

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 REPORT NEW (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 / / in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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

/ /

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								
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
ROTHFUS FOR CONGRESS

Report Covering the Period: From: / / To: / /

	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))....	258178.10	826817.59
(b) Total Contribution Refunds (from Line 20(d))	0.00	5800.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	258178.10	821017.59
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	64067.16	299283.46
(b) Total Offsets to Operating Expenditures (from Line 14).....	1296.07	2374.07
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	62771.09	296909.39
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1059679.26	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	2131.58	

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)

Write or Type Committee Name

ROTHFUS FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2015 To: M M / D D / Y Y Y Y 12 / 31 / 2015

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).....	174919.38	600768.61
(ii) Unitemized	7108.72	18348.98
(iii) TOTAL of contributions from individuals	182028.10	619117.59
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	76150.00	207700.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	258178.10	826817.59
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	15706.39	15706.39
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.)	1296.07	2374.07
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).....	275180.56	844898.05

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	64067.16	299283.46
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	2800.00
(b) Political Party Committees.....	0.00	3000.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	5800.00
21. OTHER DISBURSEMENTS	9800.00	34050.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	73867.16	339133.46

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	858365.86
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	275180.56
25. SUBTOTAL (add Line 23 and Line 24).....	1133546.42
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	73867.16
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1059679.26

**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 5 OF 126
	<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	

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

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM E. ADAMS

Mailing Address P.O. BOX 1

City State Zip Code
PORTERSVILLE PA 16051

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

Name of Employer Occupation
ADAMS MANUFACTURING MANUFACTURER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SA11AI.30852

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES R. AGRAS

Mailing Address 73 LEBANON HILLS DRIVE

City State Zip Code
PITTSBURGH PA 15228

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

Name of Employer Occupation
TRIANGLE TECH GROUP CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 19 / 2015

Transaction ID : SA11AI.30879

Amount of Each Receipt this Period
1800.00

C. Full Name (Last, First, Middle Initial)
MRS. MERYL AINSMAN

Mailing Address 1080 SHADY AVE.

City State Zip Code
PITTSBURGH PA 15232

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

Name of Employer Occupation
CHOSKY FOUNDATION EXECUTIVE DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11AI.31057

Amount of Each Receipt this Period
500.00

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

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

3800.00

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

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

FOR LINE NUMBER: PAGE 6 OF 126
(check only one)
 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)
MR. CHRISTIAN ALLISON

Mailing Address 148 IRWIN AVENUE

City State Zip Code
PITTSBURGH PA 15202

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

Name of Employer Occupation
ALLEGHENY COLLEGE COLLEGE PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 10 2015

Transaction ID : SA11AI.30832

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. CHRISTIAN ALLISON

Mailing Address 148 IRWIN AVENUE

City State Zip Code
PITTSBURGH PA 15202

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

Name of Employer Occupation
ALLEGHENY COLLEGE COLLEGE PROFESSOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 10 2015

Transaction ID : SA11AI.30833

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
DR. RASHID A AWAN

Mailing Address 947 ST. CLAIR RD.

City State Zip Code
JOHNSTOWN PA 15905

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

Name of Employer Occupation
UPMC CANCER CENTER PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 19 2015

Transaction ID : SA11AI.30873

Amount of Each Receipt this Period
500.00

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: (check only one)	PAGE 7 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MR. JOHN BAHORIK

Mailing Address 918 ALLIE BUCK RD.

City NANTY GLO State PA Zip Code 15943

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

Name of Employer PENN METAL FABRICATORS Occupation VP OPERATIONS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.30853

Amount of Each Receipt this Period
 2700.00

B. Full Name (Last, First, Middle Initial)
MR. THOMAS BAILEY

Mailing Address 2716 TISCHLER RD

City BETHEL PARK State PA Zip Code 15102

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.31082

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
MR. JAMES P. BALET

Mailing Address 525 PINE RD

City SEWICKLEY State PA Zip Code 15143

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

Name of Employer PITTSBURGH UNIVERSAL Occupation MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 4700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.31059

Amount of Each Receipt this Period
 1000.00

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

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

4200.00

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

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

FOR LINE NUMBER: PAGE 8 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. BARRY D. BALLIET

Mailing Address 213 ST. CHARLES PLACE

City State Zip Code
PITTSBURGH PA 15215

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

Name of Employer Occupation
PROVIDENT AGENCY, INC. SALES & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11AI.30998

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. VINCENT J. BARBERA

Mailing Address PO BOX 775

City State Zip Code
SOMERSET PA 15501

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

Name of Employer Occupation
BARBERA, CLAPPER, BEENER, RULLO & ME ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 19 / 2015

Transaction ID : SA11AI.30870

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. PATRICK J BEARJAR

Mailing Address 708 RUSSELL AVE.

City State Zip Code
JOHNSTOWN PA 15902

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

Name of Employer Occupation
WESSEL & COMPANY CPA

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 10 / 2015

Transaction ID : SA11AI.30844

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 9 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. SCOTT A. BECKER

Mailing Address 129 LAUREL WAY

City JOHNSTOWN State PA Zip Code 15905

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

Name of Employer LIFEPOINT HEALTH Occupation CONEMAUGH HEALTH SYSTEM CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : SA11AI.31017

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
MR. HARRY BENNEAR

Mailing Address 652 COON RIDGE RD.

City JOHNSTOWN State PA Zip Code 15905

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

Name of Employer DALE OXYGEN, INC. Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : SA11AI.30874

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
MR. HOWARD (CHIP) S. BERGER

Mailing Address 1121 SHADY AVENUE

City PITTSBURGH State PA Zip Code 15232

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

Name of Employer NAL Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : SA11AI.30884

Amount of Each Receipt this Period
 2700.00

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

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

4200.00

**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 10 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. HOWARD (CHIP) S. BERGER

Mailing Address 1121 SHADY AVENUE

City State Zip Code
PITTSBURGH PA 15232

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

Name of Employer Occupation
NAL EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : SA11AI.30885

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. ALLISON B. BERGER-GARCIA

Mailing Address 172 WOODSHIRE RD.

City State Zip Code
PITTSBURGH PA 15215

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

Name of Employer Occupation
HOMECOURT EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 21 / 2015

Transaction ID : SA11AI.31148

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. CHARLES BLACKBURN

Mailing Address 1100 CONSTITUTION DRIVE

City State Zip Code
TARENTUM PA 15084

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

Name of Employer Occupation
BLACKBURN'S PHARMACY PHARMACIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 20 / 2015

Transaction ID : SA11AI.30977

Amount of Each Receipt this Period
2700.00

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

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

3300.00

**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 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. WALTER J. BLENKO JR.

Mailing Address 4073 MIDDLE ROAD

City State Zip Code
ALLISON PARK PA 15101

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.30954

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MS. JENNIFER BOCZAR

Mailing Address 701 ROSEWOOD DRIVE

City State Zip Code
PITTSBURGH PA 15239

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : SA11AI.30868

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. CARL BONGIOVANNI

Mailing Address 3174 BEECHWOOD DR

City State Zip Code
ALLISON PARK PA 15101

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

Name of Employer Occupation
BON TOOL OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.31058

Amount of Each Receipt this Period
1000.00

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: (check only one)	PAGE 12 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MRS. MARY P BORKOW

Mailing Address 1618 SUNSHINE AVE

City JOHNSTOWN State PA Zip Code 15905

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.30846

Amount of Each Receipt this Period
450.00

B. Full Name (Last, First, Middle Initial)
MS. CONSTANCE BOSCHETTO

Mailing Address 213 HAZEL LANE

City SEWICKLEY State PA Zip Code 15143

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

Name of Employer NONE Occupation HOUSEWIFE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2015

Transaction ID : SA11AI.30817

Amount of Each Receipt this Period
50.16

C. Full Name (Last, First, Middle Initial)
MS. CONSTANCE BOSCHETTO

Mailing Address 213 HAZEL LANE

City SEWICKLEY State PA Zip Code 15143

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

Name of Employer NONE Occupation HOUSEWIFE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.96

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 29 / 2015

Transaction ID : SA11AI.30960

Amount of Each Receipt this Period
50.16

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

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

550.32

**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 13 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MS. CONSTANCE BOSCHETTO

Mailing Address 213 HAZEL LANE

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
351.12

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 29 2015

Transaction ID : SA11A1.31138

Amount of Each Receipt this Period
50.16

B. Full Name (Last, First, Middle Initial)
MR. RICHARD C. BOSSERMAN

Mailing Address 899 VIEWMONT AVENUE

City State Zip Code
JOHNSTOWN PA 15905

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

Name of Employer Occupation
CCABH PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 10 2015

Transaction ID : SA11A1.30979

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT P. BOZZONE

Mailing Address 311 HILLCREST DRIVE

City State Zip Code
LOWER BURRELL PA 15068

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 23 2015

Transaction ID : SA11A1.30764

Amount of Each Receipt this Period
2700.00

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

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

3000.16

**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 14 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MR RONALD J. BUCCI

Mailing Address **PO BOX 512**

City **LAUGHLINTOWN** State **PA** Zip Code **15655**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 02 / 2015

Transaction ID : SA11AI.30899

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH CALIHAN

Mailing Address **128 SOUTH DRIVE**

City **PITTSBURGH** State **PA** Zip Code **15238**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 23 / 2015

Transaction ID : SA11AI.30765

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MS. LORI A. CESTRA

Mailing Address **310 PINE VALLEY DRIVE**

City **BRIDGEVILLE** State **PA** Zip Code **15017**

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

Name of Employer **ENTERPRISE BANK** Occupation **COO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
476.41

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 06 / 2015

Transaction ID : SA11AI.31246

Amount of Each Receipt this Period
476.41

IN-KIND:EVENT TICKETS

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

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

2976.41

**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 15 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MS. LORI A. CESTRA

Mailing Address 310 PINE VALLEY DRIVE

City State Zip Code
BRIDGEVILLE PA 15017

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

Name of Employer Occupation
ENTERPRISE BANK COO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11A1.31076

Amount of Each Receipt this Period
23.59

B. Full Name (Last, First, Middle Initial)
MR. EDWIN V. CLARKE JR.

Mailing Address 629 ACADEMY AVENUE

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 02 / 2015

Transaction ID : SA11A1.30955

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. JAMES W COOPER

Mailing Address 122 LUNDQUIST RD.

City State Zip Code
LIGONIER PA 15658

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

Name of Employer Occupation
UNIONVALE COAL-RANGER INVESTMENTS SALES

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11A1.31038

Amount of Each Receipt this Period
500.00

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

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

1523.59

**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 16 OF 126
	<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) MR. JOHN COUCH		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 21 / 2015
Mailing Address 865 MENLO OAKS DR		Transaction ID : SA11AI.31145
City MENLO PARK	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) COZZA ENTERPRISES, LLC		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address PO BOX 453		Transaction ID : SA11AI.31079
City CARNEGIE	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) MR. CRAIG COZZA		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015
Mailing Address 215 BOYDS RUN RD		Transaction ID : SA11AI.31259
City PRESTO	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF EMPLOYED	Occupation BD MEMBER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	[MEMO ITEM] PARTNERSHIP COZZA ENTERPRISES, LLC

SUBTOTAL of Receipts This Page (optional).....	750.00
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 17 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL CROFTON

Mailing Address 1760 MARKET STREET

City State Zip Code
PHILADELPHIA PA 19103

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

Name of Employer Occupation
PHILADELPHIA TRUST PRESIDENT & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.31035

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
MRS. KATHRYN CULLO

Mailing Address 315 MEADOW LANE

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.31073

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. DAREN D'IPPOLITO

Mailing Address 10605 CREST ROAD

City State Zip Code
WEXFORD PA 15090

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

Name of Employer Occupation
PROVIDENT AGENCY, INC. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : SA11AI.30996

Amount of Each Receipt this Period
500.00

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

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

4000.00

**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 18 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MRS. SHARON S. DANDREA

Mailing Address 3149 SCENIC COURT

City State Zip Code
ALLISON PARK PA 15101

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 31 2015

Transaction ID : SA11A1.31090

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA L. DAVISON

Mailing Address 452 DORSEYVILLE RD.

