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <div> <div></div> <div>250.00</div> </div>
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div> <div></div> <div>250.00</div> </div>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<div> <div></div> <div>1650.00</div> </div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div> <div></div> </div>

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 50 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WILLIAM MOSCHELLA**

A.

Mailing Address 6712 MARBO COURT

City

FALLS CHURCH

State

VA

Zip Code

22046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 27 / 2014

Transaction ID : SA11AI.27000

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**JOHN MOUGANIS**

B.

Mailing Address 1601 FIELDSTONE LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MOUGANIS AGENCY

Occupation

FINANCIAL PLANNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2014

Transaction ID : SA11AI.26811

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**JOHN MOUGANIS**

C.

Mailing Address 1601 FIELDSTONE LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MOUGANIS AGENCY

Occupation

FINANCIAL PLANNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1265.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27100

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

765.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RONALD MUHLENKAMP**

A.

Mailing Address 725 THREE DEGREE ROAD

City

BUTLER

State

PA

Zip Code

16002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MUHLENKAMP &amp; CO. INC.

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 24 / 2014

Transaction ID : SA11AI.26944

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**MRS. JOAN L. MUSSELMAN**

B.

Mailing Address 2918 BRYER RIDGE COURT

City

EXPORT

State

PA

Zip Code

15632

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
01 / 17 / 2014

Transaction ID : SA11AI.26617

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**MRS. JOAN L. MUSSELMAN**

C.

Mailing Address 2918 BRYER RIDGE COURT

City

EXPORT

State

PA

Zip Code

15632

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27041

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 52 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PERRY NAPOLITANO**

A.

Mailing Address 1241 BEAMS RUN ROAD

City

CLAIRTON

State

PA

Zip Code

15025

FEC ID number of contributing federal political committee.

C

Name of Employer

REED SMITH

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : SA11AI.26969

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**JON C. NEHLSSEN**

B.

Mailing Address 200 W. WASHINGTON SQ. #2204

City

PHILADELPHIA

State

PA

Zip Code

19106

FEC ID number of contributing federal political committee.

C

Name of Employer

CARNEGIE MELLON

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.27040

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**HUGH W. NEVIN JR.**

C.

Mailing Address 9110 STRADA PLACE MERCATO 6200

City

NAPLES

State

FL

Zip Code

34108

FEC ID number of contributing federal political committee.

C

Name of Employer

COHEN AND GRIGSBY

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		18		2014

Transaction ID : SA11AI.26844

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

3250.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 53 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**WILLIAM NEWLIN**

A.

Mailing Address 752 FLEMING LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEWLIN INVESTMENT COMPANY, LLC

Occupation

CHAIRMAN

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 24 / 2014

Transaction ID : SA11AI.26635

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ROBERT NEWMAN**

B.

Mailing Address 115 BROOKSIDE BLVD.

City

PITTSBURGH

State

PA

Zip Code

15241

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 18 / 2014

Transaction ID : SA11AI.26835

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**REYNE O'SHAUGHNESSY-GOETZE**

C.

Mailing Address 305 QUAKER RD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 26 / 2014

Transaction ID : SA11AI.26890

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 54 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JOHN C OLIVER III**

Mailing Address 535 SMITHFIELD STREET

City

PITTSBURGH

State

PA

Zip Code

15222

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation  
CONSULTANT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2014

Transaction ID : SA11AI.26634

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**ERIC PALJUG**

Mailing Address 96 STONEY CAMP LANE

City

PITTSBURGH

State

PA

Zip Code

15238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AKAMAS CONSULTING LLC

Occupation  
CONSULTANT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

325.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.27101

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**CHRISTOPHER PAPPAS**

Mailing Address 615 EAST DRIVE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STYRON LLC

Occupation  
PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		11		2014

Transaction ID : SA11AI.26702

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

1025.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 125

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**Full Name (Last, First, Middle Initial)  
**A. HOWARD M PICKING III**

Mailing Address 100 LONGVIEW LN.

City	State	Zip Code
JOHNSTOWN	PA	15905

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		10		2014

Transaction ID : SA11AI.26599

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)  
**B. JOHN G PILEWICZ**

Mailing Address 6 FAIRWAY RD.

City	State	Zip Code
SEWICKLEY	PA	15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ESMARKOccupation  
PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2014

Transaction ID : SA11AI.26645

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)  
**C. JOHN R PIPPY**

Mailing Address 7018 WEEPING WILLOW DR.

City	State	Zip Code
MOON TOWNSHIP	PA	15108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.26949

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JOHN J. POLACEK JR.**

A.

Mailing Address 221 CURTIS DR.

City

JOHNSTOWN

State

PA

Zip Code

15904

FEC ID number of contributing federal political committee.

C

Name of Employer

JWF INDUSTRIES

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27045

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**FRANK POPOWSKI**

B.

Mailing Address 4407 WILDWOOD SAMPLE ROAD

City

ALLISON PARK

State

PA

Zip Code

15101

FEC ID number of contributing federal political committee.

C

Name of Employer

MELMCOM

Occupation

PARTNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 07 / 2014

Transaction ID : SA11AI.26763

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**DAVID L PORGES**

C.

Mailing Address 5725 AYLESBORO AVE.

City

PITTSBURGH

State

PA

Zip Code

15217

FEC ID number of contributing federal political committee.

C

Name of Employer

EQT

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 24 / 2014

Transaction ID : SA11AI.26955

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3100.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JANE POTTER**

A.

Mailing Address 103 TIMBER LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 07 / 2014

Transaction ID : SA11AI.26760

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**CHARLES J QUEENAN JR.**

B.

Mailing Address 433 JEFFERSON COURT

City

PITTSBURGH

State

PA

Zip Code

15243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2100.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 11 / 2014

Transaction ID : SA11AI.26705

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**CHARLES J QUEENAN JR.**

C.

Mailing Address 433 JEFFERSON COURT

City

PITTSBURGH

State

PA

Zip Code

15243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 18 / 2014

Transaction ID : SA11AI.26847

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 58 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MICHAEL RIGGS**

A.

Mailing Address 237 MOUNTAIN RIDGE COURT

City

BERLIN

State

PA

Zip Code

15530

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27088

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**ROBERT RIORDAN**

B.

Mailing Address 877 BLACKBURN ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 24 / 2014

Transaction ID : SA11AI.26636

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

**ROBERT RIORDAN**

C.

Mailing Address 877 BLACKBURN ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 24 / 2014

Transaction ID : SA11AI.26637

Amount of Each Receipt this Period

400.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 59 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ELIN C. RODDEY**

A.

Mailing Address 1413 OAK ST

City

OAKMONT

State

PA

Zip Code

15139

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.26956

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**WILLIAM ROEMER**

B.

Mailing Address 42 LITTLE SEWICKLEY CREEK ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : SA11AI.26807

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**SUZANNE SABINA**

C.

Mailing Address 111 SYCAMORE DR.

City

PITTSBURGH

State

PA

Zip Code

15237

FEC ID number of contributing federal political committee.

C

Name of Employer

ONE SOURCE HR

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		24		2014

Transaction ID : SA11AI.26647

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2500.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 60 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JOAN SANTARELLA**

Mailing Address 318 SEWICKLEY RIDGE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27043

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**EDWARD G. SAXON**

Mailing Address 801 10TH STREET

City

OAKMONT

State

PA

Zip Code

15139

FEC ID number of contributing federal political committee.

C

Name of Employer

CONCO SYSTEMS

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 11 / 2014

Transaction ID : SA11AI.26699

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**EDWARD G. SAXON**

Mailing Address 801 10TH STREET

City

OAKMONT

State

PA

Zip Code

15139

FEC ID number of contributing federal political committee.

C

Name of Employer

CONCO SYSTEMS

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27038

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 61 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**RUSSELL SCHETROMA**

Mailing Address 389 CHESTNUT STREET

City

MEADVILLE

State

PA

Zip Code

16335

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 24 / 2014

Transaction ID : SA11AI.26959

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**ALBERT F. SCHMIDT**

Mailing Address 511 WIMER CIRCLE

City

PITTSBURGH

State

PA

Zip Code

15237

FEC ID number of contributing federal political committee.

