

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 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
PA 12

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

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

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

5. Covering Period M M / D D / Y Y Y Y 01 / 01 / 2015 through M M / D D / Y Y Y Y 03 / 31 / 2015

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

Type or Print Name of Treasurer WILLIAM HASKINS

Signature of Treasurer WILLIAM HASKINS [Electronically Filed] Date M M / D D / Y Y Y Y 04 / 15 / 2015

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

SUMMARY PAGE
of Receipts and Disbursements

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))....	176250.00	181553.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	176250.00	181453.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	101951.50	131485.07
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1078.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	101951.50	130407.07
8. Cash on Hand at Close of Reporting Period (from Line 27).....	601960.60	
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).....	1538.16	

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: / / To: / /

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).....	148550.00	149550.00
(ii) Unitemized.....	700.00	1003.00
(iii) TOTAL of contributions from individuals ▶	149250.00	150553.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	27000.00	31000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	176250.00	181553.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
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.).....		
	0.00	1078.00
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)..... ▶	176250.00	182631.00

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	101951.50	131485.07
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	100.00
(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 20(a), (b), and (c)).....	0.00	100.00
21. OTHER DISBURSEMENTS	1000.00	3000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	102951.50	134585.07

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	528662.10
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	176250.00
25. SUBTOTAL (add Line 23 and Line 24).....	704912.10
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	102951.50
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	601960.60

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

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

FOR LINE NUMBER: PAGE 5 OF 67
(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 ADAMS

Mailing Address **PO BOX 1**

City **PORTERSVILLE** State **PA** Zip Code **16051**

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

Name of Employer **ADAMS MANUFACTURING** Occupation **MANUFACTURER**

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
02 / 18 / 2015

Transaction ID : SA11AI.29870

Amount of Each Receipt this Period
500.00

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

Mailing Address **73 LEBANON HILLS DRIVE**

City **PITTSBURGH** State **PA** Zip Code **15228**

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

Name of Employer **TRIANGLE TECH GROUP** Occupation **CEO**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 18 / 2015

Transaction ID : SA11AI.29851

Amount of Each Receipt this Period
2600.00

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

Mailing Address **148 IRWIN AVENUE**

City **PITTSBURGH** State **PA** Zip Code **15202**

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

Name of Employer **ALLEGHENY COLLEGE** Occupation **COLLEGE PROFESSOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11AI.29976

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

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 6 OF 67
	<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. JAMES P. BALET

Mailing Address 525 PINE RD

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
PITTSBURGH UNIVERSAL 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
 03 / 16 / 2015

Transaction ID : SA11AI.29942

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ALFRED BARBOUR

Mailing Address 155 DARLINGTON LANE

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
COMCAST EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 20 / 2015

Transaction ID : SA11AI.29898

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
MRS. MARY BARBOUR

Mailing Address 155 DARLINGTON 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
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 20 / 2015

Transaction ID : SA11AI.29899

Amount of Each Receipt this Period
 2600.00

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

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

7900.00

**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 67
	<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. DAVID E BARENSFELD

Mailing Address **BOX 889**

City **ELLWOOD CITY** State **PA** Zip Code **16117**

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

Name of Employer **ELLWOOD GROUP** Occupation **EXECUTIVE**

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
01 / 28 / 2015

Transaction ID : SA11AI.29831

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID E BARENSFELD

Mailing Address **BOX 889**

City **ELLWOOD CITY** State **PA** Zip Code **16117**

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

Name of Employer **ELLWOOD GROUP** Occupation **EXECUTIVE**

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
01 / 28 / 2015

Transaction ID : SA11AI.29832

Amount of Each Receipt this Period
2600.00

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

Mailing Address **581 CHAPEL DRIVE**

City **ELLWOOD CITY** State **PA** Zip Code **16117**

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

Name of Employer **ELLWOOD GROUP** Occupation **CHAIRMAN**

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
02 / 18 / 2015

Transaction ID : SA11AI.29842

Amount of Each Receipt this Period
2700.00
 CONTRIBUTION

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

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

7900.00

**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 8 OF 67
	<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 BARENSFELD