City State Zip Code
PITTSBURGH PA 15215

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

Name of Employer Occupation
FAMILY TIME PROPERTIES PROPERTY MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 31 2015

Transaction ID : SA11A1.31089

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. TIMOTHY DEBIASSE

Mailing Address 5007 CLYDESDALE CIR

City State Zip Code
MURRYSVILLE PA 15668

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

Name of Employer Occupation
SELF EMPLOYED ENTREPRENEUR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 31 2015

Transaction ID : SA11A1.31085

Amount of Each Receipt this Period
500.00

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

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

5900.00

**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 19 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. VINCENT DELIE

Mailing Address 606 EAST DRIVE

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
FNB PA EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 30 / 2015

Transaction ID : SA11AI.30788

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. JOHN H. DEMMLER

Mailing Address 2 WINDING WAY

City State Zip Code
VERONA PA 15147

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
570.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 02 / 2015

Transaction ID : SA11AI.30916

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
MRS. PATRICIA B DETWILER

Mailing Address 186 ARANDALE ST

City State Zip Code
BEDFORD PA 15522

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

Name of Employer Occupation
NEW ENTERPRISE STONE & LIME COB

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 10 / 2015

Transaction ID : SA11AI.30851

Amount of Each Receipt this Period
1000.00

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

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

1540.00

**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 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. RONALD A. DONATELLI

Mailing Address 5112 BRONWYN CT

City State Zip Code
GIBSONIA PA 15044

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

Name of Employer Occupation
FIRST NATIONAL BANK PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA11AI.30786

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES R. DOUGLASS

Mailing Address 315 OLD MILL ROAD

City State Zip Code
PITTSBURGH PA 15238

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA11AI.30791

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MRS. MARGARET DOUGLASS

Mailing Address 315 OLD MILL ROAD

City State Zip Code
PITTSBURGH PA 15238

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA11AI.30792

Amount of Each Receipt this Period
300.00

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

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

3250.00

**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 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DR. ALFRED P. DOYLE

Mailing Address 444 WOODLAND ROAD

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.30935

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MS. LAURA ELLSWORTH

Mailing Address 500 GRANT STREET, 45TH FL.

City State Zip Code
PITTSBURGH PA 15219

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

Name of Employer Occupation
JONES DAY ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 22 / 2015

Transaction ID : SA11AI.31152

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT J. EYER

Mailing Address 215 MAIN ST.

City State Zip Code
JOHNSTOWN PA 15901

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

Name of Employer Occupation
WESSEL AND COMPANY EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.30841

Amount of Each Receipt this Period
250.00

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 22 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MR. JOHN F. FARNAN JR.

Mailing Address P.O. BOX 11168

City State Zip Code
PITTSBURGH PA 15237

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11AI.30761

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID J FEDERLINE

Mailing Address 4709 LOGAN FERRY ROAD

City State Zip Code
MURRYSVILLE PA 15668

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

Name of Employer Occupation
ECKERT SEAMANS CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.30949

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. CHARLES I. FERRARA

Mailing Address 7 HUNT CLUB LANE

City State Zip Code
PITTSBURGH PA 15215

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

Name of Employer Occupation
NORTHWESTERN MUTUAL LIFE MANAGING DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : SA11AI.30989

Amount of Each Receipt this Period
2700.00

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

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

3450.00

**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 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. SEAN M. FIELER

Mailing Address 40 HASLET AVE.

City State Zip Code
PRINCETON NJ 08540

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

Name of Employer Occupation
EQUINOX PARTNERS, LP FINANCIAL MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA11AI.30790

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. JOHN FOLLANSBEE

Mailing Address 3752 MENOHER BLVD.

City State Zip Code
JOHNSTOWN PA 15905

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.30848

Amount of Each Receipt this Period
450.00

C. Full Name (Last, First, Middle Initial)
MR. RAYMOND R FORD

Mailing Address 3999 PERE MARQUETTE DR

City State Zip Code
ALLISON PARK PA 15101

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.31078

Amount of Each Receipt this Period
250.00

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

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

3400.00

**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 24 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MR. ROBERT FRAGASSO

Mailing Address 611 KEITH RD

City State Zip Code
BETHEL PARK PA 15102

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

Name of Employer Occupation
FRAGASSO FINANCIAL ADVISORS CHAIRMAN & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11AI.30997

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. FRANK B. FUHRER III

Mailing Address 512 FOXHURST ROAD

City State Zip Code
PITTSBURGH PA 15238

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

Name of Employer Occupation
FUHRER WHOLESALE INC. CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 02 / 2015

Transaction ID : SA11AI.30953

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. LOUIS G GALLIKER

Mailing Address 922 LUZERNE STREET

City State Zip Code
JOHNSTOWN PA 15905

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

Name of Employer Occupation
GALLIKER DAIRY COMPANY EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 02 / 2015

Transaction ID : SA11AI.30958

Amount of Each Receipt this Period
2700.00

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

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

3700.00

**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 25 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. PATRICIA GALLIKER

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 SECRETARY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.30957

Amount of Each Receipt this Period
 2700.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM GILLESPIE

Mailing Address 49 MEADE AVENUE

City PITTSBURGH State PA Zip Code 15202

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

Name of Employer PITTSBURGH VALVE & FITTING CO. Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.31161

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT W. GLENN

Mailing Address 4004 SCOTTISH RITE CT.

City SEWICKLEY State PA Zip Code 15143

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.30951

Amount of Each Receipt this Period
 500.00

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

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

5900.00

**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 26 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MRS. ELAINE GORSKI

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.30850

Amount of Each Receipt this Period
 900.00

B. Full Name (Last, First, Middle Initial)
MR. MYLES HARRINGTON

Mailing Address 250 MCKINNEY ROAD

City WEXFORD State PA Zip Code 15090

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

Name of Employer GRANT STREET GROUP Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.31026

Amount of Each Receipt this Period
 1700.00

C. Full Name (Last, First, Middle Initial)
MR. ALAN J. HAYES

Mailing Address 1611 BLACKBURN HEIGHTS RD.

City SEWICKLEY State PA Zip Code 15143

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

Name of Employer ENTERPRISE BANK Occupation ADVISOR TO BOARD

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.31077

Amount of Each Receipt this Period
 250.00

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

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

2850.00

**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 27 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MR. C. TALBOTT HITESHEW JR. JR.

Mailing Address 1 OVERLOOK DRIVE

City State Zip Code
PITTSBURGH PA 15238

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

Name of Employer Occupation
HUNTER ASSOCIATES INC. STOCKBROKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.30950

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID A. HOLDER JR.

Mailing Address 12186 CARMICHAEL CIRCLE

City State Zip Code
NORTH HUNTINGDON PA 15642

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

Name of Employer Occupation
FES SALES

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.30940

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. DAVID A. HOLDER JR.

Mailing Address 12186 CARMICHAEL CIRCLE

City State Zip Code
NORTH HUNTINGDON PA 15642

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

Name of Employer Occupation
FES SALES

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.31182

Amount of Each Receipt this Period
75.00

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

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

425.00

**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 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL HOPPER

Mailing Address 208 RIVERCREST DRIVE

City CORAOPOLIS State PA Zip Code 15108

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11AI.31175

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
MRS. DONA D 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.30894

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT C. HOWARD

Mailing Address 229 SEASONS DRIVE

City WEXFORD State PA Zip Code 15090

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.30934

Amount of Each Receipt this Period
 200.00

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

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

950.00

**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 29 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MR. TERRENCE S. JACOBS

Mailing Address 6608 ROUTE 22

City State Zip Code
DELMONT PA 15626

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

Name of Employer Occupation
PENNECO OIL COMPANY PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.30956

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. A. RICHARD KACIN

Mailing Address 3875 OLD WILLIAM PENN HWY.

City State Zip Code
MURRYSVILLE PA 15668

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

Name of Employer Occupation
A. RICHARD KACIN OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA11AI.30820

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. A. RICHARD KACIN

Mailing Address 3875 OLD WILLIAM PENN HWY.

City State Zip Code
MURRYSVILLE PA 15668

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

Name of Employer Occupation
A. RICHARD KACIN OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.30830

Amount of Each Receipt this Period
1000.00

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

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

3800.00

**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 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 11e 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. LEO KAYSER III

Mailing Address 515 MADISON AVENUE

City State Zip Code
NEW YORK NY 10022

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

Name of Employer Occupation
KAYSER & REDFERN LLP ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11AI.31032

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR. KARL KIMMICH

Mailing Address 5636 NORTH MONTOUR ROAD

City State Zip Code
GIBSONIA PA 15044

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

Name of Employer Occupation
TRINITY ENERGY CORP. OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : SA11AI.30872

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM E. KINOL

Mailing Address 203 DOWNING ROAD

City State Zip Code
CORAOPOLIS PA 15108

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.31084

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: (check only one)	PAGE 31 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MR. ROBERT KIRST

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/SFC Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 19 / 2015

Transaction ID : SA11AI.31143

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. ROBERT Y. KOPF, JR.

Mailing Address 204 EDGEWORTH LANE

City SEWICKLEY State PA Zip Code 15143

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

Name of Employer SMITHFIELD TRUST Occupation BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : SA11AI.30994

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. FRANK W. KOZEL

Mailing Address 560 EPSILON DRIVE

City PITTSBURGH State PA Zip Code 15238

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11AI.30773

Amount of Each Receipt this Period
1000.00

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

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

4700.00

**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 32 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MR. JUDSON L. KROH

Mailing Address 80 WATERFRONT DR.

City State Zip Code
PITTSBURGH PA 15222

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

Name of Employer Occupation
ROBINDALE ENERGY CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.30831

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MS. JACQUELINE KULBACK

Mailing Address 248 STARDUST DRIVE

City State Zip Code
JOHNSTOWN PA 15904

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

Name of Employer Occupation
GAUTIER STEEL EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : SA11AI.30867

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM LAMBERT

Mailing Address 410 CHESTNUT GROVE

City State Zip Code
CRANBERRY TOWNSHIP PA 16066

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

Name of Employer Occupation
MINE SAFETY APPLIANCES EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 01 / 2015

Transaction ID : SA11AI.30807

Amount of Each Receipt this Period
2700.00

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

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

3950.00

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

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

FOR LINE NUMBER: PAGE 33 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. TIMOTHY LEVENTRY

Mailing Address 215 TALL TIMBER DRIVE

City JOHNSTOWN State PA Zip Code 15904

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

Name of Employer LEVENTRY, HASCHEK & RODDEY, LLC Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.30845

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
MR. CHARLES 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 BANK Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 06 / 2015

Transaction ID : SA11AI.31242

Amount of Each Receipt this Period
 876.41

IN-KIND: EVENT CATERING

C. Full Name (Last, First, Middle Initial)
MR. CHARLES 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 BANK Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 06 / 2015

Transaction ID : SA11AI.31244

Amount of Each Receipt this Period
 1773.59

IN-KIND:EVENT TICKETS

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

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

2900.00

**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 34 OF 126
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. DOUGLAS W. LOCKARD

Mailing Address 4091 MT. ROYAL BLVD.

City State Zip Code
ALLISON PARK PA 15001

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

Name of Employer Occupation
ENTERPRISE BANK VICE CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 31 2015

Transaction ID : SA11AI.31088

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
MR. LARRY G. LOCKARD

Mailing Address 115 WEST OAK COURT

City State Zip Code
INDIANA PA 15701

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 31 2015

Transaction ID : SA11AI.31086

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. KARL LOHWATER

Mailing Address 5331 HILLSIDE WAY

City State Zip Code
WILLIAMSBURG VA 23185

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

Name of Employer Occupation
CAPITAL GUARDIAN LLC EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 11 2015

Transaction ID : SA11AI.30815

Amount of Each Receipt this Period
1350.00

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

FOR LINE NUMBER: PAGE 35 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. KEITH E. LOISELLE

Mailing Address 180 WEDGEWOOD DRIVE

City State Zip Code
GIBSONIA PA 15044

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

Name of Employer Occupation
CDL NUCLEAR TECHNOLOGIES INC OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 18 / 2015

Transaction ID : SA11AI.31142

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES G. LONCELLA

Mailing Address 217 LION STREET

City State Zip Code
JOHNSTOWN PA 15904

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

Name of Employer Occupation
JWF INDUSTRIES MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.30838

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT A. MACKAY

Mailing Address PO BOX 279

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
SELF ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
575.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.30933

Amount of Each Receipt this Period
100.00

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

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

3050.00

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

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

FOR LINE NUMBER: PAGE 36 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. RICK MACKLIN

Mailing Address 305 GEORGETOWN CT

City State Zip Code
WEXFORD PA 15090

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

Name of Employer Occupation
BEEMAC TRUCKING TRANSPORTATION

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.30936

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
DR. MARIAN MARQUIS

Mailing Address 235 RIDGEVIEW DRIVE

City State Zip Code
WEXFORD PA 15090

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

Name of Employer Occupation
UPMC PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2015

Transaction ID : SA11AI.31162

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. STEPHEN MCANENY

Mailing Address 801 DREXEL AVENUE

City State Zip Code
JOHNSTOWN PA 15905

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

Name of Employer Occupation
MCANENY BROTHERS., INC. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.30849

Amount of Each Receipt this Period
500.00

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 37 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ROBERT M. MCGOWAN JR.