C

Name of Employer

SCHMIDT CONSULTING

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 28 / 2014

Transaction ID : SA11AI.26990

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ARTHUR C. SCHWOTZER**

Mailing Address 145 ROCKINGHAM LANE

City

MCMURRAY

State

PA

Zip Code

15317

FEC ID number of contributing federal political committee.

C

Name of Employer

CROSSGATES INC.

Occupation

CHAIRMAN

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 24 / 2014

Transaction ID : SA11AI.26954

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 62 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**DAVID SCULLEY****A.**

Mailing Address 853 BLACKBURN ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INVESTOR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2014

**Transaction ID : SA11AI.26832**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**PETER SHEPTAK****B.**

Mailing Address 14 SURREY RD

City

PALM BEACH GARDENS

State

FL

Zip Code

33418

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

**Transaction ID : SA11AI.27089**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**WILLIS SIEGFRIED****C.**

Mailing Address 721 SHADY LANE

City

PITTSBURGH

State

PA

Zip Code

15228

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ECKERT SEAMANS

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

**Transaction ID : SA11AI.26953**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

1000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 63 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ALEXANDER J. SIMAKAS**

Mailing Address 921 BEAVER ST.

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE DEVELOPMENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 24 / 2014

Transaction ID : SA11AI.26644

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**GARY E. SLAGEL**

Mailing Address 11 GRANDVIEW CIRCLE

City

CANONSBURG

State

PA

Zip Code

15317

FEC ID number of contributing federal political committee.

C

Name of Employer

STEPTOE-JOHNSON

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27023

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**THOMAS SMITH**

Mailing Address 736 BEAVER STREET

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

MARKETING DIRECTOR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 13 / 2014

Transaction ID : SA11AI.26854

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 64 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**THOMAS SMITH**

A.

Mailing Address 2340 SMITH ROAD

City

SHELOCTA

State

PA

Zip Code

15774

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

BUSINESS OWNER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : SA11AI.26825

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**STEPHEN SMITH**

B.

Mailing Address 945 BIDEFORD DRIVE

City

SOUTH PARK

State

PA

Zip Code

15129

FEC ID number of contributing federal political committee.

C

Name of Employer

STEPTOE &amp; JOHNSON, PLLC

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.26958

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**PETER SOUR**

C.

Mailing Address PO BOX 68

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : SA11AI.26891

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional).....

2875.00

**TOTAL** This Period (last page this line number only).....



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 65 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**PETER SOUR**

A.

Mailing Address PO BOX 68

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

235.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 30 / 2014

Transaction ID : SA11AI.27106

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**JOHN A STALEY IV**

B.

Mailing Address 1 OXFORD CENTER STE. 3950

City

PITTSBURGH

State

PA

Zip Code

15219

FEC ID number of contributing federal political committee.

C

Name of Employer

STALEY CAPITAL ADVISERS, INC.

Occupation

INVESTMENT ADVISOR

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 18 / 2014

Transaction ID : SA11AI.26846

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**DANIEL C. STATLER**

C.

Mailing Address 745 MUIRFIELD DRIVE

City

GREENSBURG

State

PA

Zip Code

15601

FEC ID number of contributing federal political committee.

C

Name of Employer

JENNMAR

Occupation

VICE PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2350.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 18 / 2014

Transaction ID : SA11AI.26842

Amount of Each Receipt this Period

850.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1360.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 66 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**CECELIA J. STEFFISH**

A.

Mailing Address 379 DINNERBELL RD.

City

BUTLER

State

PA

Zip Code

16002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STEFFISH AND LAFFERTYOccupation  
EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 18 2014

Transaction ID : SA11AI.26845

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**PETER STEPHAICH**

B.

Mailing Address 906 AMBERSON AVE

City

PITTSBURGH

State

PA

Zip Code

15232

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAMPBELL TRANSPORTATIONOccupation  
EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 18 2014

Transaction ID : SA11AI.26837

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**JACOB J STILLEY**

C.

Mailing Address 131 BLACKTHORN DRIVE

City

BUTLER

State

PA

Zip Code

16002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERIKOHL MINING, INC.Occupation  
MANAGER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 24 2014

Transaction ID : SA11AI.26946

Amount of Each Receipt this Period

600.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2100.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 67 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JACOB J STILLEY**

A.

Mailing Address 131 BLACKTHORN DRIVE

City

BUTLER

State

PA

Zip Code

16002

FEC ID number of contributing federal political committee.

C

Name of Employer

AMERIKOHL MINING, INC.

Occupation

MANAGER

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.26947

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

**JAMIE STILLEY**

B.

Mailing Address 131 BLACK THORN DR.

City

BUTLER

State

PA

Zip Code

16002

FEC ID number of contributing federal political committee.

C

Name of Employer

AMERIKOHL MINING, INC

Occupation

EXECUTIVE

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.26945

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**HAYES STOVER**

C.

Mailing Address 409 WOODLAND ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

K &amp; L GATES LLP

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : SA11AI.26918

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1650.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 68 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JOHN STRAKA JR**

Mailing Address 608 ACADEMY AVENUE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4300.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 24 / 2014

Transaction ID : SA11AI.26641

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**ROBERT SUFFOLETTA**

Mailing Address 3213 LATING STREAM LANE

City

AUSTIN

State

TX

Zip Code

78746

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI.27090

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**ERIN A SULLIVAN**

Mailing Address 650 CANTERBURY LANE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

UPMC

Occupation

ANESTHESIOLOGIST

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 13 / 2014

Transaction ID : SA11AI.26855

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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PAGE 69 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JOEL SWANSON**

Mailing Address 903 CENTENNIAL AVENUE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ALLEGHENY ANESTHESIOLOGY ASSOCIATE

Occupation

ANESTHESIOLOGIST

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2014

Transaction ID : SA11AI.26836

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**MARYBETH TAYLOR**

Mailing Address 7315 PERRYVILLE AVENUE

City

PITTSBURGH

State

PA

Zip Code

15202

FEC ID number of contributing  
federal political committee.

C

Name of Employer

US STEEL CORP.

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2014

Transaction ID : SA11AI.26816

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**PATSY D TIANI JR.**

Mailing Address PO BOX 6200

City

MURRYSVILLE

State

PA

Zip Code

15668

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WATSON CHEVROLET

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.27047

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MICHAEL URBAN</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		24		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		24		2014									
Mailing Address 403 FAIRVIEW ROAD		<b>Transaction ID : SA11AI.26952</b>											
City PITTSBURGH	State PA	Zip Code 15238											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00											
Name of Employer DEUTSCHE BANK	Occupation STOCK ANALYST												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00												
<b>B.</b> Full Name (Last, First, Middle Initial) <b>JOHN M URDA</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>28</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	02		28		2014
M M M	/	D D D	/	Y Y Y Y Y									
02		28		2014									
Mailing Address 920 CENTENNIAL AVE.		<b>Transaction ID : SA11AI.26750</b>											
City SEWICKLEY	State PA	Zip Code 15143											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00											
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00												
<b>C.</b> Full Name (Last, First, Middle Initial) <b>JONATHAN URFFER</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>07</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y	03		07		2014
M M M	/	D D D	/	Y Y Y Y Y									
03		07		2014									
Mailing Address 194 WITHEROW ROAD		<b>Transaction ID : SA11AI.26773</b>											
City SEWICKLEY	State PA	Zip Code 15143											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00											
Name of Employer UPMC	Occupation PHYSICIAN												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00												
<b>SUBTOTAL</b> of Receipts This Page (optional).....		1750.00											
<b>TOTAL</b> This Period (last page this line number only).....													

