

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
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Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5

P R E I T - R u b i n , I n c . P o l i t i c a l A c t i o n C o m m i t t e e

ADDRESS (number and street) 200 South Broad St.
3rd Floor
Philadelphia PA 19102

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** ▼ **CITY** ▲ **STATE** ▲ **ZIP CODE** ▲
C00457606

3. IS THIS REPORT NEW (N) OR AMENDED (A)

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)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

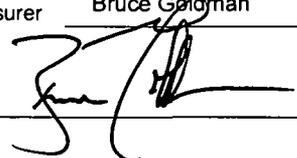
- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
 Election on M M / D D / Y Y Y Y Y Y in the State of

(d) 30-Day **POST-Election** Report for the: General (30G) Runoff (30R) Special (30S)
 Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 0 7 / 0 1 / 2 0 1 5 through 1 2 / 3 1 / 2 0 1 5

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 Bruce Goldman
 Signature of Treasurer  Date 0 1 / 2 8 / 2 0 1 5

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only									
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FEC FORM 3X
Rev. 12/2004

NON-PROFIT ORGANIZATION

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PREIT- Rubin, Inc. Political Action Committee

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text"/>	<input type="text" value="775000"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="1186500"/>	<input type="text"/>
(c) Total Receipts (from Line 19).....	<input type="text" value="22500"/>	<input type="text" value="934000"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="1209000"/>	<input type="text" value="1709000"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1041274"/>	<input type="text" value="1541274"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="167726"/>	<input type="text" value="167726"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="00"/>	<input type="text"/>
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="00"/>	<input type="text"/>

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

PREIT - Rubin, Inc. Political Action Committee

Report Covering the Period: From:

M	M	M
0	7	

 /

D	D	D
0	1	

 /

Y	Y	Y	Y	Y	Y
2	0	1	5		

 To:

M	M	M
1	2	

 /

D	D	D
3	1	

 /

Y	Y	Y	Y	Y	Y
2	0	1	5		

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).....	0 0	2 9 5 0 0 0
(ii) Unitemized.....	2 2 5 0 0	6 3 9 0 0 0
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2 2 5 0 0	9 3 4 0 0 0
(b) Political Party Committees.....	0 0	0 0
(c) Other Political Committees (such as PACs).....	0 0	0 0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	2 2 5 0 0	9 3 4 0 0 0
12. Transfers From Affiliated/Other Party Committees.....	0 0	0 0
13. All Loans Received.....	0 0	0 0
14. Loan Repayments Received.....	0 0	0 0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0 0	0 0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0 0	0 0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0 0	0 0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0 0	0 0
(b) Levin Funds (from Schedule H5).....	0 0	0 0
(c) Total Transfers (add 18(a) and 18(b))..	0 0	0 0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	2 2 5 0 0	9 3 4 0 0 0
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	2 2 5 0 0	9 3 4 0 0 0

NON-FEDERAL AND LEVIN FUNDS

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 0	0 0
(ii) Non-Federal Share.....	0 0	0 0
(b) Other Federal Operating Expenditures	1 2 7 4	1 2 7 4
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1 2 7 4	1 2 7 4
22. Transfers to Affiliated/Other Party Committees.....	0 0	0 0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1 0 4 0 0 0 0	1 5 4 0 0 0 0
24. Independent Expenditures (use Schedule E)	0 0	0 0
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0 0	0 0
26. Loan Repayments Made.....	0 0	0 0
27. Loans Made.....	0 0	0 0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0 0	0 0
(b) Political Party Committees	0 0	0 0
(c) Other Political Committees (such as PACs).....	0 0	0 0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0 0	0 0
29. Other Disbursements	0 0	0 0
30. Federal Election Activity (52 U.S.C. § 30101(2C))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0 0	0 0
(ii) "Levin" Share.....	0 0	0 0
(b) Federal Election Activity Paid Entirely With Federal Funds	0 0	0 0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....	0 0	0 0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1 0 4 1 2 7 4	1 5 4 1 2 7 4
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1 0 4 1 2 7 4	1 5 4 1 2 7 4

DETAILED SUMMARY PAGE
of Disbursements

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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)	2 2 5 0 0	9 3 4 0 0 0
34. Total Contribution Refunds (from Line 28(d))	0 0	0 0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2 2 5 0 0	9 3 4 0 0 0
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1 2 7 4	1 2 7 4
37. Offsets to Operating Expenditures (from Line 15, page 3)	0 0	0 0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1 2 7 4	1 2 7 4

NON-FEDERAL CONTRIBUTIONS

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

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

FOR LINE NUMBER: PAGE 6 OF 8
(check only one)

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

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)

A.