Mailing Address 245 TALL TIMBER DRIVE

City JOHNSTOWN State PA Zip Code 15904

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

Name of Employer MISSION CRITICAL SOLUTIONS, LLC Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : SA11AI.30999

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
MR. DOUGLAS R. MCILWAIN

Mailing Address 1551 FERNDALE AVENUE

City JOHNSTOWN State PA Zip Code 15905

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

Name of Employer MCILWAIN CHARTER, INC. Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA11AI.30789

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
CHELSEI L MCILWAIN

Mailing Address 131 FAYETTE ST

City JOHNSTOWN State PA Zip Code 15905

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : SA11AI.30871

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)	PAGE 38 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MR. CHRIS S. MCMAHON

Mailing Address 125 JAMES PLACE

City State Zip Code
PITTSBURGH PA 15228

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

Name of Employer Occupation
MCMAHON FINANCIAL LLC PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11AI.31042

Amount of Each Receipt this Period
2000.00

REATTRIBUTION REQUESTED

B. Full Name (Last, First, Middle Initial)
MRS. MARY E. MCMAHON

Mailing Address 125 JAMES PLACE

City State Zip Code
PITTSBURGH PA 15228

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 06 / 2015

Transaction ID : SA11AI.30813

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. RICK B. MCQUAIDE

Mailing Address 492 OLD FARM LANE

City State Zip Code
JOHNSTOWN PA 15904

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

Name of Employer Occupation
WC MCQUAIDE INC. VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 19 / 2015

Transaction ID : SA11AI.30878

Amount of Each Receipt this Period
500.00

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

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

5200.00

**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 126
(check only one)
 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)
MR. REX W. MCQUAIDE

Mailing Address 334 BLOOMFIELD STREET

City State Zip Code
JOHNSTOWN PA 15904

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

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA11AI.30972

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM F MCQUAIDE

Mailing Address 153 MACRIDGE AVENUE

City State Zip Code
JOHNSTOWN PA 15904

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

Name of Employer Occupation
WC MCQUAIDE INC. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : SA11AI.30877

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MRS. JOANNE F. MCVAY

Mailing Address 106 SKYLARK DRIVE

City State Zip Code
GLENSHAW PA 15116

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11AI.30948

Amount of Each Receipt this Period
200.00

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

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

3400.00

**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 40 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MR. PETER V. MERRITTS

Mailing Address 128 ODINWOOD COURT

City Greensburg State PA Zip Code 15601

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

Name of Employer CORSA COAL CORP Occupation COMPANY PRESIDENT - NAPP DIVISION

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : SA11AI.30875

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
MR. ROBERT MILLER

Mailing Address 2271 COUNTRY CLUB DRIVE

City Pittsburgh State PA Zip Code 15241

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA11AI.30973

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT MILLER

Mailing Address 2271 COUNTRY CLUB DRIVE

City Pittsburgh State PA Zip Code 15241

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.31183

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 41 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. KEVIN MILLER

Mailing Address 214 SCHENLEY ROAD

City State Zip Code
PITTSBURGH PA 15217

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

Name of Employer Occupation
NORTHWESTERN MUTUAL MANAGING PARTNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11AI.31040

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR. ROBERT MOOREHEAD

Mailing Address 3323 SCATHELOCKE RD

City State Zip Code
PITTSBURGH PA 15235

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA11AI.30785

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DR. NGHI VAN NGUYEN

Mailing Address 338 CUSTER LN.

City State Zip Code
TARENTUM PA 15084

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

Name of Employer Occupation
SELF EMPLOYED ANESTHESIOLOGIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 07 / 2015

Transaction ID : SA11AI.30814

Amount of Each Receipt this Period
1000.00

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 42 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. DAVID NIMICK

Mailing Address 712 IRWIN DRIVE

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11A1.30893

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MR. THOMAS M. NUNNALLY

Mailing Address 310 NEWPORT ROAD

City State Zip Code
PITTSBURGH PA 15221

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11A1.31080

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DR. CHRISTOPHER OLIVIA

Mailing Address 271 MOORE LANE

City State Zip Code
HADDONFIELD NJ 08033

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

Name of Employer Occupation
CTD, LLC. EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA11A1.31053

Amount of Each Receipt this Period
1000.00

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

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

1700.00

**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 43 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MR. MARK PASQUERILLA

Mailing Address 945 MENOHER BLVD.

City JOHNSTOWN State PA Zip Code 15905

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

Name of Employer CROWNAMERICAN Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1578.90

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 09 / 2015

Transaction ID : SA11AI.31252

Amount of Each Receipt this Period
 1578.90

IN-KIND:EVENT CATERING

B. Full Name (Last, First, Middle Initial)
MR. GREGORY A. PEARSON

Mailing Address BUCHANAN INGERSOLL
301 GRANT STREET, FLOOR 20

City PITTSBURGH State PA Zip Code 15219

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

Name of Employer BUCHANAN INGERSOLL Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.31081

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
MR. CHRISTOPHER PHELAN

Mailing Address 1630 STONE MANSION 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.31197

Amount of Each Receipt this Period
 500.00

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

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

2578.90

**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 44 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MR. HOWARD M. PICKING III

Mailing Address 100 LONGVIEW LANE

City JOHNSTOWN State PA Zip Code 15905

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.30847

Amount of Each Receipt this Period
 450.00

B. Full Name (Last, First, Middle Initial)
GARY POBORSKY

Mailing Address 483 HELSEL RD

City JOHNSTOWN State PA Zip Code 15904

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

Name of Employer GAPVAX, INC. Occupation OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.31074

Amount of Each Receipt this Period
 2700.00

C. Full Name (Last, First, Middle Initial)
MR. PAUL POHL

Mailing Address 402 FAIRVIEW ROAD

City PITTSBURGH State PA Zip Code 15238

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

Name of Employer JONES DAY Occupation ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11AI.30772

Amount of Each Receipt this Period
 1000.00

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

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

4150.00

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

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

FOR LINE NUMBER: PAGE 45 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM POLACEK

Mailing Address 437 LEVENTRY ROAD

City JOHNSTOWN State PA Zip Code 15904

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

Name of Employer JWF INDUSTRIES Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : SA11AI.30880

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
MR. FRANK J. POPOWSKI

Mailing Address 4401 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : SA11AI.30984

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT B. POWDERLY

Mailing Address 136 RADCLIFF DR

City PITTSBURGH State PA Zip Code 15237

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA11AI.30784

Amount of Each Receipt this Period
 250.00

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

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

2850.00

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

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

FOR LINE NUMBER: PAGE 46 OF 126
(check only one)
 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)
DR. CAROL PRUCHNIC

Mailing Address 162 LAUREN LANE

City JOHNSTOWN State PA Zip Code 15905

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

Name of Employer C.P.G. Occupation PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.30839

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
MR. CHARLES J. QUEENAN JR.

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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11AI.30771

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 640 OSAGE ROAD

City PITTSBURGH State PA Zip Code 15243

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 23 / 2015

Transaction ID : SA11AI.30978

Amount of Each Receipt this Period
 1350.00

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

FOR LINE NUMBER: PAGE 47 OF 126
(check only one)
 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)
MR. TIMOTHY S. RIGBY

Mailing Address 311 THOBURN ST

City State Zip Code
JOHNSTOWN PA 15905

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 19 2015

Transaction ID : SA11AI.30869

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL RIGGS

Mailing Address 237 MOUNTAIN RIDGE COURT

City State Zip Code
BERLIN PA 15530

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

Name of Employer Occupation
SOMERSET WELDING & STEEL SR. VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 19 2015

Transaction ID : SA11AI.30876

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MS. MELINDA J ROBERTS

Mailing Address 879 BLACKBURN RD

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 31 2015

Transaction ID : SA11AI.31072

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	FOR LINE NUMBER: (check only one)	PAGE 48 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MR. BARRY C. ROBINSON

Mailing Address 8285 WEMBLEY CT

City State Zip Code
CHAGRIN FALLS OH 44023

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

Name of Employer Occupation
F.N.B. CORPORATION BANKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : SA11AI.30787

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. PAUL ROCKAR JR

Mailing Address 3911 MURRY HIGHLAND CIRCLE

City State Zip Code
MURRYSVILLE PA 15668

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

Name of Employer Occupation
UPMC CENTERS FOR REHAB SERVICES PHYSICAL THERAPIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 04 / 2015

Transaction ID : SA11AI.30967

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM F. ROEMER

Mailing Address 42 LITTLE SEWICKLEY CREEK ROAD

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 19 / 2015

Transaction ID : SA11AI.30889

Amount of Each Receipt this Period
1000.00

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: (check only one)	PAGE 49 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MR. CLIFF ROWE

Mailing Address **707 AMBERSON AVE**

City **PITTSBURGH** State **PA** Zip Code **15232**

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

Name of Employer **PJ DICK TRUMBULL LINDY** Occupation **CONTRACTOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 28 / 2015

Transaction ID : SA11AI.31039

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MRS. JOAN SANTARELLA

Mailing Address **14254 TENNYSON DRIVE**

City **HUDSON** State **FL** Zip Code **34667**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 / 24 / 2015

Transaction ID : SA11AI.31030

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. CHUCK SCHMIELER

Mailing Address **1573 HANCOCK AVE**

City **APOLLO** State **PA** Zip Code **15613**

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

Name of Employer **LAUREL AWNING COMPANY** Occupation **EXECUTIVE**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 19 / 2015

Transaction ID : SA11AI.30866

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: (check only one)	PAGE 50 OF 126
	<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) MR. LARRY SCHULTZ		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 19 / 2015	
Mailing Address 1012 SUMMER RIDGE COURT		Transaction ID : SA11AI.30886	
City MURRYSVILLE	State PA	Zip Code 15668	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) MRS. LINDA L. SEDWICK		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 16 / 2015	
Mailing Address 443 BELMONT ROAD		Transaction ID : SA11AI.30988	
City BUTLER	State PA	Zip Code 16001	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5400.00	
Name of Employer NONE	Occupation HOMEMAKER		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10800.00		
REATTRIBUTION REQUESTED			

Full Name (Last, First, Middle Initial) MRS. LINDA L. SEDWICK		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 16 / 2015	
Mailing Address 443 BELMONT ROAD		Transaction ID : SA11AI.31268	
City BUTLER	State PA	Zip Code 16001	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2700.00	
Name of Employer NONE	Occupation HOMEMAKER		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10800.00		
[MEMO ITEM] REATTRIBUTED TO SEDWICK, JAY			

SUBTOTAL of Receipts This Page (optional).....	5650.00
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 51 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MR. JAY SEDWICK

Mailing Address 443 BELMONT ROAD

City State Zip Code
BUTLER PA 16001

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

Name of Employer Occupation
ARMSTRONG EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11AI.31269

Amount of Each Receipt this Period
2700.00

**[MEMO ITEM]
REATTRIBUTED FROM SEDWICK, LINDA**

B. Full Name (Last, First, Middle Initial)
MR. THOMAS R SEITZ

Mailing Address 908 EAST AVE

City State Zip Code
JOHNSTOWN PA 15905

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 10 / 2015

Transaction ID : SA11AI.30842

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MS. BARBARA SHEAR

Mailing Address 215 N WOODLAND ROAD

City State Zip Code
PITTSBURGH PA 15232

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11AI.30992

Amount of Each Receipt this Period
2000.00

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

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

2250.00

**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 52 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MRS. JULIE W SHEEHAN

Mailing Address 802 LUZERNE ST.