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>ELIZABETH VERES</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2014	
Mailing Address 10210 GRUBBS ROAD		<b>Transaction ID : SA11AI.26852</b>	
City WEXFORD	State PA	Zip Code 15090	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5700.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>HARTLEY WALKER</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 07 / 2014	
Mailing Address 308 CHESTNUT ROAD		<b>Transaction ID : SA11AI.26774</b>	
City SEWICKLEY	State PA	Zip Code 15143	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>MICHAEL WALKER</b>		Date of Receipt M M / D D / Y Y Y Y 02 / 25 / 2014	
Mailing Address 1400 DELLVIEW DRIVE		<b>Transaction ID : SA11AI.26738</b>	
City GREENSBURG	State PA	Zip Code 15601	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer LOYAL HANNA MANAGEMENT	Occupation BUSINESS OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		5450.00	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**JANICE WALKER**

A.

Mailing Address 1400 DELVIEW DR.

City

GREENSBURG

State

PA

Zip Code

15601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

5200.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		25		2014

Transaction ID : SA11AI.26739

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**PATRICIA WEAVER**

B.

Mailing Address 111 RIDING TRAIL LANE

City

PITTSBURGH

State

PA

Zip Code

15215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PITTSBURGH DERMATOLOGY CENTER

Occupation

MANAGER

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		26		2014

Transaction ID : SA11AI.26892

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**STACEY H. WEST**

C.

Mailing Address 246 PINK HOUSE RD.

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		24		2014

Transaction ID : SA11AI.26632

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3100.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MALACHY WHALEN**

A.

Mailing Address 500 ACADEMY PL

City

GLEN OSBORNE

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MALACHY WHALEN &amp; CO. INC.

Occupation

INSURANCE AGENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2014

Transaction ID : SA11AI.26808

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**PAUL B WHIPPLE**

B.

Mailing Address 780 OAK LEAF LANE

City

HARRISBURG

State

PA

Zip Code

17111

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DAWOOD ENGINEERING, INC.

Occupation

VICE PRESIDENT/CFO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : SA11AI.26920

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**DAVID WILLIAMS**

C.

Mailing Address 1614 ENGLISH OAK COURT

City

WEXFORD

State

PA

Zip Code

15090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PNC FINANCIAL SERVICES GROUP

Occupation

SVP - MERGERS &amp; ACQUISITIONS

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2014

Transaction ID : SA11AI.27013

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional).....

1600.00

TOTAL This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**LON P. WILSON**

A.

Mailing Address 500 EASTVIEW DRIVE

City

NORTH HUNTINGDON

State

PA

Zip Code

15642

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CDL NUCLEAR TECHNOLOGIES, INC.

Occupation

VICE PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 27 / 2014

Transaction ID : SA11AI.27001

Amount of Each Receipt this Period

2600.00

REATTRIBUTION REQUESTED

Full Name (Last, First, Middle Initial)

**JOHN J. WINK**

B.

Mailing Address 260 BURCH DRIVE

City

MOON TOWNSHIP

State

PA

Zip Code

15106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TIX OUTLET INC.

Occupation

TICKET BROKER

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 07 / 2014

Transaction ID : SA11AI.26772

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**WILLIAM WINKENWERDER JR.**

C.

Mailing Address 899 PERSIMMON RD.

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HIGHMARK

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 10 / 2014

Transaction ID : SA11AI.26601

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3350.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MARY G. WOLF**

A.

Mailing Address 178 BACKBONE ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

3850.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 24 / 2014

Transaction ID : SA11AI.26649

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**MARY G. WOLF**

B.

Mailing Address 178 BACKBONE ROAD

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

4350.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 07 / 2014

Transaction ID : SA11AI.26776

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**REBECCA WOLF KIEL**

C.

Mailing Address 5787 BUSH HILL DR.

City

ALEXANDRIA

State

VA

Zip Code

22310

FEC ID number of contributing federal political committee.

C

Name of Employer

RIDGE POLICY GROUP

Occupation

CONSULTANT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 20 / 2014

Transaction ID : SA11AI.26725

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**ROBERT S WRIGHT**

A.

Mailing Address 1503 FOX CHASE DRIVE

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

.INFORMATION REQUESTED

Occupation

.INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2014

Transaction ID : SA11AI.26994

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

**KENNETH E WRIGHT**

B.

Mailing Address 4 WAY HOLLOW RD.

City

SEWICKLEY

State

PA

Zip Code

15143

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2014

Transaction ID : SA11AI.26972

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5200.00

159925.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**ACE GROUP HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 436 WALNUT STREET  
 WAO4P

City	State	Zip Code
PHILADELPHIA	PA	19106

FEC ID number of contributing  
federal political committee.

**C** C00348938

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11C.27060

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)  
**AEGON USA, LLC/TRANSAMERICA CORPORATION PAC**

Mailing Address 1001 PENNSYLVANIA AVENUE, NW  
 SUITE 500A SOUTH

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing  
federal political committee.

**C** C00236414

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : SA11C.26921

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)  
**ALLEGHENY TECHNOLOGIES INCORPORATED POLITICAL ACTION COMMITTEE (AT-PAC)**

Mailing Address 1000 SIX PPG PLACE

City	State	Zip Code
PITTSBURGH	PA	15222

FEC ID number of contributing  
federal political committee.

**C** C00141697

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

Transaction ID : SA11C.26940

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**AMERICAN INSURANCE ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address **2101 L STREET, NW**  
**SUITE 400**

City	State	Zip Code
WASHINGTON	DC	20037

FEC ID number of contributing  
federal political committee.

**C** **C00103143**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**1000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : **SA11C.27061**

Amount of Each Receipt this Period

**1000.00**

B. Full Name (Last, First, Middle Initial)  
**AMERICAN WATER WORKS COMPANY, INC. FEDERAL PAC A/K/A AMERICAN WATER FEDERAL PAC**

Mailing Address **P.O. BOX 1770**

City	State	Zip Code
VOORHEES	NJ	08043

FEC ID number of contributing  
federal political committee.

**C** **C00354548**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2014

Transaction ID : **SA11C.26703**

Amount of Each Receipt this Period

**500.00**

C. Full Name (Last, First, Middle Initial)  
**ANN PAC**

Mailing Address **P.O. BOX 3535**

City	State	Zip Code
BALLWIN	MO	63022

FEC ID number of contributing  
federal political committee.

**C** **C00531764**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

**1000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	11	/	2014

Transaction ID : **SA11C.26706**

Amount of Each Receipt this Period

**1000.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2500.00**

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**AQUA AMERICA, INC. H2O POLITICAL ACTION COMMITTEE**

Mailing Address **762 WEST LANCASTER AVENUE**

City	State	Zip Code
BRYN MAWR	PA	19010

FEC ID number of contributing  
federal political committee.

**C** C00340455

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		10		2014

Transaction ID : SA11C.26602

Amount of Each Receipt this Period

1500.00

B. Full Name (Last, First, Middle Initial)  
**ARCH COAL INC. POLITICAL ACTION COMMITTEE (ARCHPAC)**

Mailing Address **CITYPLACE ONE**

City	State	Zip Code
ST. LOUIS	MO	63141

FEC ID number of contributing  
federal political committee.

**C** C00167668

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : SA11C.26928

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)  
**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

Mailing Address **11921 FREEDOM DRIVE  
SUITE 1100**

City	State	Zip Code
RESTON	VA	20190

FEC ID number of contributing  
federal political committee.

**C** C00447565

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		17		2014

Transaction ID : SA11C.26621

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....

4500.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA PAC)**

Mailing Address 1101 WILSON BLVD.

City	State	Zip Code
ARLINGTON	VA	22209

FEC ID number of contributing  
federal political committee.

**C** C00281212

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

**Transaction ID : SA11C.27058**

Amount of Each Receipt this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**BILL PAC**

Mailing Address 228 S. WASHINGTON ST., STE. 115

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing  
federal political committee.