Mailing Address 581 CHAPEL DRIVE

City State Zip Code
ELLWOOD CITY PA 16117

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

Name of Employer Occupation
ELLWOOD GROUP CHAIRMAN

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
 02 / 18 / 2015

Transaction ID : SA11AI.30009

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
MRS. WENDY BARENSFELD

Mailing Address 257 PETRIE ROAD

City State Zip Code
NEW BRIGHTON PA 15066

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
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2015

Transaction ID : SA11AI.29833

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
MRS. WENDY BARENSFELD

Mailing Address 257 PETRIE ROAD

City State Zip Code
NEW BRIGHTON PA 15066

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
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 28 / 2015

Transaction ID : SA11AI.29834

Amount of Each Receipt this Period
2600.00

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

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

7700.00

**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 67
(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. G. NICHOLAS BECKWITH III

Mailing Address 1 LITTLE LANE

City State Zip Code
PITTSBURGH PA 15215

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

Name of Employer Occupation
ARCH STREET MANAGEMENT, LLC EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : SA11AI.29840

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 814 OXFORD COURT

City State Zip Code
GIBSONIA PA 15044

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

Name of Employer Occupation
DEFOREST KOSCELNIK 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
 02 / 18 / 2015

Transaction ID : SA11AI.29858

Amount of Each Receipt this Period
 1000.00

C. 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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : SA11AI.29849

Amount of Each Receipt this Period
 2600.00

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

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

4600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 67
	<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. BITZER III

Mailing Address 210 CHATHAM LANE

City State Zip Code
PITTSBURGH PA 15238

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

Name of Employer Occupation
ABARTA INC. 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 Y Y
03 / 06 / 2015

Transaction ID : SA11AI.29914

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. GEORGIE BLACKBURN

Mailing Address 1100 CONSTITUTION DR.

City State Zip Code
TARENTUM PA 15084

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

Name of Employer Occupation
BLACKBURN'S PHYSICIANS PHARMACY VP GOVERNMENT RELATIONS

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
02 / 05 / 2015

Transaction ID : SA11AI.29838

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. EDWARD M. BOCZAR

Mailing Address 600 MAIN STREET

City State Zip Code
PITTSBURGH PA 15215

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

Name of Employer Occupation
AMGARD 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
02 / 18 / 2015

Transaction ID : SA11AI.29871

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 11 OF 67
(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)
MRS. JEAN R. 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
HOWARD HANNA REALTOR

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
 03 / 06 / 2015

Transaction ID : SA11AI.29907

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 3 BEAVER STREET

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
ESMARK INC. CHAIRMAN

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : SA11AI.29852

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

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

Mailing Address 510 SHENANGO STOP ROAD

City State Zip Code
NEW CASTLE PA 16101

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

Name of Employer Occupation
BRUCE & MERRILEES MANAGEMENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 06 / 2015

Transaction ID : SA11AI.29913

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

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: PAGE 12 OF 67
(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)
MRS. LISA CAHILL

Mailing Address 134 DUNCAN CIRCLE

City State Zip Code
BEAVER PA 15009

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 Y Y
 03 / 29 / 2015

Transaction ID : SA11AI.29997

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

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

Mailing Address 325 FOX HUNT RD.

City State Zip Code
PITTSBURGH PA 15238

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

Name of Employer Occupation
JENNMAR EXECUTIVE VP

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 Y
 02 / 18 / 2015

Transaction ID : SA11AI.29869

Amount of Each Receipt this Period
 600.00

C. Full Name (Last, First, Middle Initial)
MR. FRANK CALANDRA, JR.

Mailing Address PO BOX 111253

City State Zip Code
PITTSBURGH PA 15238

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

Name of Employer Occupation
JENNMAR CORPORATION 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 Y
 02 / 18 / 2015

Transaction ID : SA11AI.29862

Amount of Each Receipt this Period
 1000.00

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

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

3600.00

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

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

FOR LINE NUMBER: PAGE 13 OF 67
(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. JAY W. CLEVELAND, JR.

Mailing Address 4565 WILLIAM PENN HWY.