City JOHNSTOWN State PA Zip Code 15905

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

Name of Employer CTC Occupation PRESIDENT & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : SA11AI.30995

Amount of Each Receipt this Period
 900.00

B. Full Name (Last, First, Middle Initial)
MR. EDWARD SHEEHAN

Mailing Address 802 LUZERNE ST

City JOHNSTOWN State PA Zip Code 15905

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

Name of Employer CONCURRENT TECHNOLOGIES INC. Occupation PRESIDENT & CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 30 / 2015

Transaction ID : SA11AI.31176

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM H. SIMPSON

Mailing Address 102 BUCKINGHAM ROAD

City PITTSBURGH State PA Zip Code 15215

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

Name of Employer SIMPSON & MCCRADY, LLC Occupation INSURANCE BROKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 11 / 2015

Transaction ID : SA11AI.30974

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: (check only one)	PAGE 53 OF 126
	<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) A. MR. WILLIAM H. SIMPSON		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 04 / 2015	
Mailing Address 102 BUCKINGHAM ROAD		Transaction ID : SA11AI.30966	
City PITTSBURGH	State PA	Zip Code 15215	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00	
Name of Employer SIMPSON & MCCRADY, LLC	Occupation INSURANCE BROKER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) B. PROF. KIRON SKINNER		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2015	
Mailing Address 610 ARBOR COURT		Transaction ID : SA11AI.31198	
City PITTSBURGH	State PA	Zip Code 15238	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer CARNEGIE MELLON UNIVERSITY	Occupation PROFESSOR		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		

Full Name (Last, First, Middle Initial) C. MR. MATTHEW B. SMITH		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2015	
Mailing Address 177 WYNDEMERE DRIVE		Transaction ID : SA11AI.30768	
City JOHNSTOWN	State PA	Zip Code 15904	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer LAUREL AUTO GROUP	Occupation VP		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

SUBTOTAL of Receipts This Page (optional).....	5950.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 54 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL B. SMITH

Mailing Address 202 DELTA DRIVE

City JOHNSTOWN State PA Zip Code 15904

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

Name of Employer LAUREL MOTORS HOLDING CO Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11AI.30769

Amount of Each Receipt this Period
1700.00

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL B. SMITH

Mailing Address 202 DELTA DRIVE

City JOHNSTOWN State PA Zip Code 15904

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

Name of Employer LAUREL MOTORS HOLDING CO Occupation EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11AI.30770

Amount of Each Receipt this Period
800.00

C. Full Name (Last, First, Middle Initial)
MR. PETER SOUR

Mailing Address ROCKLEDGE FARM
P.O. 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 26 / 2015

Transaction ID : SA11AI.31155

Amount of Each Receipt this Period
25.00

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

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

2525.00

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

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

FOR LINE NUMBER: PAGE 55 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. J. ROSS STEWART

Mailing Address 69 DARTMOUTH AVENUE

City JOHNSTOWN State PA Zip Code 15906

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

Name of Employer CONCURRENT TECHNOLOGIES Occupation SR. CONTRACTS ADMINISTRATION

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2015

Transaction ID : SA11AI.30971

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
MR. JAMIE STILLEY

Mailing Address 128 SNOWBERRY LANE

City GIBSONIA State PA Zip Code 15044

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

Name of Employer AMERIKOHL AGGREGATES, INC. Occupation VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2015

Transaction ID : SA11AI.30976

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
DR. JOEL W. 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 BUTLER ANESTHESIOLOGY ASSOCIATES Occupation ANESTHESIOLOGIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.31056

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: (check only one)	PAGE 56 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
THREE RIVERS MARINE AND RAIL TERMINALS LLC

Mailing Address VISTA ONE PROFESSIONAL CENTER
17 ARENTZEN BLVD, STE 206

City CHARLEROI State PA Zip Code 15022

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : SA11AI.30990

Amount of Each Receipt this Period
1700.00

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH D SHEARER

Mailing Address 1319 WOODBRIDGE DRIVE

City LATROBE State PA Zip Code 15650

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

Name of Employer Occupation
THREE RIVERS MARINE & RAIL TERMINALS PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : SA11AI.31248

Amount of Each Receipt this Period
850.00

[MEMO ITEM]
PARTNERSHIP THREE RIVERS MARINE AND RAIL TERMINALS LLC

C. Full Name (Last, First, Middle Initial)
MR. SCOTT TURER

Mailing Address 201 ROBB LANE

City GREENSBURG State PA Zip Code 15601

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

Name of Employer Occupation
THREE RIVERS MARINE AND RAIL TERMINA CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : SA11AI.31249

Amount of Each Receipt this Period
850.00

[MEMO ITEM]
PARTNERSHIP THREE RIVERS MARINE AND RAIL TERMINALS LLC

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

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

1700.00

**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 57 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
THREE RIVERS MARINE AND RAIL TERMINALS LLC

Mailing Address VISTA ONE PROFESSIONAL CENTER
17 ARENTZEN BLVD, STE 206

City CHARLEROI State PA Zip Code 15022

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.30991

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH D SHEARER

Mailing Address 1319 WOODBRIDGE DRIVE

City LATROBE State PA Zip Code 15650

FEC ID number of contributing federal political committee.

Name of Employer Occupation
THREE RIVERS MARINE & RAIL TERMINALS PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.31250

Amount of Each Receipt this Period

[MEMO ITEM]
PARTNERSHIP THREE RIVERS MARINE AND RAIL TERMINALS LLC

C. Full Name (Last, First, Middle Initial)
MR. SCOTT TURER

Mailing Address 201 ROBB LANE

City GREENSBURG State PA Zip Code 15601

FEC ID number of contributing federal political committee.

Name of Employer Occupation
THREE RIVERS MARINE AND RAIL TERMINA CFO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.31251

Amount of Each Receipt this Period

[MEMO ITEM]
PARTNERSHIP THREE RIVERS MARINE AND RAIL TERMINALS LLC

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

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 58 OF 126
	<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) A. MR. JOHN A. TUMOLO		Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2015	
Mailing Address 15 TEAL DRIVE		Transaction ID : SA11AI.30993	
City PITTSBURGH	State PA	Zip Code 15238	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer SELF EMPLOYED	Occupation ATTORNEY		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3700.00		

Full Name (Last, First, Middle Initial) B. MR. JAMES VASILKO		Date of Receipt M M / D D / Y Y Y Y Y 11 / 19 / 2015	
Mailing Address 140 LUNA LANE		Transaction ID : SA11AI.30881	
City JOHNSTOWN	State PA	Zip Code 15904	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer JOHNTOWN CONSTRUCTION SERVICES	Occupation PRESIDENT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

Full Name (Last, First, Middle Initial) C. MRS. ELIZABETH VERES		Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2015	
Mailing Address 10210 GRUBBS ROAD		Transaction ID : SA11AI.31141	
City WEXFORD	State PA	Zip Code 15090	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00	
Name of Employer NONE	Occupation HOMEMAKER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00		

SUBTOTAL of Receipts This Page (optional).....	6400.00
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 59 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MRS. JANICE WALKER

Mailing Address 1400 DELVIEW DRIVE

City Greensburg State PA Zip Code 15601

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

Name of Employer LOYALHANNA MANAGEMENT SERVICES Occupation CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : SA11AI.30883

Amount of Each Receipt this Period
 2700.00

B. Full Name (Last, First, Middle Initial)
MR ADAM D WHITAKER

Mailing Address 4109 CLOVERLEA ST

City Pittsburgh State PA Zip Code 15227

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11AI.31083

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
MR. RAYMOND B WHITE

Mailing Address 737 FERN HOLLOW ROAD

City Sewickley State PA Zip Code 15143

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

Name of Employer THE WATSON INSTITUTE Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.30932

Amount of Each Receipt this Period
 100.00

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

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

3300.00

**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 60 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
DR. JOHN P WILLIAMS

Mailing Address 5004 WEST GROVE LANE

City State Zip Code
GIBSONIA PA 15044

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

Name of Employer Occupation
UPMC PHYSICIAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 04 / 2015

Transaction ID : SA11AI.30968

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL A. WOLCOTT

Mailing Address 7670 MCKNIGHT ROAD

City State Zip Code
PITTSBURGH PA 15237

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

Name of Employer Occupation
WOLCOTT HOLDINGS AUTOMOBILE DEALER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : SA11AI.30882

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. JEFFREY R WOOD

Mailing Address 1120 CLUB DRIVE

City State Zip Code
JOHNSTOWN PA 15905

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

Name of Employer Occupation
KONGSBERG FINANCE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 10 / 2015

Transaction ID : SA11AI.30843

Amount of Each Receipt this Period
250.00

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

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

3050.00

**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 61 OF 126
	<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) MR. JEFFREY R WOOD		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 02 / 2015
Mailing Address 1120 CLUB DRIVE		Transaction ID : SA11AI.30892
City JOHNSTOWN	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer KONGSBERG	Occupation FINANCE	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) MR. ROBERT T. WOODINGS		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 10 / 2015
Mailing Address 6 MEADOWOOD DRIVE		Transaction ID : SA11AI.30854
City PITTSBURGH	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1300.00
Name of Employer IWCC	Occupation ATTORNEY	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) MS. SARAH WOODINGS		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 10 / 2015
Mailing Address 6 MEADOWOOD DRIVE		Transaction ID : SA11AI.30855
City PITTSBURGH	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer NONE	Occupation HOMEMAKER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

SUBTOTAL of Receipts This Page (optional).....	4100.00
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 62 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MS. SARAH WOODINGS

Mailing Address **6 MEADOWOOD DRIVE**

City **PITTSBURGH** State **PA** Zip Code **15215**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			10			2015			

Transaction ID : SA11A1.30856

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MRS. ELYSE WRIGHT

Mailing Address **4 WAY HOLLOW 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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2015			

Transaction ID : SA11A1.31075

Amount of Each Receipt this Period
2700.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT S. WRIGHT

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 **WRIGHT NISSAN** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			30			2015			

Transaction ID : SA11A1.30797

Amount of Each Receipt this Period
2700.00

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

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

8100.00

**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 63 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
MRS. SANDRA K. WRIGHT

Mailing Address 1503 FOX CHASE DR

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
WRIGHT AUTOMOTIVE GROUP OFFICE PERSONNEL

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : SA11AI.30799

Amount of Each Receipt this Period
2700.00

B. Full Name (Last, First, Middle Initial)
MR. S. DALE YAKISH

Mailing Address 920 WARRENDALE BAYNE RD

City State Zip Code
WEXFORD PA 15090

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

Name of Employer Occupation
ASSOC OF SPECIALTY PHYSICIANS ORTHOPEDIC SURGEON

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 02 / 2015

Transaction ID : SA11AI.30952

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. DAVID B. YATES

Mailing Address 715 BRISTLECONE DR

City State Zip Code
GIBSONIA PA 15044

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

Name of Employer Occupation
FIRST NATIONAL BANK OF PA MANAGER OF PRIVATE BANKING

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : SA11AI.30783

Amount of Each Receipt this Period
250.00

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

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

3450.00

174919.38

**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 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

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

Mailing Address 1001 PENNSYLVANIA AVENUE, NW
SUITE 500A SOUTH

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00236414

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11C.31091

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AIRCRAFT OWNERS AND PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 421 AVIATION WAY

City FREDERICK State MD Zip Code 21701

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 30 / 2015

Transaction ID : SA11C.30821

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 CONNECTICUT AVENUE NW
SUITE 600

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : SA11C.31028

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)	PAGE 65 OF 126
	<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 COUNCIL OF LIFE INSURERS POLITICAL ACTION COMMITTEE

Mailing Address 101 CONSTITUTION AVE., NW
SUITE 700

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00147066

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : SA11C.31006

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

Mailing Address PALLADIAN 1
220 LEIGH FARM RD

City DURHAM State NC Zip Code 27707

FEC ID number of contributing federal political committee. **C** C00077321

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : SA11C.31002

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
BANK OF AMERICA CORPORATION FEDERAL PAC

Mailing Address 1455 PENNSYLVANIA AVE NW SUITE 950
DC8-455-09-01

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00364778

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 02 / 2015

Transaction ID : SA11C.30898

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	FOR LINE NUMBER: (check only one)	PAGE 66 OF 126
	<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)
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: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2015

Transaction ID : SA11C.30766

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
CIT GROUP INC PAC (CIT PAC)

Mailing Address 1 CIT DRIVE #2223-1

City State Zip Code
LIVINGSTON NJ 07039

FEC ID number of contributing federal political committee. **C** C00379420

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2015

Transaction ID : SA11C.30858

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
CITIGROUP INC. POLITICAL ACTION COMMITTEE - FEDERAL (CITIGROUP PAC-FEDERAL)

Mailing Address 1101 PENNSYLVANIA AVENUE NW #1000

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00008474

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11C.31027

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)	PAGE 67 OF 126
	<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)
CNA FINANCIAL CORPORATION CITIZENS FOR GOOD GOVERNMENT

Mailing Address 333 S. WABASH
43-S

City State Zip Code
CHICAGO IL 60604

FEC ID number of contributing federal political committee. **C C00078287**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11C.31011

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
COLUMBIA PIPELINE GROUP, INC. PAC

Mailing Address 10 G ST NE, STE 400

City State Zip Code
WASHINGTON DC 20002

FEC ID number of contributing federal political committee. **C C00575340**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 13 / 2015

Transaction ID : SA11C.30859

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
COMCAST CORPORATION & NBC UNIVERSAL POLITICAL ACTION COMMITTEE - FEDERAL

Mailing Address 1701 JFK BLVD, 49TH FLOOR

City State Zip Code
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11C.31066