**C** C00412288

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

**Transaction ID : SA11C.26930**

Amount of Each Receipt this Period

2500.00

**C.** Full Name (Last, First, Middle Initial)  
**BUCHANAN INGERSOLL & ROONEY PC COMMITTEE FOR EFFECTIVE GOVERNMENT 'BIRPC PAC'**

Mailing Address ONE OXFORD CENTRE, MILES H. SIMON  
301 GRANT STREET 20TH FLOOR

City	State	Zip Code
PITTSBURGH	PA	15219

FEC ID number of contributing  
federal political committee.

**C** C00195388

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3301.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2014

**Transaction ID : SA11C.26638**

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4500.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CITIZENS FOR LENGENFELDER**

Mailing Address 125 LAYTON LN.

City State Zip Code  
JOHNSTOWN PA 15904

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y  
02 11 2014

Transaction ID : SA11C.26700

Amount of Each Receipt this Period

250.00

PERMISSIBLE FUNDS

**B.** Full Name (Last, First, Middle Initial)  
**CITIZENS FOR PROSPERITY IN AMERICA PAC**

Mailing Address 228 SOUTH WASHINGTON STREET #115

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing  
federal political committee.

**C** C00491654

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 21 2014

Transaction ID : SA11C.26926

Amount of Each Receipt this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
**CONSOL ENERGY INC. PAC**

Mailing Address CNX CENTER  
1000 CONSOL ENERGY DRIVE

City State Zip Code  
CANONSBURG PA 15317

FEC ID number of contributing  
federal political committee.

**C** C00279331

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

7600.00

Date of Receipt

M M / D D / Y Y Y Y  
03 28 2014

Transaction ID : SA11C.26995

Amount of Each Receipt this Period

2600.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7850.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>DOLLAR SAVINGS BANK POLITICAL ACTION COMMITTEE (DOLPAC)</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>11</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	02		11		2014
M M M	/	D D D	/	Y Y Y Y Y								
02		11		2014								
Mailing Address <b>THREE GATEWAY CENTER</b> <b>PUBLIC AFFAIRS 1 EAST</b>		<b>Transaction ID : SA11C.26709</b>										
City <b>PITTSBURGH</b>	State <b>PA</b>											
Zip Code <b>15222</b>		Amount of Each Receipt this Period <table border="1"> <tr> <td>2500.00</td> </tr> </table>	2500.00									
2500.00												
FEC ID number of contributing federal political committee. <b>C</b> <b>C00151563</b>												
Name of Employer	Occupation											
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>5100.00</td> </tr> </table>	5100.00										
5100.00												

<b>B.</b> Full Name (Last, First, Middle Initial) <b>DOLLAR SAVINGS BANK POLITICAL ACTION COMMITTEE (DOLPAC)</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	03		24		2014
M M M	/	D D D	/	Y Y Y Y Y								
03		24		2014								
Mailing Address <b>THREE GATEWAY CENTER</b> <b>PUBLIC AFFAIRS 1 EAST</b>		<b>Transaction ID : SA11C.26951</b>										
City <b>PITTSBURGH</b>	State <b>PA</b>											
Zip Code <b>15222</b>		Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00									
500.00												
FEC ID number of contributing federal political committee. <b>C</b> <b>C00151563</b>												
Name of Employer	Occupation											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>5600.00</td> </tr> </table>	5600.00										
5600.00												

<b>C.</b> Full Name (Last, First, Middle Initial) <b>DUKE ENERGY CORPORATION PAC</b>		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y	03		21		2014
M M M	/	D D D	/	Y Y Y Y Y								
03		21		2014								
Mailing Address <b>550 SOUTH TRYON STREET</b>		<b>Transaction ID : SA11C.26923</b>										
City <b>CHARLOTTE</b>	State <b>NC</b>											
Zip Code <b>28202</b>		Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00									
1000.00												
FEC ID number of contributing federal political committee. <b>C</b> <b>C00083535</b>												
Name of Employer	Occupation											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00										
1000.00												

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<table border="1"> <tr> <td>4000.00</td> </tr> </table>	4000.00
4000.00		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>EAGLE FORUM PAC</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2014	
Mailing Address PO BOX 618		<b>Transaction ID : SA11C.26965</b>	
City ALTON	State IL	Zip Code 62002	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00103937			
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>FAMILY PAC</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 1001 LIBERTY AVENUE #850		<b>Transaction ID : SA11C.26991</b>	
City PITTSBURGH	State PA	Zip Code 15222	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00336842			
Name of Employer	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 6000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>FIRSTENERGY CORP. POLITICAL ACTION COMMITTEE</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014	
Mailing Address 76 SOUTH MAIN STREET		<b>Transaction ID : SA11C.26941</b>	
City AKRON	State OH	Zip Code 44308	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C C00140855			
Name of Employer	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000.00		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		7000.00	
<b>TOTAL</b> This Period (last page this line number only).....			

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**GENERIC PHARMACEUTICAL ASSOCIATION POLITICAL ACTION COMMITTEE**

**A.**

Mailing Address 777 6TH STREET, NW  
SUITE 510

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

**C** C00383463

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 14 / 2014

Transaction ID : SA11C.26823

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**HELP AMERICA'S LEADERS POLITICAL ACTION COMMITTEE (HALPAC)**

**B.**

Mailing Address 701 8TH STREET, NW  
SUITE 500

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

**C** C00376038

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
01 / 17 / 2014

Transaction ID : SA11C.26618

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**HIGHMARK HEALTH PAC OF HIGHMARK INC.**

**C.**

Mailing Address 1800 CENTER STREET

City CAMP HILL	State PA	Zip Code 17089
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee.

**C** C00302844

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

4750.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 07 / 2014

Transaction ID : SA11C.26780

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HIGHMARK HEALTH PAC OF HIGHMARK INC.**

Mailing Address 1800 CENTER STREET

City	State	Zip Code
CAMP HILL	PA	17089

FEC ID number of contributing federal political committee.

**C** C00302844

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2014

Transaction ID : SA11C.26989

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
**HUMANA INC. POLITICAL ACTION COMMITTEE**

Mailing Address 975 F STREET, NW  
 SUITE 550

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee.

**C** C00271007

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		20		2014

Transaction ID : SA11C.26727

Amount of Each Receipt this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
 INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

Mailing Address 412 FIRST STREET, SE, SUITE 300

City	State	Zip Code
WASHINGTON	DC	20003

FEC ID number of contributing federal political committee.

**C** C00022343

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11C.27067

Amount of Each Receipt this Period

3500.00

**SUBTOTAL** of Receipts This Page (optional).....

6000.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**INTERNATIONAL PAPER POLITICAL ACTION COMMITTEE (IP-PAC)**

Mailing Address 1101 PENNSYLVANIA AVENUE NW  
 SUITE 200

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing  
federal political committee.

**C** C00034405

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		07		2014

Transaction ID : SA11C.26781

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)  
**INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE**

Mailing Address 1401 H STREET NW SUITE 1200

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing  
federal political committee.

**C** C00105981

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		17		2014

Transaction ID : SA11C.26619

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)  
**JEWISH COMMUNITY POLITICAL ACTION COMMITTEE OF PITTSBURGH**

Mailing Address PO BOX 8125

City	State	Zip Code
PITTSBURGH	PA	15217

FEC ID number of contributing  
federal political committee.

**C** C00412502

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		11		2014

Transaction ID : SA11C.26704

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JIM GERLACH FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 87

City State Zip Code  
 UWCHLAND PA 19480

FEC ID number of contributing  
federal political committee.

**C** C00372102

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 31 2014

Transaction ID : SA11C.27063

Amount of Each Receipt this Period

2000.00

**B.** Full Name (Last, First, Middle Initial)  
**LOUIE GOHMERT FOR CONGRESS COMMITTEE**

Mailing Address 3310 S BROADWAY  
 STE. 100

City State Zip Code  
 TYLER TX 75701

FEC ID number of contributing  
federal political committee.

**C** C00386532

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 03 31 2014

Transaction ID : SA11C.27056

Amount of Each Receipt this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MARATHON PETROLEUM CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE (MPAC)**

Mailing Address P.O. BOX 75000  
 MC2250

City State Zip Code  
 DETROIT MI 48275

FEC ID number of contributing  
federal political committee.