City State Zip Code
MURRYSVILLE PA 15668

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

Name of Employer Occupation
CLEVELAND BROTHERS EQUIP CO. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : SA11AI.29846

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
TODD CLOSSIN

Mailing Address 509 WHEATFIELD DR

City State Zip Code
AURORA OH 44202

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

Name of Employer Occupation
WESBANCO 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
 03 / 31 / 2015

Transaction ID : SA11AI.29973

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

Mailing Address 3406 BROWNSVILLE RD.

City State Zip Code
PITTSBURGH PA 15227

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
 03 / 30 / 2015

Transaction ID : SA11AI.29955

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

3600.00

**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 14 OF 67
	<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. SARA CRANSTON

Mailing Address **601 REDGATE ROAD**

City **SEWICKLEY** State **PA** Zip Code **15143**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 16 / 2015

Transaction ID : SA11AI.29937

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. RON F. CROUSHORE

Mailing Address **9401 MCKNIGHT RD.**

City **PITTSBURGH** State **PA** Zip Code **15237**

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

Name of Employer **BERKSHIRE HATHAWAY HOMESERVICES** Occupation **CEO OWNER**

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
03 / 16 / 2015

Transaction ID : SA11AI.29945

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

Mailing Address **VERSA-FAB, INC
270 HUNT VALLEY ROAD**

City **NEW KENSINGTON** State **PA** Zip Code **15668**

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

Name of Employer **VERSA-FAB** Occupation **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
03 / 06 / 2015

Transaction ID : SA11AI.29905

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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 15 OF 67
	<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. BYRON K CUSTER

Mailing Address 295 BEAVER CT.

City JOHNSTOWN State PA Zip Code 15905

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

Name of Employer: WELLS FARGO ADVISORS Occupation: FINANCIAL ADVISOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 03 / 06 / 2015

Transaction ID : SA11AI.29908

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. STEPHAN H. DAKE

Mailing Address 4 DEER SPRING LN.

City PITTSBURGH State PA Zip Code 15238

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

Name of Employer: SARGENT ELECTRIC Occupation: EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 02 / 18 / 2015

Transaction ID : SA11AI.29866

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
MR. RICHARD K. DANDREA

Mailing Address 3149 SCENIC COURT

City ALLISON PARK State PA Zip Code 15101

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

Name of Employer: ECKERT SEAMANS Occupation: ATTORNEY

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 02 / 18 / 2015

Transaction ID : SA11AI.29853

Amount of Each Receipt this Period: 2600.00

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 67
	<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. VINCENT C. DELUZIO

Mailing Address 100 KENYON RD.

City State Zip Code
PITTSBURGH PA 15205

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

Name of Employer Occupation
R & V ASSOCIATES 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
03 / 31 / 2015

Transaction ID : SA11AI.29990

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. CAROLE A. DICLAUDIO

Mailing Address 816 11TH STREET

City State Zip Code
OAKMONT PA 15139

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

Name of Employer Occupation
GILMARY RETREAT CENTER ASSOCIATE

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
03 / 30 / 2015

Transaction ID : SA11AI.29948

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

Mailing Address 90 BETA DRIVE

City State Zip Code
PITTSBURGH PA 15238

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

Name of Employer Occupation
SEQUOIA WASTE SOLUTIONS MANAGER

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
02 / 13 / 2015

Transaction ID : SA11AI.29897

Amount of Each Receipt this Period
500.00

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: (check only one)	PAGE 17 OF 67
	<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. BRIAN DUGGAN

Mailing Address 29 WOODLAND ROAD

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
WOODLAND & WEST LLC FINANCIAL CONSULTANT

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
03 / 26 / 2015

Transaction ID : SA11AI.29993

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. TERRY DUNLAP

Mailing Address 15 SWEET WATER COURT

City State Zip Code
PITTSBURGH PA 15238

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

Name of Employer Occupation
SWEET WATER LLC CONSULTANT

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
03 / 30 / 2015

Transaction ID : SA11AI.29949

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 500 GRANT STREET, 31ST 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
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2015

Transaction ID : SA11AI.29873

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 18 OF 67
	<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. MILTON FINE

Mailing Address 625 LIBERTY AVENUE #3110

City PITTSBURGH	State PA	Zip Code 15222
--------------------	-------------	-------------------

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

Name of Employer FFC CAPITAL	Occupation DEVELOPER
---------------------------------	-------------------------