Amount of Each Receipt this Period
2500.00

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

FOR LINE NUMBER: PAGE 68 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 601 PENNSYLVANIA AVENUE, NW
SOUTH BUILDING, SUITE 600

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00007880**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11C.31016

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DEFENDING AMERICA'S VALUES EVERYWHERE (TEAM DAVE)

Mailing Address 228 S WASHINGTON STREET SUITE 115

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00497594**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 24 / 2015

Transaction ID : SA11C.31031

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DELOITTE POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 365

City WASHINGTON State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C C00211318**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11C.31004

Amount of Each Receipt this Period
2000.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 69 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DISCOVER FINANCIAL SERVICES POLITICAL ACTION COMMITTEE

Mailing Address 500 8TH STREET NW SUITE 210

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00438051

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11C.31018

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
DOMINION RESOURCES, INC. POLITICAL ACTION COMMITTEE - DOMINION PAC

Mailing Address ONE JAMES RIVER PLAZA, 20TH FLOOR
P.O. BOX 26666

City RICHMOND State VA Zip Code 23261

FEC ID number of contributing federal political committee. **C** C00108209

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11C.31003

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
DRS TECHNOLOGIES INC. GOOD GOVERNMENT FUND

Mailing Address 2345 CRYSTAL DRIVE
SUITE 915

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00275123

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 19 / 2015

Transaction ID : SA11C.30887

Amount of Each Receipt this Period
900.00

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

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

3400.00

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

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

FOR LINE NUMBER: PAGE 70 OF 126
(check only one)
 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)
EAGLE FORUM PAC

Mailing Address **PO BOX 618**

City **ALTON** State **IL** Zip Code **62002**

FEC ID number of contributing federal political committee. **C C00103937**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 05 / 2015

Transaction ID : SA11C.30748

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ERIE INDEMNITY COMPANY PAC - FEDERAL

Mailing Address **100 ERIE INSURANCE PLACE**

City **ERIE** State **PA** Zip Code **16530**

FEC ID number of contributing federal political committee. **C C00153577**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3250.00

Date of Receipt
 M M / D D / Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11C.31005

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
F.N.B. CORPORATION PAC

Mailing Address **ONE F.N.B. BLVD**

City **HERMITAGE** State **PA** Zip Code **16148**

FEC ID number of contributing federal political committee. **C C00514026**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7700.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 30 / 2015

Transaction ID : SA11C.30793

Amount of Each Receipt this Period
2300.00

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

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

5300.00

**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 71 OF 126
	<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)
F.N.B. CORPORATION PAC

Mailing Address **ONE F.N.B. BLVD**

City **HERMITAGE** State **PA** Zip Code **16148**

FEC ID number of contributing federal political committee. **C C00514026**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 30 / 2015

Transaction ID : SA11C.30794

Amount of Each Receipt this Period
 2700.00

Amount of Each Receipt this Period
 7700.00

B. Full Name (Last, First, Middle Initial)
FINANCIAL SERVICES POLITICAL COMMITTEE

Mailing Address **LIBERTY CENTER-27TH FLOOR**

City **PITTSBURGH** State **PA** Zip Code **15222**

FEC ID number of contributing federal political committee. **C C00162735**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 02 / 2015

Transaction ID : SA11C.30747

Amount of Each Receipt this Period
 2000.00

Amount of Each Receipt this Period
 4600.00

C. Full Name (Last, First, Middle Initial)
FMR LLC POLITICAL ACTION COMMITTEE - FEDERAL (FIDELITY PAC)

Mailing Address **82 DEVONSHIRE STREET**
N5A

City **BOSTON** State **MA** Zip Code **02109**

FEC ID number of contributing federal political committee. **C C00380550**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 23 / 2015

Transaction ID : SA11C.30767

Amount of Each Receipt this Period
 1000.00

Amount of Each Receipt this Period
 1000.00

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

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

5700.00

**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 72 OF 126
	<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)
GOOGLE INC. NETPAC

Mailing Address 25 MASSACHUSETTS AVE NW
9TH FLOOR

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00428623**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11C.31064

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
GRIDIRON-PAC

Mailing Address 345 PARK AVENUE

City NEW YORK State NY Zip Code 10154

FEC ID number of contributing federal political committee. **C C00451153**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11C.31061

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1615 L STREET, NW
SUITE 900

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00032698**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : SA11C.31001

Amount of Each Receipt this Period
 2500.00

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 73 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1615 L STREET, NW
SUITE 900

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2015

Transaction ID : SA11C.31087

Amount of Each Receipt this Period
1000.00

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

Mailing Address 20 F STREET NW, STE 610

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 05 / 2015

Transaction ID : SA11C.30749

Amount of Each Receipt this Period
2500.00

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

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11C.31015

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	FOR LINE NUMBER: (check only one)	PAGE 74 OF 126
	<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)
JM FAMILY ENTERPRISES, INC. PAC

Mailing Address 300 JIM MORAN BLVD.

City State Zip Code
DEERFIELD BEACH FL 33442

FEC ID number of contributing federal political committee. **C C00240911**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 13 / 2015

Transaction ID : SA11C.30860

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
KPMG PARTNERS/PRINCIPALS & EMPLOYEES PAC

Mailing Address 1801 K STREET, NW

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C C00280222**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11C.31062

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DRIVE
SUITE 100

City State Zip Code
ARLINGTON VA 22202

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 19 / 2015

Transaction ID : SA11C.30888

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)	PAGE 75 OF 126
	<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)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DRIVE
SUITE 100

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2015

Transaction ID : SA11C.31041

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MANUFACTURED HOUSING INSTITUTE PAC

Mailing Address 1655 NORTH FORT MYER DRIVE
SUITE 104

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00043463

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 16 / 2015

Transaction ID : SA11C.31012

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 16011 NE 36TH WAY
BOX 97017

City REDMOND State WA Zip Code 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 24 / 2015

Transaction ID : SA11C.31029

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: PAGE 76 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MORE CONSERVATIVES PAC (MCPAC)

Mailing Address 228 S WASHINGTON ST STE 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00540187

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 02 / 2015

Transaction ID : SA11C.30900

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (MORPAC)

Mailing Address 1717 RHODE ISLAND AVE NW
SUITE 400

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11C.31010

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 TELESTAR CT.

City State Zip Code
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11C.31008

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

FOR LINE NUMBER: PAGE 77 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 TELESTAR CT.

City State Zip Code
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11C.31067

Amount of Each Receipt this Period
3000.00

4000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City State Zip Code
CHICAGO IL 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 16 2015

Transaction ID : SA11C.31013

Amount of Each Receipt this Period
1000.00

1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE

Mailing Address 1125 EXECUTIVE CIRCLE

City State Zip Code
IRVING TX 75038

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 16 2015

Transaction ID : SA11C.31000

Amount of Each Receipt this Period
2500.00

4500.00

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

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

6500.00

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

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

FOR LINE NUMBER: PAGE 78 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NISOURCE INC. PAC

Mailing Address **290 W NATIONWIDE BLVD**

City **COLUMBUS** State **OH** Zip Code **43215**

FEC ID number of contributing federal political committee. **C C00051979**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11C.31007

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
PHILIPS ELECTRONICS NORTH AMERICA CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address **1050 K STREET, NW SUITE 900**

City **WASHINGTON** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00239780**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 02 / 2015

Transaction ID : SA11C.30895

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I

Mailing Address **1301 K STREET, NW SUITE 800W**

City **WASHINGTON** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SA11C.31014

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 79 OF 126
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PROSPERITY ACTION PAC

Mailing Address 1006 PENDLETON STREET

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00377689

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 31 2015

Transaction ID : SA11C.31199

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
RITE AID CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 30 HUNTER LANE

City State Zip Code
CAMP HILL PA 17011

FEC ID number of contributing federal political committee. **C** C00104083

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
12 16 2015

Transaction ID : SA11C.31009

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
S&T BANK/S&T BANCORP, INC. POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 190
800 PHILADELPHIA ST

City State Zip Code
INDIANA PA 15701

FEC ID number of contributing federal political committee. **C** C00263483

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
11 10 2015

Transaction ID : SA11C.30840

Amount of Each Receipt this Period
250.00

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

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

6250.00

**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 80 OF 126
	<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)
STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE

A. Mailing Address **ONE STATE FARM PLAZA**

City State Zip Code
BLOOMINGTON IL 61710

FEC ID number of contributing federal political committee. **C C00544817**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 02 2015

Transaction ID : **SA11C.30896**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address **ONE STATE FARM PLAZA**

City State Zip Code
BLOOMINGTON IL 61710

FEC ID number of contributing federal political committee. **C C00544817**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : **SA11C.31063**

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
UBS AMERICAS INC. POLITICAL ACTION COMMITTEE (UBS PAC)

Mailing Address **400 ATLANTIC STREET
C/O PER DYRVIK**

City State Zip Code
STAMFORD CT 06901

FEC ID number of contributing federal political committee. **C C00012245**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : **SA11C.31065**

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....	4000.00
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 81 OF 126
	<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)
UNITED MINE WORKERS OF AMERICA - COAL MINERS POLITICAL ACTION COMMITTEE

Mailing Address 18354 QUANTICO GATEWAY DR
SUITE 200

City State Zip Code
TRIANGLE VA 22172

FEC ID number of contributing federal political committee. **C** C00013342

Name of Employer Occupation

Receipt For: 2016
 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
 12 / 02 / 2015

Transaction ID : SA11C.30897

Amount of Each Receipt this Period
1000.00

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

Mailing Address THE ALTANTIC BUILDING
950 F STREET

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00493502

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA11C.31092

Amount of Each Receipt this Period
2000.00

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 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).....

3000.00

76150.00

**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 82 OF 126
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
INSURING OUR FUTURE

Mailing Address 824 S MILLEDGE AVE, STE 101

City Athens State GA Zip Code 30605

FEC ID number of contributing federal political committee. **C** C00583583

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 15706.39

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA12.31093

Amount of Each Receipt this Period
 15706.39

TRANSFER OF NET JFC FUNDS

B. Full Name (Last, First, Middle Initial)
JULIE A RUPERT

Mailing Address 6501 FOREST PARK DR

City DE FOREST State WI Zip Code 53532

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

Name of Employer Occupation
 AMERICAN FAMILY INSURANCE VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 62.50

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31094

Amount of Each Receipt this Period
 62.50

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
GERRY W BENUSA

Mailing Address 1227 BONGARD DR

City WAUNAKEE State WI Zip Code 53597

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

Name of Employer Occupation
 AMERICAN FAMILY INSURANCE CHIEF SALES OFFICER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 62.50

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31095

Amount of Each Receipt this Period
 62.50

[MEMO ITEM]

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

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

15706.39

**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 83 OF 126
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM T FANCHER

Mailing Address 1111 WOODBRIDGE TRL

City WAUNAKEE State WI Zip Code 53597

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

Name of Employer AMERICAN FAMILY INSURANCE Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31096

Amount of Each Receipt this Period
 62.50

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
BERNARD T MCCARTAN

Mailing Address W346 S3290 HOLLAND CT

City OCONOMOWOC State WI Zip Code 53066

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

Name of Employer AMERICAN FAMILY INSURANCE Occupation VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31097

Amount of Each Receipt this Period
 62.50

[MEMO ITEM]

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

Mailing Address 5591 POLO RIDGE

City WAUNAKEE State WI Zip Code 53597

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

Name of Employer AMERICAN FAMILY INSURANCE Occupation CHIEF INFORMATION OFFICER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31098

Amount of Each Receipt this Period
 62.50

[MEMO ITEM]

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	FOR LINE NUMBER: (check only one)	PAGE 84 OF 126
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARY K LISTAU

Mailing Address 5830 COBBLESTONE LN

City WAUNAKEE State WI Zip Code 53597

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

Name of Employer AMERICAN FAMILY INSURANCE Occupation PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31099

Amount of Each Receipt this Period
 62.50

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JERRY REKOWSKI

Mailing Address 2202 COLLADAY POINT DR

City STOUGHTON State WI Zip Code 53589

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

Name of Employer AMERICAN FAMILY INSURANCE Occupation VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31100

Amount of Each Receipt this Period
 62.50

[MEMO ITEM]

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

Mailing Address 1826 CARRINGTON DR

City SUN PRAIRIE State WI Zip Code 53590

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

Name of Employer AMERICAN FAMILY INSURANCE Occupation CHIEF LEGAL OFFICER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31101

Amount of Each Receipt this Period
 62.50

[MEMO ITEM]

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

FOR LINE NUMBER: PAGE 85 OF 126
(check only one)
 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)
SCOTT J SEYMOUR