**C** C00496307

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

7000.00

Date of Receipt

M M / D D / Y Y Y Y  
 01 24 2014

Transaction ID : SA11C.26650

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....

5500.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**MARKWEST ENERGY PARTNERS LP POLITICAL ACTION COMMITTEE**

Mailing Address 1515 ARAPAHOE STREET

TOWER 2, SUITE 700

City

DENVER

State

CO

Zip Code

80202

FEC ID number of contributing  
federal political committee.

**C** C00489468

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 24 / 2014

Transaction ID : SA11C.26939

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM**

Mailing Address 2901 TELESTAR CT.

City

FALLS CHURCH

State

VA

Zip Code

22042

FEC ID number of contributing  
federal political committee.

**C** C00005249

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11C.27059

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE**

Mailing Address 1125 EXECUTIVE CIRCLE

City

IRVING

State

TX

Zip Code

75038

FEC ID number of contributing  
federal political committee.

**C** C00140061

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 20 / 2014

Transaction ID : SA11C.26826

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional).....

2500.00

**TOTAL** This Period (last page this line number only).....



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 89 OF 125

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. NATIONAL RESTAURANT ASSOCIATION PAC (RESTAURANT PAC)**

Mailing Address 2055 L STREET, NW

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.**C** C00003764

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

**Transaction ID : SA11C.27064**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND**

Mailing Address ONE CONSTITUTION AVE NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.**C** C00009282

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

**Transaction ID : SA11C.27066**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS**Mailing Address 317 MASSACHUSETTS AVENUE, NE  
1ST FLOOR

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.**C** C00343137

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		20		2014

**Transaction ID : SA11C.26728**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional).....

7500.00

**TOTAL** This Period (last page this line number only).....

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 90 OF 125

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>PPG BETTER GOVERNMENT TEAM; PPG INDUSTRIES INC.</b></p> <p>Mailing Address <b>ONE PPG PLACE</b> <b>40TH FLOOR</b></p> <p>City <b>PITTSBURGH</b> State <b>PA</b> Zip Code <b>15272</b></p> <p>FEC ID number of contributing federal political committee. <b>C C00034298</b></p> <p>Name of Employer _____ Occupation _____</p> <p>Receipt For: 2014  <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p> <p>Election Cycle-to-Date  <b>3750.00</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y  <b>03 / 07 / 2014</b></p> <p><b>Transaction ID : SA11C.26782</b></p> <p>Amount of Each Receipt this Period  <b>1000.00</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>ROSKAM PAC</b></p> <p>Mailing Address <b>610 SOUTH BOULEVARD</b></p> <p>City <b>TAMPA</b> State <b>FL</b> Zip Code <b>33606</b></p> <p>FEC ID number of contributing federal political committee. <b>C C00494674</b></p> <p>Name of Employer _____ Occupation _____</p> <p>Receipt For: 2014  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p> <p>Election Cycle-to-Date  <b>5000.00</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y  <b>03 / 31 / 2014</b></p> <p><b>Transaction ID : SA11C.27065</b></p> <p>Amount of Each Receipt this Period  <b>2500.00</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE</b></p> <p>Mailing Address <b>ONE STATE FARM PLAZA</b> <b>C/O MARK SCHWAMBERGER, TREASURER,</b></p> <p>City <b>BLOOMINGTON</b> State <b>IL</b> Zip Code <b>61710</b></p> <p>FEC ID number of contributing federal political committee. <b>C C00544817</b></p> <p>Name of Employer _____ Occupation _____</p> <p>Receipt For: 2014  <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) _____</p> <p>Election Cycle-to-Date  <b>1000.00</b></p>		<p>Date of Receipt  M M / D D / Y Y Y Y  <b>03 / 31 / 2014</b></p> <p><b>Transaction ID : SA11C.27062</b></p> <p>Amount of Each Receipt this Period  <b>1000.00</b></p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p> <p><b>TOTAL</b> This Period (last page this line number only) .....</p>		<p><b>4500.00</b></p>



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial)  
**VSP HOLDINGS COMPANY INC PAC**

Mailing Address 3333 QUALITY DRIVE MS 163

City State Zip Code  
RANCHO CORDOVA CA 95670

FEC ID number of contributing  
federal political committee.

C C00493502

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 21 2014

Transaction ID : SA11C.26924

Amount of Each Receipt this Period

2000.00

B. Full Name (Last, First, Middle Initial)  
**WALGREEN CO PAC**

Mailing Address 104 WILMOT ROAD MS #1447

City State Zip Code  
DEERFIELD IL 60015

FEC ID number of contributing  
federal political committee.

C C00160770

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 21 2014

Transaction ID : SA11C.26922

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

71350.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 93 OF 125

(check only one)

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**COMMITTEE TO PROTECT PROSPERITY & FREE ENTERPRISE**

Mailing Address PO BOX 30844

City

BETHESDA

State

MD

Zip Code

20824

FEC ID number of contributing federal political committee.

**C** C00546382

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

42808.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		24		2014

Transaction ID : SA12.26654

Amount of Each Receipt this Period

1090.96

TRANSFER IN AFFILIATED

Full Name (Last, First, Middle Initial)

**LEE ANN PEARSE**

Mailing Address 12116 DRUJAN LANE

City

DALLAS

State

TX

Zip Code

75244

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

PEDIATRIX

PEDIATRIC CARDIOLOGIST

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		24		2014

Transaction ID : SA12.26658

Amount of Each Receipt this Period

100.00

**[MEMO ITEM]**  
 TRANSFER IN AFFILIATED

Full Name (Last, First, Middle Initial)

**DAMON DECRESCENZO**

Mailing Address 82 HOLCOMB AVENUE

City

STATEN ISLAND

State

NY

Zip Code

10312

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

PTHE CREDIT PROS

VICE PRESIDENT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

166.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		24		2014

Transaction ID : SA12.26659

Amount of Each Receipt this Period

166.67

**[MEMO ITEM]**  
 TRANSFER IN AFFILIATED

**SUBTOTAL** of Receipts This Page (optional).....

1090.96

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**SARAH CUTRONA****A.**

Mailing Address 2612 SHADOW RIDGE DRIVE

City

ARLINGTON

State

VA

Zip Code

76006

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THINK FINANCE

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		24		2014

Transaction ID : SA12.26660

Amount of Each Receipt this Period

300.00

**[MEMO ITEM]**

TRANSFER IN AFFILIATED

Full Name (Last, First, Middle Initial)

**ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)****B.**Mailing Address 11921 FREEDOM DRIVE  
SUITE 1100

City

RESTON

State

VA

Zip Code

20190

FEC ID number of contributing  
federal political committee.

C C00447565

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		24		2014

Transaction ID : SA12.26661

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

TRANSFER IN AFFILIATED

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

1090.96

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 95 OF 125

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**ROTHFUS FOR CONGRESS**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>DUQUESNE CLUB</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		24		2014	
M M	/	D D	/	Y Y Y Y										
01		24		2014										
Mailing Address PO BOX 387		<b>Transaction ID : SA14.26653</b>												
City PITTSBURGH	State PA	Zip Code 15230	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> <td>1010.88</td> </tr> </table>											1010.88
										1010.88				
FEC ID number of contributing federal political committee. C		REFUND												
Name of Employer	Occupation													
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> <td>1010.88</td> </tr> </table>													1010.88
										1010.88				

  

<b>B.</b> Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y									
Mailing Address													
City	State	Zip Code											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> </tr> </table>											
Name of Employer	Occupation												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> </tr> </table>												

  

<b>C.</b> Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y									
Mailing Address													
City	State	Zip Code											
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10"></td> </tr> </table>											
Name of Employer	Occupation												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="10"></td> </tr> </table>												

  

<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td colspan="10"></td> <td>1010.88</td> </tr> </table>												1010.88
										1010.88				
<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td colspan="10"></td> <td>1010.88</td> </tr> </table>												1010.88
										1010.88				

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. A LINK**

Mailing Address 3189 WASHINGTON PIKE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

City	State	Zip Code
BRIDGEVILLE	PA	15017

Amount of Each Disbursement this Period

315.07
--------

Purpose of Disbursement  
POSTAGE

001

Transaction ID : SB17.26757

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. ACRP**

Mailing Address 131 MARKET ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2014

City	State	Zip Code
JOHNSTOWN	PA	15901

Amount of Each Disbursement this Period

325.00
--------

Purpose of Disbursement  
EVENT TICKET

001

Transaction ID : SB17.26791

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. ALLEGHENY COUNTRY CLUB**

Mailing Address 33 WATSON STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

City	State	Zip Code
SEWICKLEY	PA	15143

Amount of Each Disbursement this Period

2664.14
---------

Purpose of Disbursement  
EVENT FACILITY/CATERING

001

Transaction ID : SB17.26717

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....