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
 03 / 06 / 2015

Transaction ID : SA11AI.29910

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 537 NORTH NEVILLE STREET #2B

City PITTSBURGH	State PA	Zip Code 15213
--------------------	-------------	-------------------

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

Name of Employer FEDERATED INVESTORS	Occupation 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
 03 / 06 / 2015

Transaction ID : SA11AI.29909

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. RONALD FRANCIS

Mailing Address 411 WALNUT ROAD

City PITTSBURGH	State PA	Zip Code 15202
--------------------	-------------	-------------------

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

Name of Employer REED SMITH LLP	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
 03 / 31 / 2015

Transaction ID : SA11AI.29974

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 67
	<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. 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
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11AI.29961

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DANIEL A. 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
BOWMAN CONSULTING EXECUTIVE-OIL AND GAS TEAM LEADER

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
02 / 18 / 2015

Transaction ID : SA11AI.29872

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

Mailing Address 408 JEFFERSON AVE

City State Zip Code
GLEN DALE WV 26038

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

Name of Employer Occupation
PHILLIPS, GARDILL, KAISER AND ALTMeyer 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
03 / 16 / 2015

Transaction ID : SA11AI.29938

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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 20 OF 67
	<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. JAMES G. GETZ

Mailing Address 5 MEADOWOOD DRIVE

City State Zip Code
PITTSBURGH PA 15215

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

Name of Employer Occupation
TRISTATE BANK BANKER

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
03 / 30 / 2015

Transaction ID : SA11AI.29969

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

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

Mailing Address 32 QUAKER HOLLOW ROAD

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
GORDON TERMINAL SERVICE CO. EXECUTIVE

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 06 / 2015

Transaction ID : SA11AI.29912

Amount of Each Receipt this Period
2600.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GARY W. GROOM

Mailing Address 608 MAPLE LANE

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
SARGENT ELECTRIC COMPANY COO

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
02 / 18 / 2015

Transaction ID : SA11AI.29857

Amount of Each Receipt this Period
1000.00

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

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

6300.00

**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 21 OF 67
	<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. SAM HALPER

Mailing Address 351 EAST 84TH STREET
APT. 3C

City NEW YORK State NY Zip Code 10028

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

Name of Employer SELF EMPLOYED Occupation BUSINESS OWNER

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
 03 / 31 / 2015

Transaction ID : SA11AI.29999

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SAM HALPER

Mailing Address 351 EAST 84TH STREET
APT. 3C

City NEW YORK State NY Zip Code 10028

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

Name of Employer SELF EMPLOYED Occupation BUSINESS OWNER

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
 03 / 31 / 2015

Transaction ID : SA11AI.30008

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES L HAMMEL III

Mailing Address 609 ACADEMY AVENUE

City SEWICKLEY State PA Zip Code 15143

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

Name of Employer PITT OHIO TRUCKING Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11AI.29979

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

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 22 OF 67
	<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. CHARLES L HAMMEL III

Mailing Address 609 ACADEMY AVENUE

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
PITT OHIO TRUCKING CEO

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
03 / 31 / 2015

Transaction ID : SA11AI.29986

Amount of Each Receipt this Period
300.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH A. HARDY III

Mailing Address 1019 ROUTE 519

City State Zip Code
EIGHTY FOUR PA 15330

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

Name of Employer Occupation
84 LUMBER FOUNDER

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
03 / 30 / 2015

Transaction ID : SA11AI.29971

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. WESLEY HARRIS

Mailing Address 4286 OLD NEW ENGLAND ROAD

City State Zip Code
ALLISON PARK PA 15101

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

Name of Employer Occupation
JENNMAR SALES

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
02 / 18 / 2015

Transaction ID : SA11AI.29875

Amount of Each Receipt this Period
500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 67
	<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. RICHARD J. HARSHMAN

Mailing Address 1516 FOX CHASE LANE

City State Zip Code
UPPER ST. CLAIR PA 15241

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

Name of Employer Occupation
ALLEGHENY TECHNOLOGIES INC. 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
03 / 16 / 2015

Transaction ID : SA11AI.29939

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. MELISSA HART

Mailing Address 118 BOOTHBAY HARBOR

City State Zip Code
BRADFORDWOODS PA 15015

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

Name of Employer Occupation
KEEVICAN WEISS 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
03 / 30 / 2015