Mailing Address 696 ACADIA WAY

City State Zip Code
VERONA WI 53593

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

Name of Employer Occupation
AMERICAN FAMILY INSURANCE VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
62.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31102

Amount of Each Receipt this Period
62.50

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
DAVID GRAHAM

Mailing Address 3963 CARIBOU RD

City State Zip Code
VERONA WI 53593

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

Name of Employer Occupation
AMERICAN FAMILY INSURANCE CHIEF INVESTMENT OFFICER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
62.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31103

Amount of Each Receipt this Period
62.50

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
GREGORY J PFLUGER

Mailing Address 603 S PROSPECT AVE

City State Zip Code
MADISON WI 53711

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

Name of Employer Occupation
AMERICAN FAMILY INSURANCE VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
62.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31104

Amount of Each Receipt this Period
62.50

[MEMO ITEM]

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

FOR LINE NUMBER: PAGE 86 OF 126
(check only one)
 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)
JUSTIN B CRUZ

Mailing Address 610 CLEMONS AVE

City State Zip Code
MADISON WI 53704

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

Name of Employer Occupation
AMERICAN FAMILY INSURANCE VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
62.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31105

Amount of Each Receipt this Period
62.50

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JAMES J MADDEN

Mailing Address 6760 TARTAN TRL

City State Zip Code
SUN PRAIRIE WI 53590

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

Name of Employer Occupation
AMERICAN FAMILY INSURANCE VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
62.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31106

Amount of Each Receipt this Period
62.50

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CESAR A PINZON JR

Mailing Address 2201 SCOIL CT

City State Zip Code
WAUNAKEE WI 53597

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

Name of Employer Occupation
AMERICAN FAMILY INSURANCE VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
62.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31107

Amount of Each Receipt this Period
62.50

[MEMO ITEM]

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	FOR LINE NUMBER: (check only one)	PAGE 87 OF 126
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KARI E GRASEE		Date of Receipt M M / D D / Y Y Y Y Y 12 / 07 / 2015	
Mailing Address 1218 LAWTON LN		Transaction ID : SA12.31108	
City WAUNAKEE	State WI	Zip Code 53597	Amount of Each Receipt this Period 62.50
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer AMERICAN FAMILY INSURANCE	Occupation VICE PRESIDENT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 62.50		

Full Name (Last, First, Middle Initial) B. DAVID S MURPHY		Date of Receipt M M / D D / Y Y Y Y Y 12 / 07 / 2015	
Mailing Address 171 ISLEWORTH DR		Transaction ID : SA12.31109	
City ADVANCE	State NC	Zip Code 27006	Amount of Each Receipt this Period 125.00
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer JEWELERS MUTUAL INSURANCE CO	Occupation PRESIDENT		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 125.00		

Full Name (Last, First, Middle Initial) C. DANIEL J EKSTEIN		Date of Receipt M M / D D / Y Y Y Y Y 12 / 07 / 2015	
Mailing Address 5702 WYNGATE DR		Transaction ID : SA12.31110	
City BETHESDA	State MD	Zip Code 20817	Amount of Each Receipt this Period 125.00
FEC ID number of contributing federal political committee. C		[MEMO ITEM]	
Name of Employer SAGA PUBLIC AFFAIRS	Occupation PARTNER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 125.00		

SUBTOTAL of Receipts This Page (optional).....	0.00
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 88 OF 126
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DANA M FRASCELLA

Mailing Address 5 STONEBRIDGE CR RD

City State Zip Code
NEWTOWN PA 18940

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31111

Amount of Each Receipt this Period
250.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
BERNARD M FLYNN

Mailing Address 274 BURNING TREE RD

City State Zip Code
DELRAN NJ 08075

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

Name of Employer Occupation
NJM INSURANCE GROUP EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31112

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
R E KING

Mailing Address 1415 W 22ND ST, STE 400

City State Zip Code
OAK BROOK IL 60523

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

Name of Employer Occupation
RASMUSSEN COLLEGE CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31113

Amount of Each Receipt this Period
250.00

[MEMO ITEM]

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

FOR LINE NUMBER: (check only one)
 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)
KURT F BOCK

Mailing Address **1701 TOWANDA AVE**

City **BLOOMINGTON** State **IL** Zip Code **61701**

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

Name of Employer **COUNTRY FINANCIAL** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
12 / 07 / 2015

Transaction ID : SA12.31114

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ROGER H TAFT

Mailing Address **4724 WOLF RD**

City **ERIE** State **PA** Zip Code **16505**

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

Name of Employer **MACDONALD ILLIG JONES AND BRITTAN LLI** Occupation **ATTORNEY**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
12 / 07 / 2015

Transaction ID : SA12.31115

Amount of Each Receipt this Period
250.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
TERRENCE W CAVANAUGH

Mailing Address **6300 LAKE SHORE DR**

City **ERIE** State **PA** Zip Code **16505**

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

Name of Employer **ERIE INSURANCE** Occupation **PRESIDENT**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
12 / 07 / 2015

Transaction ID : SA12.31116

Amount of Each Receipt this Period
250.00

[MEMO ITEM]

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	FOR LINE NUMBER: (check only one)	PAGE 90 OF 126
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHARLES BURHAN

Mailing Address 1659 CARMEL CT

City State Zip Code
HOFFMAN ESTATES IL 60169

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

Name of Employer Occupation
LIBERTY MUTUAL EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 08 / 2015

Transaction ID : SA12.31117

Amount of Each Receipt this Period
250.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MICHAEL E RAVN

Mailing Address 3000 SCHUSTER LANE

City State Zip Code
MERRILL WI 54452

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

Name of Employer Occupation
CHURCH MUTUAL INSURANCE CO EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 14 / 2015

Transaction ID : SA12.31118

Amount of Each Receipt this Period
1250.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
LISA A WAGNER

Mailing Address 1926 HAMPTON DR

City State Zip Code
WHEATON IL 60189

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

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
125.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 23 / 2015

Transaction ID : SA12.31119

Amount of Each Receipt this Period
125.00

[MEMO ITEM]

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

FOR LINE NUMBER: (check only one)
 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)
DANIEL J WAGNER

Mailing Address 1926 HAMPTON DR

City State Zip Code
 WHEATON IL 60189

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

Name of Employer Occupation
 INLAND GROUP SENIOR VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 125.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 23 / 2015

Transaction ID : SA12.31120

Amount of Each Receipt this Period
 125.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
WILLIAM E JOHNSON

Mailing Address W147 E RIVER RD

City State Zip Code
 HAYWARD WI 54843

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

Name of Employer Occupation
 JOHNSON TIMBER CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 375.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 07 / 2015

Transaction ID : SA12.31121

Amount of Each Receipt this Period
 375.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
TRACY A BERGQUIST

Mailing Address 1797 OAKEN VALE RD

City State Zip Code
 MARSHALL WI 53559

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

Name of Employer Occupation
 AMERICAN FAMILY INSURANCE VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 62.50

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 07 / 2015

Transaction ID : SA12.31122

Amount of Each Receipt this Period
 62.50

[MEMO ITEM]

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	FOR LINE NUMBER: (check only one)	PAGE 92 OF 126
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KEITH RYNIAK

Mailing Address 17113 DUNWOODY LN

City WAUNAKEE State WI Zip Code 53597

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

Name of Employer AMERICAN FAMILY INSURANCE Occupation AGENCY STRATEGY DIRECTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
62.50

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31123

Amount of Each Receipt this Period
62.50

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
SARAH S SALZWEDEL

Mailing Address 5117 ST CYR RD

City MIDDLETON State WI Zip Code 53562

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

Name of Employer AMERICAN FAMILY INSURANCE Occupation CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
625.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31124

Amount of Each Receipt this Period
625.00

[MEMO ITEM]

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

Mailing Address 5864 COBBLESTONE LN

City WAUNAKEE State WI Zip Code 53597

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

Name of Employer AMERICAN FAMILY INSURANCE Occupation VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
62.50

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31125

Amount of Each Receipt this Period
62.50

[MEMO ITEM]

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

FOR LINE NUMBER: PAGE 93 OF 126
(check only one)
 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)
STEVEN R TJUGUM

Mailing Address 1410 ELDORADO CT

City State Zip Code
WAUNAKEE WI 53597

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

Name of Employer Occupation
AMERICAN FAMILY INSURANCE VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
62.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31126

Amount of Each Receipt this Period
62.50

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
APPRAISAL INSTITUTE PAC (AI PAC)

Mailing Address 122 C STREET NW SUITE 360

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00144261

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31127

Amount of Each Receipt this Period
1250.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
WESTFIELD FEDERAL EMPLOYEE POLITICAL ACTION COMMITTEE OF OHIO FARMERS INSURANCE COMPANY

Mailing Address ONE PARK CIRCLE
P.O. BOX 5001

City State Zip Code
WESTFIELD CENTER OH 44251

FEC ID number of contributing federal political committee. **C** C00376863

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31128

Amount of Each Receipt this Period
250.00

[MEMO ITEM]

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	FOR LINE NUMBER: (check only one)	PAGE 94 OF 126
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ERIE INDEMNITY COMPANY PAC - FEDERAL

Mailing Address 100 ERIE INSURANCE PLACE

City State Zip Code
ERIE PA 16530

FEC ID number of contributing federal political committee. **C** C00153577

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31129

Amount of Each Receipt this Period
1250.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
EMPLOYERS MUTUAL CASUALTY COMPANY COMMITTEE FOR RESPONSIBLE FEDERAL GOVERNMENT

Mailing Address 717 MULBERRY ST

City State Zip Code
DES MOINES IA 50309

FEC ID number of contributing federal political committee. **C** C00163873

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31130

Amount of Each Receipt this Period
250.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
AMICA MUTUAL INSURANCE COMPANY/FED-POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 6008

City State Zip Code
PROVIDENCE RI 02940

FEC ID number of contributing federal political committee. **C** C00268987

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
625.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 07 / 2015

Transaction ID : SA12.31131

Amount of Each Receipt this Period
625.00

[MEMO ITEM]

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

FOR LINE NUMBER: PAGE 95 OF 126
(check only one)
 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)
AMERICAN FAMILY MUTUAL INSURANCE COMPANY FEDERAL PAC (AMFAM PAC)

Mailing Address 6000 AMERICAN PARKWAY

City State Zip Code
MADISON WI 53783

FEC ID number of contributing federal political committee. **C** C00354290

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 625.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015
Transaction ID : SA12.31132

Amount of Each Receipt this Period
 625.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CUNA MUTUAL HOLDING COMPANY POLITICAL ACTION COMMITTEE (CUNA MUTUAL PAC)

Mailing Address 5910 MINERAL POINT RD, PO BOX 747
MAIL STOP 5910 4 A2

City State Zip Code
MADISON WI 53701

FEC ID number of contributing federal political committee. **C** C00402107

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015
Transaction ID : SA12.31133

Amount of Each Receipt this Period
 250.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
SENTRY INSURANCE A MUTUAL COMPANY FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 44 EAST MIFFLIN STREET SUITE 801

City State Zip Code
MADISON WI 53703

FEC ID number of contributing federal political committee. **C** C00545194

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
 Election Cycle-to-Date 1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 07 / 2015
Transaction ID : SA12.31134

Amount of Each Receipt this Period
 1250.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... 0.00
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 96 OF 126
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial)
PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (PCIPAC)

A. Mailing Address 8700 WEST BRYN MAWR
SUITE 1200S

City State Zip Code
CHICAGO IL 60631

FEC ID number of contributing federal political committee. **C** C00066472

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 23 2015

Transaction ID : SA12.31135

Amount of Each Receipt this Period
5000.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
SELECTIVE INSURANCE COMPANY OF AMERICA POLITICAL ACTION COMMITTEE (SELECTIVE PAC)

B. Mailing Address 40 WANTAGE AVE

City State Zip Code
BRANCHVILLE NJ 07890

FEC ID number of contributing federal political committee. **C** C00550889

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)
Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 23 2015

Transaction ID : SA12.31136

Amount of Each Receipt this Period
500.00

[MEMO ITEM]

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 Y Y

Amount of Each Receipt this Period

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

0.00

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

15706.39

**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 97 OF 126
	<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