3304.21

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMERICAN RED CROSS**

Mailing Address 250 JARI DRIVE

City	State	Zip Code
JOHNSTOWN	PA	15904

Purpose of Disbursement  
EVENT TICKET

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2014

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : SB17.26794

**B. AMTRAK**

Mailing Address PO BOX 14368

City	State	Zip Code
PHILADELPHIA	PA	19115

Purpose of Disbursement  
TRAVEL EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2014

Amount of Each Disbursement this Period

51.00
-------

Transaction ID : SB17.26866

**C. AMY PETRAGLIA**

Mailing Address 8623 LEXINGTON PLACE

City	State	Zip Code
WEXFORD	PA	15090

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2014

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB17.26623

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2301.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. AMY PETRAGLIA**

Mailing Address 8623 LEXINGTON PLACE

City	State	Zip Code
WEXFORD	PA	15090

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

3687.00
---------

Transaction ID : SB17.26680

**B. AMY PETRAGLIA**

Mailing Address 8623 LEXINGTON PLACE

City	State	Zip Code
WEXFORD	PA	15090

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB17.26719

**C. BEAVER COUNTY CHAMBER OF COMMERCE**

Mailing Address 798 TURNPIKE ST

City	State	Zip Code
BEAVER	PA	15009

Purpose of Disbursement  
EVENT TICKET

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2014

Amount of Each Disbursement this Period

17.00
-------

Transaction ID : SB17.26691

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5704.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 99 OF 125

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. BEAVER COUNTY CHAMBER OF COMMERCE**

Mailing Address 798 TURNPIKE ST

City	State	Zip Code
BEAVER	PA	15009

Purpose of Disbursement  
EVENT TICKET

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 01 / 2014

Amount of Each Disbursement this Period

130.00
--------

Transaction ID : SB17.26755

**B. BEAVER COUNTY CHAMBER OF COMMERCE**

Mailing Address 798 TURNPIKE ST

City	State	Zip Code
BEAVER	PA	15009

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 18 / 2014

Amount of Each Disbursement this Period

30.00
-------

Transaction ID : SB17.26864

**C. BEAVER COUNTY CHAMBER OF COMMERCE**

Mailing Address 798 TURNPIKE ST

City	State	Zip Code
BEAVER	PA	15009

Purpose of Disbursement  
EVENT TICKET

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 19 / 2014

Amount of Each Disbursement this Period

250.00
--------

Transaction ID : SB17.26869

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

410.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 100 OF 125

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CAMBRIA COUNTY REPUBLICAN COMMITTEE**

Mailing Address 450 LURAY

City	State	Zip Code
JOHNSTOWN	PA	15904

Purpose of Disbursement  
RENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

1000.00
---------

Transaction ID : SB17.26679

**B. CAREY DUNN SIRIANNI**

Mailing Address 77 STONEDALE ROAD

City	State	Zip Code
SEWICKLEY	PA	15143

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2014

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB17.26622

**C. CAREY DUNN SIRIANNI**

Mailing Address 77 STONEDALE ROAD

City	State	Zip Code
SEWICKLEY	PA	15143

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

3687.00
---------

Transaction ID : SB17.26681

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6687.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 101 OF 125

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. CAREY DUNN SIRIANNI**

Mailing Address 77 STONEDALE ROAD

City	State	Zip Code
SEWICKLEY	PA	15143

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

2000.00
---------

Transaction ID : SB17.26718

**B. DUQUESNE CLUB**

Mailing Address PO BOX 387

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2014

Amount of Each Disbursement this Period

826.96
--------

Transaction ID : SB17.26715

**C. EC CONSULTING, LLC**

Mailing Address 526 6TH ST, SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2014

Amount of Each Disbursement this Period

1081.13
---------

Transaction ID : SB17.26675

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3908.09

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. EC CONSULTING, LLC**

Mailing Address 526 6TH ST, SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2014

Amount of Each Disbursement this Period

7234.69
---------

Transaction ID : SB17.26714

**B. ELECTEKUSA**

Mailing Address PO BOX 23715

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		26		2014

Amount of Each Disbursement this Period

4614.72
---------

Transaction ID : SB17.26673

**C. ELECTEKUSA**

Mailing Address PO BOX 23715

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Purpose of Disbursement  
SOFTWARE

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2014

Amount of Each Disbursement this Period

2311.96
---------

Transaction ID : SB17.26711

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

14161.37

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ELECTEKUSA**

Mailing Address PO BOX 23715

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Purpose of Disbursement  
SOFTWARE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2014

Amount of Each Disbursement this Period

2323.28
---------

Transaction ID : SB17.26797

**B. ENTERPRISE BANK**

Mailing Address 100 MAIN STREET

City	State	Zip Code
FITCHBURG	MA	01420

Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2014

Amount of Each Disbursement this Period

1440.00
---------

Transaction ID : SB17.26669

**C. EZ PASS**

Mailing Address 119 LOWER BEECH STREET, STE. 200

City	State	Zip Code
WILMINGTON	DE	19805

Purpose of Disbursement  
AUTOMOBILE EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2014

Amount of Each Disbursement this Period

35.00
-------

Transaction ID : SB17.26737

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3798.28

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. GREATER PITTSBURGH COMMUNITY LEADERS PRAYER BREAKFAST**

Mailing Address 100 W STATION SQUARE, #625

City	State	Zip Code
PITTSBURGH	PA	15219

Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2014

Amount of Each Disbursement this Period

350.00
--------

Transaction ID : SB17.26674

**B. INK STAR, LLC.**

Mailing Address 2243 DARLINGTON RD

City	State	Zip Code
BEAVER FALLS	PA	15010

Purpose of Disbursement  
PRINTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2014

Amount of Each Disbursement this Period

697.48
--------

Transaction ID : SB17.26790

**C. KINGS FAMILY RESTAURANT**

Mailing Address 105 VIP DRIVE

City	State	Zip Code
WEXFORD	PA	15090

Purpose of Disbursement  
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2014

Amount of Each Disbursement this Period

197.09
--------

Transaction ID : SB17.26745

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1244.57



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 105 OF 125

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. LONG NYQUIST & ASSOCIATES CONSULTING**

Mailing Address 121 STATE STREET

City	State	Zip Code
HARRISBURG	PA	17101

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2014

Amount of Each Disbursement this Period

5000.00
---------

Transaction ID : SB17.26672

**B. LONG NYQUIST & ASSOCIATES CONSULTING**

Mailing Address 121 STATE STREET

City	State	Zip Code
HARRISBURG	PA	17101

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2014

Amount of Each Disbursement this Period

4500.00
---------

Transaction ID : SB17.26710

**C. LONG NYQUIST & ASSOCIATES CONSULTING**

Mailing Address 121 STATE STREET

City	State	Zip Code
HARRISBURG	PA	17101

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

9500.00
---------

Transaction ID : SB17.26756

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

19000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 106 OF 125

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MAELSTROM TECHNOLOGY SOLUTIONS**

