



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**FIRST COMMONWEALTH FINANCIAL CORPORATION PAC**

Report Covering the Period: From: 

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	5		2	0	1	4

 To: 

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

MULTI-COUNTY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1, <table border="0"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>4</td></tr></table>	Y	Y	Y	Y	2	0	1	4	5,881.07	5,881.07
Y	Y	Y	Y							
2	0	1	4							
(b) Cash on Hand at Beginning of Reporting Period.....	2,597.26									
(c) Total Receipts (from Line 19) .....	3,300.00	3,816.19								
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	5,897.26	9,697.26								
7. Total Disbursements (from Line 31).....	5,000.00	8,800.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	897.26	897.26								
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) .....	0.00									

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**FIRST COMMONWEALTH FINANCIAL CORPORATION PAC**

Report Covering the Period: From:

1 1 / 2 5 / 2 0 1 4

To:

1 2 / 3 1 / 2 0 1 4

**I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

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

3,300.00

3,516.00

(ii) Unitemized.....

0.00

300.19

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

3,300.00

3,816.19

(b) Political Party Committees.....

0.00

0.00

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

0.00

0.00

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

3,300.00

3,816.19

12. Transfers From Affiliated/Other Party Committees.....

0.00

0.00

13. All Loans Received.....

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0.00

0.00

17. Other Federal Receipts (Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5).....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

3,300.00

3,816.19

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

3,300.00

3,816.19

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0 00	0 00
(ii) Non-Federal Share .....	0 00	0 00
(b) Other Federal Operating Expenditures .....	0 00	0 00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0 00	0 00
22. Transfers to Affiliated/Other Party Committees .....	0 00	0 00
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	0 00	0 00
24. Independent Expenditures (use Schedule E) .....	0 00	0 00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F) .....	0 00	0 00
26. Loan Repayments Made .....	0 00	0 00
27. Loans Made .....	0 00	0 00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0 00	0 00
(b) Political Party Committees .....	0 00	0 00
(c) Other Political Committees (such as PACs) .....	0 00	0 00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0 00	0 00
29. Other Disbursements .....	5,000.00	8,800.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0 00	0 00
(ii) "Levin" Share .....	0 00	0 00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0 00	0 00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0 00	0 00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5,000.00	8,800.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	5,000.00	8,800.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	3,300.00	3,816.19
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3,300.00	3,816.19
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

-NUTWT- : COLWT- : WEDWT-

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

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

FOR LINE NUMBER: PAGE 1 OF 4

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)

**FIRST COMMONWEALTH FINANCIAL CORPORATION PAC**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Ganung, Mark A.</b>		Date of Receipt
Mailing Address P.O. Box 400		M M / D D / Y Y Y Y
City State Zip Code Indiana PA 15701-0000		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <b>C</b>		0.00
Name of Employer Occupation First Commonwealth Bank SVP, Wealth Sales Executive		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		216.00
<b>B.</b> Full Name (Last, First, Middle Initial) <b>Osikowicz, Leslie</b>		Date of Receipt
Mailing Address P.O. Box 400		M M / D D / Y Y Y Y
City State Zip Code Indiana PA 15701-0000		1 2 / 1 8 / 2 0 1 4
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		200.00
Name of Employer Occupation First Commonwealth Bank Assit Controller-Operations VP		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		200.00
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Greenfield, David W.</b>		Date of Receipt
Mailing Address P.O. Box 400		M M / D D / Y Y Y Y
City State Zip Code Indiana PA 15701-0000		1 2 / 1 1 / 2 0 1 4
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
		300.00
Name of Employer Occupation First Commonwealth Financial Corp Chairman-Board of Directors		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		300.00
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶		500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶		

COUNTDOWN

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

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

FOR LINE NUMBER: PAGE 2 OF 4  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**FIRST COMMONWEALTH FINANCIAL CORPORATION PAC**

A. Full Name (Last, First, Middle Initial) <b>Fairman, Beverly</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 1 4
Mailing Address PO Box 400		Amount of Each Receipt this Period  500.00
City Indiana	State Zip Code PA 15701	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼  500.00
Name of Employer First Commonwealth Bank Board of Directors	Occupation Member	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) <b>Riggle, Carri L.</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 1 4
Mailing Address PO Box 400		Amount of Each Receipt this Period  350.00
City Indiana	State Zip Code PA 15701	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼  350.00
Name of Employer First Commonwealth Bank	Occupation EVP- Human Resources Manager	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) <b>Lopushansky, Mark E.</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 1 4
Mailing Address PO Box 400		Amount of Each Receipt this Period  200.00
City Indiana	State Zip Code PA 15701	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼  200.00
Name of Employer First Commonwealth Bank	Occupation Chief Treasury Officer-SVP	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	1,050.00
TOTAL This Period (last page this line number only).....▶	

1-800-4-A-MEND

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 3 OF 4	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)  
**FIRST COMMONWEALTH FINANCIAL CORPORATION PAC**

A. Full Name (Last, First, Middle Initial) <b>Glass, Johnston A.</b>		Date of Receipt
Mailing Address PO Box 400		M M / D D / Y Y Y Y 1 2 / 1 8 / 2 0 1 4
City State Zip Code Indiana PA 15701		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		, 300.00
Name of Employer FCFC Board of Directors	Occupation Member	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  , 300.00	

B. Full Name (Last, First, Middle Initial) <b>Ciambotti, Teresa M.</b>		Date of Receipt
Mailing Address PO Box 400		M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 1 4
City State Zip Code Indiana PA 15701		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		, 300.00
Name of Employer FCB	Occupation Controller-SVP	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  , 300.00	

C. Full Name (Last, First, Middle Initial) <b>Emmerich, I. Robert</b>		Date of Receipt
Mailing Address PO Box 400		M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 1 4
City State Zip Code Indiana PA 15701		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C		, 350.00
Name of Employer FCB	Occupation Chief Credit Officer	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼  , 350.00	

SUBTOTAL of Receipts This Page (optional).....	, 950.00
TOTAL This Period (last page this line number only).....	

COMMITTEE REPORT



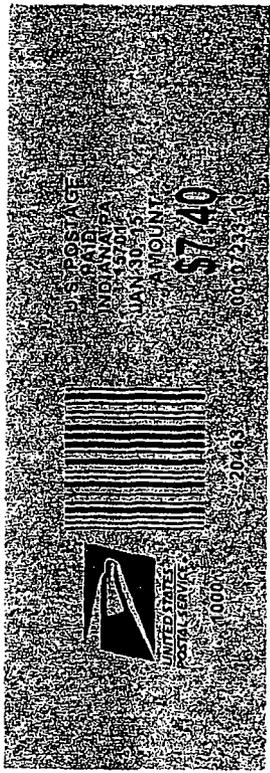


**FIRST  
COMMONWEALTH.**

First Commonwealth Financial Corporation  
Old Courthouse Square, 22 North Sixth Street, P.O. Box 400  
Indiana, PA 15701-0400



7009 0620 0000 6674 8188



FEDERAL Election Commission  
999 East Street N.W.  
WASHINGTON, DC 20463

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<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked



PREPARER

(8/2013)

2/3/15

DATE PREPARED

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