A. Full Name (Last, First, Middle Initial)
CUSTOM CLOTHING SOLUTIONS INC.

Mailing Address 330W 42ND ST, STE 900

City NEW YORK State NY Zip Code 10036

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2015

Transaction ID : SA14.31060

Amount of Each Receipt this Period
 1000.00

REFUND

B. Full Name (Last, First, Middle Initial)
DUQUESNE CLUB

Mailing Address PO BOX 387

City PITTSBURGH State PA Zip Code 15230

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2015

Transaction ID : SA14.30822

Amount of Each Receipt this Period
 296.07

REFUND

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 Y Y

Amount of Each Receipt this Period

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

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

1296.07

1296.07

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BANK OF NEW YORK MELLON			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2015		
Mailing Address 225 LIBERTY ST			Amount of Each Disbursement this Period 400.00		
City NEW YORK	State NY	Zip Code 10005	Transaction ID : SB17.31200		
Purpose of Disbursement SPONSORSHIP		001 Category/ Type			
Candidate Name					
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. BEAVER COUNTY CHAMBER OF COMMERCE			Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2015		
Mailing Address 798 TURNPIKE ST			Amount of Each Disbursement this Period 231.00		
City BEAVER	State PA	Zip Code 15009	Transaction ID : SB17.31024		
Purpose of Disbursement MEMBERSHIP		001 Category/ Type			
Candidate Name					
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. CAMPAIGN SOLUTIONS			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015		
Mailing Address 117 N ST ASAPH ST			Amount of Each Disbursement this Period 836.91		
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SB17.31254		
Purpose of Disbursement CC TRANSACTION FEES		001 Category/ Type			
Candidate Name					
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).....	1467.91
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 Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 126		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAMPAIGN SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2015
Mailing Address 117 N ST ASAPH ST		Amount of Each Disbursement this Period 2015 198.15 Transaction ID : SB17.31255
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement CC TRANSACTION FEES 001 Category/Type	
Candidate Name	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. CAMPAIGN SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 117 N ST ASAPH ST		Amount of Each Disbursement this Period 2015 2036.79 Transaction ID : SB17.31256
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement CC TRANSACTION FEES 001 Category/Type	
Candidate Name	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. CELEBRATION JOHNSTOWN		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address PO BOX 5653		Amount of Each Disbursement this Period 2015 250.00 Transaction ID : SB17.30824
City JOHNSTOWN State PA Zip Code 15904	Purpose of Disbursement SPONSORSHIP 001 Category/Type	
Candidate Name	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).....	2484.94
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 Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MS. LORI A. CESTRA			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2015	
Mailing Address 310 PINE VALLEY DRIVE			Amount of Each Disbursement this Period 476.41	
City BRIDGEVILLE	State PA	Zip Code 15017	Transaction ID : SB17.31247	
Purpose of Disbursement IN-KIND:EVENT TICKETS		Category/ Type		
Candidate Name				
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. COMMUNITY COLLEGE OF BEAVER COUNTY			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015	
Mailing Address 1 CAMPUS DR			Amount of Each Disbursement this Period 200.00	
City MONACA	State PA	Zip Code 15061	Transaction ID : SB17.31263	
Purpose of Disbursement SPONSORSHIP		Category/ Type 001		
Candidate Name				
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. COSTCO			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2015	
Mailing Address 1050 CRANBERRY SQUARE DRIVE			Amount of Each Disbursement this Period 55.00	
City CRANBERRY TWP	State PA	Zip Code 16066	Transaction ID : SB17.31204	
Purpose of Disbursement MEMBERSHIP DUES		Category/ Type 001		
Candidate Name				
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).....	731.41
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 Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DUQUESNE CLUB			Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2015	
Mailing Address PO BOX 387			Amount of Each Disbursement this Period 2180.71	
City PITTSBURGH	State PA	Zip Code 15230	Transaction ID : SB17.30802	
Purpose of Disbursement EVENT CATERING		001	Category/ Type	
Candidate Name				
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. DUQUESNE CLUB			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015	
Mailing Address PO BOX 387			Amount of Each Disbursement this Period 962.01	
City PITTSBURGH	State PA	Zip Code 15230	Transaction ID : SB17.30827	
Purpose of Disbursement MEETING EXPENSE		001	Category/ Type	
Candidate Name				
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. ELECTEKUSA			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015	
Mailing Address PO BOX 23715			Amount of Each Disbursement this Period 2301.94	
City CHAGRIN FALLS	State OH	Zip Code 44023	Transaction ID : SB17.30825	
Purpose of Disbursement DATABASE SOFTWARE		001	Category/ Type	
Candidate Name				
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).....	5444.66
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 Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. INKSTAR, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2015
Mailing Address 2243 DARLINGTON RD		Amount of Each Disbursement this Period 427.18 Transaction ID : SB17.30826
City BEAVER FALLS State PA Zip Code 15010	Purpose of Disbursement PRINTING Category/Type 001	
Candidate Name	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. MR. CHARLES LEYH		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2015
Mailing Address 35 BELAIRE DRIVE		Amount of Each Disbursement this Period 876.41 Transaction ID : SB17.31243
City DELMONT State PA Zip Code 15626	Purpose of Disbursement IN-KIND: EVENT CATERING Category/Type	
Candidate Name	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. MR. CHARLES LEYH		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2015
Mailing Address 35 BELAIRE DRIVE		Amount of Each Disbursement this Period 1773.59 Transaction ID : SB17.31245
City DELMONT State PA Zip Code 15626	Purpose of Disbursement IN-KIND:EVENT TICKETS Category/Type	
Candidate Name	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).....	3077.18
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 Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MARQUIS STRATEGIES			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015	
Mailing Address PO BOX 262			Amount of Each Disbursement this Period 5831.20	
City BEAVER	State PA	Zip Code 15009	Transaction ID : SB17.30800	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001		
Candidate Name				
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. MARQUIS STRATEGIES			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2015	
Mailing Address PO BOX 262			Amount of Each Disbursement this Period 9850.92	
City BEAVER	State PA	Zip Code 15009	Transaction ID : SB17.31019	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001		
Candidate Name				
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. MARQUIS STRATEGIES			Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2015	
Mailing Address PO BOX 262			Amount of Each Disbursement this Period 4415.31	
City BEAVER	State PA	Zip Code 15009	Transaction ID : SB17.31020	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type 001		
Candidate Name				
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).....	20097.43
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 Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MARQUIS STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address PO BOX 262		Amount of Each Disbursement this Period 7534.80
City BEAVER	State PA	
Zip Code 15009	Purpose of Disbursement FUNDRAISING CONSULTING	Transaction ID : SB17.31202
Candidate Name	001 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. MIKE TURZAI LEADERSHIP FUND		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 126 HILLVUE LANE, FIRST FLOOR		Amount of Each Disbursement this Period 1000.00
City PITTSBURGH	State PA	
Zip Code 15237	Purpose of Disbursement SPONSORSHIP	Transaction ID : SB17.31043
Candidate Name	001 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. MY FAX SERVICE		Date of Disbursement M M / D D / Y Y Y Y 10 / 13 / 2015
Mailing Address 6922 HOLLYWOOD BLVD.		Amount of Each Disbursement this Period 20.00
City HOLLYWOOD	State CA	
Zip Code 90028	Purpose of Disbursement TELEPHONE	Transaction ID : SB17.30834
Candidate Name	001 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).....	8554.80
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 Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MY FAX SERVICE			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2015
Mailing Address 6922 HOLLYWOOD BLVD.			Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.31267
City HOLLYWOOD	State CA	Zip Code 90028	
Purpose of Disbursement TELEPHONE		Category/ Type 001	
Candidate Name			
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. MY FAX SERVICE			Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2015
Mailing Address 6922 HOLLYWOOD BLVD.			Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.31208
City HOLLYWOOD	State CA	Zip Code 90028	
Purpose of Disbursement TELEPHONE		Category/ Type 001	
Candidate Name			
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. MR. MARK PASQUERILLA			Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2015
Mailing Address 945 MENOHER BLVD.			Amount of Each Disbursement this Period 1578.90 Transaction ID : SB17.31253
City JOHNSTOWN	State PA	Zip Code 15905	
Purpose of Disbursement IN-KIND:EVENT CATERING		Category/ Type	
Candidate Name			
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).....	1618.90
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 Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PENNSYLVANIA AMERICAN LEGION			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2015
Mailing Address 709 HOPE ST			Amount of Each Disbursement this Period 320.00 Transaction ID : SB17.31205
City PITTSBURGH	State PA	Zip Code 15220	
Purpose of Disbursement ADVERTISING	Candidate Name		Category/ Type 001
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. PNC BANK			Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address PO BOX 609			Amount of Each Disbursement this Period 30.50 Transaction ID : SB17.30711
City PITTSBURGH	State PA	Zip Code 15230	
Purpose of Disbursement BANK FEES	Candidate Name		Category/ Type 001
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. PNC BANK			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address PO BOX 609			Amount of Each Disbursement this Period 109.95 Transaction ID : SB17.30712
City PITTSBURGH	State PA	Zip Code 15230	
Purpose of Disbursement BANK FEES	Candidate Name		Category/ Type 001
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).....	460.45
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 Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PNC BANK			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015	
Mailing Address PO BOX 609			Amount of Each Disbursement this Period 22.49	
City PITTSBURGH	State PA	Zip Code 15230	Transaction ID : SB17.30713	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001		
Candidate Name				
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. PNC BANK			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015	
Mailing Address PO BOX 609			Amount of Each Disbursement this Period 16.00	
City PITTSBURGH	State PA	Zip Code 15230	Transaction ID : SB17.30714	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001		
Candidate Name				
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. PNC BANK			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015	
Mailing Address PO BOX 609			Amount of Each Disbursement this Period 22.49	
City PITTSBURGH	State PA	Zip Code 15230	Transaction ID : SB17.31264	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001		
Candidate Name				
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).....	60.98
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 Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PNC BANK		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address PO BOX 609		Amount of Each Disbursement this Period 16.00 Transaction ID : SB17.31265
City PITTSBURGH	State PA	
Zip Code 15230	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	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. PNC BANK		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2015
Mailing Address PO BOX 609		Amount of Each Disbursement this Period 30.50 Transaction ID : SB17.31266
City PITTSBURGH	State PA	
Zip Code 15230	Purpose of Disbursement BANK FEES	Category/ Type 001
Candidate Name	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. PNC BANK		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2015
Mailing Address PO BOX 609		Amount of Each Disbursement this Period 42.50 Transaction ID : SB17.31209
City PITTSBURGH	State PA	
Zip Code 15230	Purpose of Disbursement BANK FEES	Category/ Type 001
Candidate Name	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).....	89.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PNC BANK		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address PO BOX 609		Amount of Each Disbursement this Period 22.49
City PITTSBURGH	State PA	
Zip Code 15230	Purpose of Disbursement CC TRANSACTION FEES	Transaction ID : SB17.31210
Candidate Name	001 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. PNC BANK		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address PO BOX 609		Amount of Each Disbursement this Period 16.00
City PITTSBURGH	State PA	
Zip Code 15230	Purpose of Disbursement CC TRANSACTION FEES	Transaction ID : SB17.31211
Candidate Name	001 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. PNC BANKCARD		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address PO BOX 856177		Amount of Each Disbursement this Period 1151.88
City LOUISVILLE	State KY	
Zip Code 40285	Purpose of Disbursement SEE MEMO ENTRIES	Transaction ID : SB17.30715
Candidate Name	001 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).....	1190.37
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 Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAPITAL GRILLE		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 601 PENNSYLVANIA AVE NW		Amount of Each Disbursement this Period 220.85
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement MEETING EXPENSE 001 Category/Type	
Candidate Name		Transaction ID : SB17.31214 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 300 FIRST STREET, SE		Amount of Each Disbursement this Period 416.17
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement MEETING EXPENSE 001 Category/Type	
Candidate Name		Transaction ID : SB17.31215 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. HOLIDAY INN		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 4859 MCKNIGHT ROAD		Amount of Each Disbursement this Period 94.44
City PITTSBURGH State PA Zip Code 15237	Purpose of Disbursement LODGING 001 Category/Type	
Candidate Name		Transaction ID : SB17.31216 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional)	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address PO BOX 4002		Amount of Each Disbursement this Period 50.08
City ACWORTH	State GA	
Zip Code 30101	Purpose of Disbursement TELEPHONE	Transaction ID : SB17.31217
Candidate Name	001 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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. CONSTANT CONTACT		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 1601 TRAPELO ROAD		Amount of Each Disbursement this Period 42.80
City WALTHAM	State MA	
Zip Code 02451	Purpose of Disbursement EMAIL SERVICES	Transaction ID : SB17.31220
Candidate Name	001 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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. GIANT EAGLE		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2015
Mailing Address 5550 CENTRE AVENUE		Amount of Each Disbursement this Period 57.43
City PITTSBURGH	State PA	
Zip Code 15219	Purpose of Disbursement FUEL	Transaction ID : SB17.31221
Candidate Name	001 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)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PNC BANKCARD		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address PO BOX 856177		Amount of Each Disbursement this Period 1695.92
City LOUISVILLE State KY Zip Code 40285	Purpose of Disbursement SEE MEMO ENTRIES 001 Category/Type	
Candidate Name		Transaction ID : SB17.31212
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. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 2500 VICTORY AVE		Amount of Each Disbursement this Period 811.60
City DALLAS State TX Zip Code 75219	Purpose of Disbursement AIRFARE 001 Category/Type	
Candidate Name		Transaction ID : SB17.31222 [MEMO ITEM]
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. US POSTMASTER		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015
Mailing Address 521 THORN STREET		Amount of Each Disbursement this Period 49.00
City SEWICKLEY State PA Zip Code 15143	Purpose of Disbursement POSTAGE 001 Category/Type	
Candidate Name		Transaction ID : SB17.31223 [MEMO ITEM]
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).....	1695.92
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 Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015	
Mailing Address 300 FIRST STREET, SE			Amount of Each Disbursement this Period 617.65	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.31225	
Purpose of Disbursement MEETING EXPENSE		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
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. VERIZON			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015	
Mailing Address PO BOX 4002			Amount of Each Disbursement this Period 50.08	
City ACWORTH	State GA	Zip Code 30101	Transaction ID : SB17.31226	
Purpose of Disbursement TELEPHONE		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
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. CONSTANT CONTACT			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2015	
Mailing Address 1601 TRAPELO ROAD			Amount of Each Disbursement this Period 42.80	
City WALTHAM	State MA	Zip Code 02451	Transaction ID : SB17.31227	
Purpose of Disbursement EMAIL SERVICES		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
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).....	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PNC BANKCARD		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address PO BOX 856177		Amount of Each Disbursement this Period 3630.77
City LOUISVILLE State KY Zip Code 40285	Purpose of Disbursement SEE MEMO ENTRIES 001 Category/Type	
Candidate Name		Transaction ID : SB17.31213
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. PRICELINE HOTELS		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 800 CONNECTICUT AVE		Amount of Each Disbursement this Period 1039.80
City NORWALK State CT Zip Code 06854	Purpose of Disbursement LODGING 001 Category/Type	
Candidate Name		Transaction ID : SB17.31228 [MEMO ITEM]
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. AMTRAK		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address PO BOX 14368		Amount of Each Disbursement this Period 285.00
City PHILADELPHIA State PA Zip Code 19115	Purpose of Disbursement TRAVEL EXPENSE 001 Category/Type	
Candidate Name		Transaction ID : SB17.31229 [MEMO ITEM]
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).....	3630.77
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 Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SOUTHWEST AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address PO BOX 36647-1CR			Amount of Each Disbursement this Period 307.10
City DALLAS	State TX	Zip Code 75235	Transaction ID : SB17.31230 [MEMO ITEM]
Purpose of Disbursement AIRFARE		001 Category/ Type	
Candidate Name			
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. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 300 FIRST STREET, SE			Amount of Each Disbursement this Period 237.47
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.31231 [MEMO ITEM]
Purpose of Disbursement MEETING EXPENSE		001 Category/ Type	
Candidate Name			
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. ALL CITY TAXI			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 2301 CHURCH ST, STE 2			Amount of Each Disbursement this Period 111.27
City PHILADELPHIA	State PA	Zip Code 19124	Transaction ID : SB17.31232 [MEMO ITEM]
Purpose of Disbursement CAB FARES		001 Category/ Type	
Candidate Name			
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).....	0.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 116 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address PO BOX 4002		Amount of Each Disbursement this Period 50.08
City ACWORTH	State GA	
Zip Code 30101	Purpose of Disbursement TELEPHONE	Transaction ID : SB17.31233 [MEMO ITEM]
Candidate Name	001 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. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 2500 VICTORY AVE		Amount of Each Disbursement this Period 109.10
City DALLAS	State TX	
Zip Code 75219	Purpose of Disbursement AIRFARE	Transaction ID : SB17.31234 [MEMO ITEM]
Candidate Name	001 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. CONSTANT CONTACT		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 1601 TRAPELO ROAD		Amount of Each Disbursement this Period 42.80
City WALTHAM	State MA	
Zip Code 02451	Purpose of Disbursement EMAIL SERVICES	Transaction ID : SB17.31235 [MEMO ITEM]
Candidate Name	001 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).....	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 126			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PITTSBURGH LEADERSHIP FOUNDATION			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 16 SILVER LAKE DR			Amount of Each Disbursement this Period 350.00
City PITTSBURGH	State PA	Zip Code 15206	Transaction ID : SB17.31236 [MEMO ITEM]
Purpose of Disbursement SPONSORSHIP		001 Category/ Type	
Candidate Name			
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. KINGS FAMILY RESTAURANT			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 105 VIP DRIVE			Amount of Each Disbursement this Period 210.88
City WEXFORD	State PA	Zip Code 15090	Transaction ID : SB17.31237 [MEMO ITEM]
Purpose of Disbursement MEETING EXPENSE		001 Category/ Type	
Candidate Name			
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. US POSTMASTER			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 521 THORN STREET			Amount of Each Disbursement this Period 49.00
City SEWICKLEY	State PA	Zip Code 15143	Transaction ID : SB17.31238 [MEMO ITEM]
Purpose of Disbursement POSTAGE		001 Category/ Type	
Candidate Name			
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).....	0.00
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 Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DELTA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 1030 DELTA BLVD		Amount of Each Disbursement this Period 356.10
City ATLANTA	State GA Zip Code 30354	
Purpose of Disbursement AIRFARE	Category/Type 001	Transaction ID : SB17.31239 [MEMO ITEM]
Candidate Name		
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. REPUBLIC STRATEGIES, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 3502 HALCYON DR		Amount of Each Disbursement this Period 6503.02
City ALEXANDRIA	State VA Zip Code 22305	
Purpose of Disbursement FUNDRAISING CONSULTING	Category/Type 001	Transaction ID : SB17.30801
Candidate Name		
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. REPUBLIC STRATEGIES, LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2015
Mailing Address 3502 HALCYON DR		Amount of Each Disbursement this Period 3958.44
City ALEXANDRIA	State VA Zip Code 22305	
Purpose of Disbursement FUNDRAISING CONSULTING	Category/Type 001	Transaction ID : SB17.30803
Candidate Name		
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).....	10461.46
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 Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KEITH ROTHFUS		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address PO BOX 435		Amount of Each Disbursement this Period 611.65 Transaction ID : SB17.31262
City SEWICKLEY	State PA	
Zip Code 15143	Purpose of Disbursement Q3 2015 EXPENSE REIMBURSEMENT	Category/ Type 001
Candidate Name KEITH ROTHFUS	Office Sought: <input checked="" 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: PA District: 12	