Mailing Address 200 S. EXECUTIVE DR. SUITE 101

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		02		2014

City	State	Zip Code
BROOKFIELD	WI	53005

Amount of Each Disbursement this Period

63.90
-------

Purpose of Disbursement  
TRANSACTION FEES

001

Transaction ID : SB17.26595

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. MAELSTROM TECHNOLOGY SOLUTIONS**

Mailing Address 200 S. EXECUTIVE DR. SUITE 101

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		21		2014

City	State	Zip Code
BROOKFIELD	WI	53005

Amount of Each Disbursement this Period

0.85
------

Purpose of Disbursement  
TRANSACTION FEES

001

Transaction ID : SB17.27116

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. MAELSTROM TECHNOLOGY SOLUTIONS**

Mailing Address 200 S. EXECUTIVE DR. SUITE 101

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2014

City	State	Zip Code
BROOKFIELD	WI	53005

Amount of Each Disbursement this Period

50.70
-------

Purpose of Disbursement  
TRANSACTION FEES

001

Transaction ID : SB17.26663

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

115.45



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MAELSTROM TECHNOLOGY SOLUTIONS**

Mailing Address 200 S. EXECUTIVE DR. SUITE 101

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2014

City	State	Zip Code
BROOKFIELD	WI	53005

Amount of Each Disbursement this Period

5.70
------

Purpose of Disbursement  
TRANSACTION FEES

001

Transaction ID : SB17.26747

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. MAELSTROM TECHNOLOGY SOLUTIONS**

Mailing Address 200 S. EXECUTIVE DR. SUITE 101

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

City	State	Zip Code
BROOKFIELD	WI	53005

Amount of Each Disbursement this Period

50.70
-------

Purpose of Disbursement  
TRANSACTION FEES

001

Transaction ID : SB17.26753

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. MAELSTROM TECHNOLOGY SOLUTIONS**

Mailing Address 200 S. EXECUTIVE DR. SUITE 101

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		11		2014

City	State	Zip Code
BROOKFIELD	WI	53005

Amount of Each Disbursement this Period

130.70
--------

Purpose of Disbursement  
TRANSACTION FEES

001

Transaction ID : SB17.26853

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

187.10

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 109 OF 125

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MAELSTROM TECHNOLOGY SOLUTIONS**

Mailing Address 200 S. EXECUTIVE DR. SUITE 101

City	State	Zip Code
BROOKFIELD	WI	53005

Purpose of Disbursement  
TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	13	/	2014

Amount of Each Disbursement this Period

38.90
-------

Transaction ID : SB17.26856

**B. MAELSTROM TECHNOLOGY SOLUTIONS**

Mailing Address 200 S. EXECUTIVE DR. SUITE 101

City	State	Zip Code
BROOKFIELD	WI	53005

Purpose of Disbursement  
TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	17	/	2014

Amount of Each Disbursement this Period

69.60
-------

Transaction ID : SB17.26860

**C. MAELSTROM TECHNOLOGY SOLUTIONS**

Mailing Address 200 S. EXECUTIVE DR. SUITE 101

City	State	Zip Code
BROOKFIELD	WI	53005

Purpose of Disbursement  
TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03	/	20	/	2014

Amount of Each Disbursement this Period

102.25
--------

Transaction ID : SB17.26876

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

210.75

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MAELSTROM TECHNOLOGY SOLUTIONS**

Mailing Address 200 S. EXECUTIVE DR. SUITE 101

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2014

City	State	Zip Code
BROOKFIELD	WI	53005

Amount of Each Disbursement this Period

121.55
--------

Purpose of Disbursement  
TRANSACTION FEES

001

Transaction ID : SB17.26882

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. MAELSTROM TECHNOLOGY SOLUTIONS**

Mailing Address 200 S. EXECUTIVE DR. SUITE 101

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

City	State	Zip Code
BROOKFIELD	WI	53005

Amount of Each Disbursement this Period

206.00
--------

Purpose of Disbursement  
TRANSACTION FEES

001

Transaction ID : SB17.27033

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. MAELSTROM TECHNOLOGY SOLUTIONS**

Mailing Address 200 S. EXECUTIVE DR. SUITE 101

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

City	State	Zip Code
BROOKFIELD	WI	53005

Amount of Each Disbursement this Period

25.70
-------

Purpose of Disbursement  
TRANSACTION FEES

001

Transaction ID : SB17.27110

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

353.25

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MARQUIS STRATEGIES**

Mailing Address PO BOX 262

City	State	Zip Code
BEAVER	PA	15009

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

4000.00
---------

Transaction ID : SB17.26720

**B. MARQUIS STRATEGIES**

Mailing Address PO BOX 262

City	State	Zip Code
BEAVER	PA	15009

Purpose of Disbursement  
FUNDRAISING CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2014

Amount of Each Disbursement this Period

4456.19
---------

Transaction ID : SB17.26796

**C. MEYER, UNKOVIC & SCOTT, LLP**

Mailing Address 537 SMITHFIELD STREET

City	State	Zip Code
PITTSBURGH	PA	15222

Purpose of Disbursement  
LEGAL FEES

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2014

Amount of Each Disbursement this Period

439.82
--------

Transaction ID : SB17.26677

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

8896.01

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. MY FAX SERVICE**

Mailing Address 6922 HOLLYWOOD BLVD.

City	State	Zip Code
HOLLYWOOD	CA	90028

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

20.00
-------

Transaction ID : SB17.26603

**B. MY FAX SERVICE**

Mailing Address 6922 HOLLYWOOD BLVD.

City	State	Zip Code
HOLLYWOOD	CA	90028

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		10		2014

Amount of Each Disbursement this Period

20.00
-------

Transaction ID : SB17.26690

**C. MY FAX SERVICE**

Mailing Address 6922 HOLLYWOOD BLVD.

City	State	Zip Code
HOLLYWOOD	CA	90028

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2014

Amount of Each Disbursement this Period

20.00
-------

Transaction ID : SB17.26786

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

60.00
-------



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 113 OF 125

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. PNC BANK**

Mailing Address PO BOX 609

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

Amount of Each Disbursement this Period

25.50
-------

Transaction ID : SB17.26551

**B. PNC BANK**

Mailing Address PO BOX 609

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

40.50
-------

Transaction ID : SB17.26692

**C. PNC BANK**

Mailing Address PO BOX 609

City	State	Zip Code
PITTSBURGH	PA	15230

Purpose of Disbursement  
BANK FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

Amount of Each Disbursement this Period

30.50
-------

Transaction ID : SB17.26754

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

96.50

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. POLITICAL MEDIA**

Mailing Address 406 1ST STREET SE # 3

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
WEB HOSTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2014

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : SB17.26668

**B. POLITICAL MEDIA**

Mailing Address 406 1ST STREET SE # 3

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
WEB HOSTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		09		2014

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : SB17.26713

**C. POLITICAL MEDIA**

Mailing Address 406 1ST STREET SE # 3

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
WEB HOSTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2014

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : SB17.26868

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

225.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. THOMAS RAVIS**

Mailing Address 1003 PERRY HWY

City	State	Zip Code
PITTSBURGH	PA	15237

Purpose of Disbursement  
RENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

1200.00
---------

Transaction ID : SB17.26716

**B. THOMAS RAVIS**

Mailing Address 1003 PERRY HWY

City	State	Zip Code
PITTSBURGH	PA	15237

Purpose of Disbursement  
RENT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2014

Amount of Each Disbursement this Period

1200.00
---------

Transaction ID : SB17.26793

**C. REPUBLICAN COMMITTEE OF BEAVER CO.**

Mailing Address 913 PENNSYLVANIA AVENUE

City	State	Zip Code
MONACA	PA	15061

Purpose of Disbursement  
EVENT TICKET

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2014

Amount of Each Disbursement this Period

225.00
--------

Transaction ID : SB17.26795

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2625.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ARMSTRONG ROBINSON**