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

B.

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ▶ 0 0

TOTAL This Period (last page this line number only) ▶ 0 0

NON-PROFIT CORPORATION

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 7 OF 8				
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
PREIT - Rubin, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) Katie McGinty for Senate		Date of Disbursement 09/30/2015
Mailing Address P.O. Box 22447		Amount of Each Disbursement this Period 5,000.00
City Philadelphia	State PA	
Purpose of Disbursement PAC Contribution		Category/ Type 0 1 1
Candidate Name Katie McGinty		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) PAC Contribution	
State: PA	District:	

Full Name (Last, First, Middle Initial) Bob Brady for Congress		Date of Disbursement 09/17/2015
Mailing Address 12518 Chilton Road		Amount of Each Disbursement this Period 1,000.00
City Philadelphia	State PA	
Purpose of Disbursement PAC Contribution		Category/ Type 0 1 1
Candidate Name Bob Brady		
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 checked="" type="checkbox"/> Other (specify) PAC Contribution	
State: PA	District: 1st	

Full Name (Last, First, Middle Initial) Donald Norcross for Congress		Date of Disbursement 09/11/2015
Mailing Address P.O. Box 160		Amount of Each Disbursement this Period 1,500.00
City Collingswood	State NJ	
Purpose of Disbursement PAC Contribution		Category/ Type 0 1 1
Candidate Name Donald Norcross		
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 checked="" type="checkbox"/> Other (specify) PAC Contribution	
State: NJ	District: 1st	

SUBTOTAL of Disbursements This Page (optional).....▶	7,500.00
TOTAL This Period (last page this line number only).....▶	7,500.00

20150911 10:00:00 AM

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 8			
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PREIT - Rubin, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Bob Casey for Senate		Date of Disbursement 1 2 / 3 0 / 2 0 1 5	
Mailing Address P.O. Box 58746			
City Philadelphia	State PA	Zip Code 19102	
Purpose of Disbursement PAC Contribution		0 1 1	Amount of Each Disbursement this Period
Candidate Name Bob Casey		Category/ Type	2 9 0 0 0 0
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 checked="" type="checkbox"/> Other (specify) ▼ PAC Contribution		
State: PA	District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement			Amount of Each Disbursement this Period
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement			Amount of Each Disbursement this Period
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).....▶	2 9 0 0 0 0
TOTAL This Period (last page this line number only).....▶	2 9 0 0 0 0

NON-FUNCTIONAL DOCUMENT

ORIGIN ID: MUVA (215) 875-0420
MARGARET SMALL
PREIT
200 SOUTH BROAD STREET
3RD FLOOR
PHILADELPHIA, PA 19102
UNITED STATES US

SHIP DATE: 28 JAN 16
ACTWGT: 1.00 LB
CAD: 8894593/INET3730

BILL SENDER

TO

FEDERAL ELECTION COMMISSION
999 E ST NW
REPORTS ANALYSIS DIVISION
WASHINGTON DC 20463

(215) 875-0420

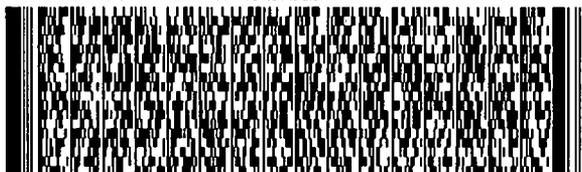
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PO:

DEPT:

540J10E617ZTF



FedEx Express



J15101804110

FRI - 29 JAN 10:30A
PRIORITY OVERNIGHT

TRK# 7755 2615 0167
0201

EP RDVA

20463
DC-US IAD



FedEx carbon
envelope shipped

FZ

RT 677

6 10:30

0167
01:29

earthsmart

Align top of FedEx Express shipping label

Press here to seal. Press here to seal. Press here to seal.

Sender: You must seal flap before shipping. AH 10: 23

2016-01-29 03:00:42:870

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

NOT FOR POSTAL USE

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<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 checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>fed Ex</i>	Shipping Date <i>1/28/16</i>
	Next Business Day Delivery <input checked="" 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

1/29/16
 DATE PREPARED