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address 300 FIRST STREET, SE		Amount of Each Disbursement this Period 326.83 Transaction ID : SB17.31270 [MEMO ITEM]
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement MEETING EXPENSE	Category/ Type 001
Candidate Name	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. DUQUESNE CLUB		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015
Mailing Address PO BOX 387		Amount of Each Disbursement this Period 284.82 Transaction ID : SB17.31271 [MEMO ITEM]
City PITTSBURGH	State PA	
Zip Code 15230	Purpose of Disbursement MEETING EXPENSE	Category/ Type 001
Candidate Name	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).....	611.65
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 Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 126		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2015
Mailing Address 3180 18TH STREET		Amount of Each Disbursement this Period 213.60 Transaction ID : SB17.30808
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2015
Mailing Address 3180 18TH STREET		Amount of Each Disbursement this Period 213.60 Transaction ID : SB17.30809
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2015
Mailing Address 3180 18TH STREET		Amount of Each Disbursement this Period 79.30 Transaction ID : SB17.30810
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	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).....	506.50
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 Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2015
Mailing Address 3180 18TH STREET		Amount of Each Disbursement this Period 106.95 Transaction ID : SB17.30811
City SAN FRANCISCO	State CA	
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name	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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2015
Mailing Address 3180 18TH STREET		Amount of Each Disbursement this Period 8.04 Transaction ID : SB17.30812
City SAN FRANCISCO	State CA	
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name	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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2015
Mailing Address 3180 18TH STREET		Amount of Each Disbursement this Period 8.04 Transaction ID : SB17.30962
City SAN FRANCISCO	State CA	
Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001	
Candidate Name	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).....	123.03
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 Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 126			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STRIPE			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2015		
Mailing Address 3180 18TH STREET			Amount of Each Disbursement this Period 8.04		
City SAN FRANCISCO	State CA	Zip Code 94110	Transaction ID : SB17.31140		
Purpose of Disbursement CC TRANSACTION FEES		001 Category/ Type			
Candidate Name					
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. STRIVE4XLNTS, INC.			Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2015		
Mailing Address 2312 BROADHEAD RD			Amount of Each Disbursement this Period 500.00		
City ALIQUIPPA	State PA	Zip Code 15001	Transaction ID : SB17.30828		
Purpose of Disbursement SPONSORSHIP		001 Category/ Type			
Candidate Name					
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. THE UNION LEAGUE OF PHILADELPHIA			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2015		
Mailing Address 140 SOUTH BROAD ST			Amount of Each Disbursement this Period 401.76		
City PHILADELPHIA	State PA	Zip Code 19302	Transaction ID : SB17.31025		
Purpose of Disbursement EVENT CATERING		001 Category/ Type			
Candidate Name					
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).....	909.80
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 Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 126	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US POSTMASTER		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2015
Mailing Address 521 THORN STREET		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.31206
City SEWICKLEY State PA Zip Code 15143	Purpose of Disbursement POSTAGE Candidate Name Category/Type 001	
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. WESTERN PA ALL SERVICE ACADEMIES BALL, INC.		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2015
Mailing Address 144 VAUGHN ST		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.30823
City JOHNSTON State PA Zip Code 15906	Purpose of Disbursement SPONSORSHIP Candidate Name Category/Type 001	
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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement 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).....	600.00
TOTAL This Period (last page this line number only).....	63817.16

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 126
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BEAVER COUNTY REPUBLICAN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2015
Mailing Address 426 ADMAS ST. #2		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.31201
City ROCHESTER State PA Zip Code 15074	Purpose of Disbursement CONTRIBUTION (STATE/LOCAL COMMITTEE) Category/Type 011	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CITIZENS FOR JIM CHRISTIANA		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 592A 3RD ST		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.31022
City BEAVER State PA Zip Code 15009	Purpose of Disbursement CONTRIBUTION (STATE/LOCAL COMMITTEE) Category/Type 011	
Candidate Name CITIZENS FOR JIM CHRISTIANA	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. NATIONAL REPUBLICAN CONGRESSIONAL COMM.		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2015
Mailing Address 320 FIRST STREET SE		Amount of Each Disbursement this Period 6300.00 Transaction ID : SB21.31207
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement CONTRIBUTION Category/Type 011	
Candidate Name NATIONAL REPUBLICAN CONGRESSIONAL COMM.	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8300.00
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 Page	FOR LINE NUMBER: (check only one)		PAGE 125 OF 126	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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) A. VOGEL FOR SENATE COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2015
Mailing Address 489 GLEN EDEN RD.		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB21.31023
City ROCHESTER	State PA	
Zip Code 15074	Purpose of Disbursement CONTRIBUTION (STATE/LOCAL COMMITTEE)	Category/ Type 011
Candidate Name VOGEL FOR SENATE COMMITTEE	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. WEDIG		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2015
Mailing Address 21 TOWNE CENTER DRIVE		Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.31203
City LEECHBURG	State PA	
Zip Code 15656	Purpose of Disbursement DONATION	Category/ Type 012
Candidate Name	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Disbursement For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	9800.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

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): 2014 POST GEN SHIPPING, MEETING EXPENSE, PARKING
Mailing Address PO BOX 435		
City	State	Zip Code
SEWICKLEY	PA	15143

Outstanding Balance Beginning This Period	Transaction ID : SD10.31	
<input type="text" value="378.57"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="378.57"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor KEITH ROTHFUS		Nature of Debt (Purpose): POST GEN MEETING EXPENSES, POSTAGE, SHIPPING, AIRFARE
Mailing Address PO BOX 435		
City	State	Zip Code
SEWICKLEY	PA	15143

Outstanding Balance Beginning This Period	Transaction ID : SD10.32	
<input type="text" value="1159.59"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1159.59"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor KEITH ROTHFUS		Nature of Debt (Purpose): Q4 2015 MEETING EXPENSES
Mailing Address PO BOX 435		
City	State	Zip Code
SEWICKLEY	PA	15143

Outstanding Balance Beginning This Period	Transaction ID : SD10.33	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="593.42"/>	<input type="text" value="0.00"/>	<input type="text" value="593.42"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="2131.58"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="2131.58"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="2131.58"/>