Mailing Address 2502 S ARLINGTON MILL DR UNIT B

City	State	Zip Code
ARLINGTON	VA	22206

Purpose of Disbursement  
STRATEGY CONSULTING

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2014

Amount of Each Disbursement this Period

6000.00
---------

Transaction ID : SB17.26671

**B. STRIPE**

Mailing Address 3180 18TH STREET

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement  
TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		29		2014

Amount of Each Disbursement this Period

145.85
--------

Transaction ID : SB17.27015

**C. STRIPE**

Mailing Address 3180 18TH STREET

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement  
TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

241.85
--------

Transaction ID : SB17.27002

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6387.70

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. STRIPE**

Mailing Address 3180 18TH STREET

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement  
TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

68.55
-------

Transaction ID : SB17.27022

**B. STRIPE**

Mailing Address 3180 18TH STREET

City	State	Zip Code
SAN FRANCISCO	CA	94110

Purpose of Disbursement  
TRANSACTION FEES

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

369.80
--------

Transaction ID : SB17.27107

**C. THE CONGRESSIONAL INSTITUTE**

Mailing Address 1700 DIAGONAL ROAD

City	State	Zip Code
ALEXANDRIA	VA	22314

Purpose of Disbursement  
RETREAT TRAVEL

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		06		2014

Amount of Each Disbursement this Period

890.00
--------

Transaction ID : SB17.26736

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1328.35

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. US AIRWAYS**

Mailing Address 4000 E SKY HARBOR BLVD.

City	State	Zip Code
PHOENIX	AZ	85034

Purpose of Disbursement  
TRAVEL EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		13		2014

Amount of Each Disbursement this Period

300.00
--------

Transaction ID : SB17.26861

**B. US AIRWAYS**

Mailing Address 4000 E SKY HARBOR BLVD.

City	State	Zip Code
PHOENIX	AZ	85034

Purpose of Disbursement  
TRAVEL EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		13		2014

Amount of Each Disbursement this Period

299.00
--------

Transaction ID : SB17.26862

**C. US AIRWAYS**

Mailing Address 4000 E SKY HARBOR BLVD.

City	State	Zip Code
PHOENIX	AZ	85034

Purpose of Disbursement  
TRAVEL EXPENSE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2014

Amount of Each Disbursement this Period

388.00
--------

Transaction ID : SB17.26893

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

987.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. US POSTMASTER**

Mailing Address 521 THORN STREET

City	State	Zip Code
SEWICKLEY	PA	15143

Purpose of Disbursement  
BRM PERMIT

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

200.00
--------

Transaction ID : SB17.26789

**B. VERIZON**

Mailing Address PO BOX 4002

City	State	Zip Code
ACWORTH	GA	30101

Purpose of Disbursement  
TELEPHONE

001

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2014

Amount of Each Disbursement this Period

151.98
--------

Transaction ID : SB17.26867

**C. WESTMORELAND COUNTY REPUBLICAN COMMITTEE**

Mailing Address 23 N. MAPLE AVE

City	State	Zip Code
GREENSBURG	PA	15601

Purpose of Disbursement  
EVENT TICKETS

001

Candidate Name

**WESTMORELAND COUNTY REPUBLICAN COMMITTEE**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2014

Amount of Each Disbursement this Period

100.00
--------

Transaction ID : SB17.26670

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

451.98

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. KEITH ROTHFUS**

Mailing Address PO BOX 435

City	State	Zip Code
SEWICKLEY	PA	15143

Purpose of Disbursement  
MILEAGE, MEETING EXPENSES, TRAVEL

001

Category/  
Type

Candidate Name

**KEITH ROTHFUS**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: PA District: 12

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2014

Amount of Each Disbursement this Period

5729.22

Transaction ID : SB17.27157

**B.**

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

**C.**

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional).....

5729.22

**TOTAL** This Period (last page this line number only).....

88271.18



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 121 OF 125

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. FRANK KOZEL**

Mailing Address 560 EPSILON DRIVE

City	State	Zip Code
PITTSBURGH	PA	15238

Purpose of Disbursement  
CONTRIBUTION REFUND

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

2600.00
---------

Transaction ID : SB20A.27129

010

Category/  
Type**B.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

--

Category/  
Type**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

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Category/  
Type**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2600.00

2600.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 122 OF 125

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ELISE FOR CONGRESS**

Mailing Address PO BOX 338

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		28		2014

City	State	Zip Code
WILLSBORO	NY	12996

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Transaction ID : SB21.26986

Candidate Name

**ELISE STEFANIK**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: NY District: 21

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF DAVID JOLLY**

Mailing Address P. O. BOX 1158

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		28		2014

City	State	Zip Code
INDIAN ROCKS BEACH	FL	33785

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Transaction ID : SB21.26678

Candidate Name

**DAVID JOLLY**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: FL District: 13

Full Name (Last, First, Middle Initial)

**C. MCSALLY FOR CONGRESS**

Mailing Address PO BOX 19128

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		28		2014

City	State	Zip Code
TUCSON	AZ	85731

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Transaction ID : SB21.26985

Candidate Name

**MARTHA MCSALLY**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: AZ District: 02

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1500.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 123 OF 125

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**A. RYAN COSTELLO FOR CONGRESS**

Mailing Address PO BOX 3154

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		28		2014

City	State	Zip Code
WEST CHESTER	PA	19381

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Transaction ID : SB21.26988

Candidate Name

**RYAN COSTELLO**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: PA District: 06

Full Name (Last, First, Middle Initial)

**B. TERRI LYNN LAND FOR SENATE**

Mailing Address PO BOX 308

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		28		2014

City	State	Zip Code
GRANDVILLE	MI	49418

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Transaction ID : SB21.26987

Candidate Name

**TERRI LAND**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: MI District: 00

Full Name (Last, First, Middle Initial)

**C. VOGEL FOR SENATE COMMITTEE**

Mailing Address 488 ADAMS STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2014

City	State	Zip Code
ROCHESTER	PA	15074

Amount of Each Disbursement this Period

300.00
--------

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Transaction ID : SB21.26730

Candidate Name

**VOGEL FOR SENATE COMMITTEE**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

800.00

2300.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 124 OF 125

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**KEITH ROTHFUS**

Nature of Debt (Purpose):

MILEAGE, MEETING EXPENSES, TRAVEL

Mailing Address PO BOX 435

City State

Zip Code

SEWICKLEY

PA

15143

Outstanding Balance Beginning This Period

5729.22

Transaction ID : SD10.21

Amount Incurred This Period

0.00

Payment This Period

5729.22

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**KEITH ROTHFUS**

Nature of Debt (Purpose):

TRAVEL, MEALS, OFFICE SUPPLIES

Mailing Address PO BOX 435

City State

Zip Code

SEWICKLEY

PA

15143

Outstanding Balance Beginning This Period

2376.14

Transaction ID : SD10.23

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2376.14

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**KEITH ROTHFUS**

Nature of Debt (Purpose):

Q3 2013 TRAVEL, MEETING EXPENSES,  
POSTAGE

Mailing Address PO BOX 435

City

State

Zip Code

SEWICKLEY

PA

15143

Outstanding Balance Beginning This Period

2075.49

Transaction ID : SD10.24

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2075.49

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

4451.63

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

0.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 125 OF 125

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**ROTHFUS FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**KEITH ROTHFUS**

Nature of Debt (Purpose):

MEETING EXPENSE, TRAVEL, POSTAGE

Mailing Address PO BOX 435

City State

Zip Code

SEWICKLEY

PA

15143

Outstanding Balance Beginning This Period

2436.98

Transaction ID : SD10.25

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2436.98

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**KEITH ROTHFUS**

Nature of Debt (Purpose):

MEETING EXPENSES, TRAVEL, POSTAGE

Mailing Address PO BOX 435

City State

Zip Code

SEWICKLEY

PA

15143

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.27

Amount Incurred This Period

5265.99

Payment This Period

0.00

Outstanding Balance at Close of This Period

5265.99

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

7702.97

2) **TOTALS** This Period (last page this line number only) ..... ▶

12154.60

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

12154.60