Transaction ID : SA11AI.29950

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOHN G. HENNE

Mailing Address 119 SOUTH DRIVE

City State Zip Code
PITTSBURGH PA 15238

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

Name of Employer Occupation
HENNE JEWELRY JEWELER

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
03 / 30 / 2015

Transaction ID : SA11AI.29965

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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 24 OF 67
	<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
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11AI.29989

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

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
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11AI.29992

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. JANE KIRKLAND

Mailing Address 625 PINE ROAD

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
KIRKLAND PARTNERS LLC CONSULTANT

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
03 / 30 / 2015

Transaction ID : SA11AI.29968

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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 25 OF 67
	<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. ANDREW KLABER

Mailing Address 335 GRANT STREET

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
CHARTWELL LAW 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
 03 / 06 / 2015

Transaction ID : SA11AI.29906

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 204 EDGEWORTH LANE

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
SMITHFIELD TRUST BANKER

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
 03 / 16 / 2015

Transaction ID : SA11AI.29941

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

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

Mailing Address 809 WELDON STREET

City State Zip Code
LATROBE PA 15650

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

Name of Employer Occupation
ROBINDALE ENERGY CEO

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
 03 / 31 / 2015

Transaction ID : SA11AI.29978

Amount of Each Receipt this Period
 2700.00
 CONTRIBUTION

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 67
	<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. CYNTHIA A. LABRIOLA D.M.D.

Mailing Address 15 TEAL DRIVE

City State Zip Code
PITTSBURGH PA 15238

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

Name of Employer Occupation
SELF EMPLOYED DENTIST

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
02 / 18 / 2015

Transaction ID : SA11AI.29844

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
MR MARK T LATERNER

Mailing Address 304 HERITAGE DR

City State Zip Code
PITTSBURGH PA 15235

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

Name of Employer Occupation
CITIZENS BANK REGIONAL SENIOR CREDIT OFFICER

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
03 / 30 / 2015

Transaction ID : SA11AI.29959

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. ELSIE LEWIS

Mailing Address 607 POIA ROAD

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
2600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11AI.29983

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

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

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

5600.00

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

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

FOR LINE NUMBER: PAGE 27 OF 67
(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 K. LIEBERMAN

Mailing Address 201 GLADSTONE RD.

City State Zip Code
PITTSBURGH PA 15217

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

Name of Employer Occupation
QUALITY INSURANCE CONCEPTS, INC. PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : SA11AI.29848

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
MR. FRANK E. LIVORIO

Mailing Address 525 WILLIAM PENN PLACE
PW 2630

City State Zip Code
PITTSBURGH PA 15219

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

Name of Employer Occupation
RBS CITIZENS SENIOR VICE PRESIDENT/TEAM LEADER

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
 03 / 30 / 2015

Transaction ID : SA11AI.29960

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. EUGENE MALONEY

Mailing Address FEDERATED INVESTORS, INC.
1001 LIBERTY AVENUE, 27TH FLOOR

City State Zip Code
PITTSBURGH PA 15222

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

Name of Employer Occupation
FEDERATED INVESTORS 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
 03 / 30 / 2015

Transaction ID : SA11AI.29966

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 67
	<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. BEVERLY WEISS MANNE

Mailing Address 2137 BEECHWOOD BOULEVARD

City PITTSBURGH	State PA	Zip Code 15217
--------------------	-------------	-------------------

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

Name of Employer TUCKER ARENSBERG, PC	Occupation ATTORNEY
--	------------------------

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : SA11AI.29850

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
DR. JOSEPH C. MAROON

Mailing Address 703 MAIN STREET

City BRIDGEPORT	State OH	Zip Code 43912
--------------------	-------------	-------------------

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

Name of Employer UNIVERSITY OF PITTSBURGH	Occupation NEUROSURGEON
--	----------------------------

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
 03 / 19 / 2015

Transaction ID : SA11AI.29943

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MCMAHON FINANCIAL LLC

Mailing Address 650 WASHINGTON ROAD #1000

City PITTSBURGH	State PA	Zip Code 15228
--------------------	-------------	-------------------

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

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
 02 / 18 / 2015

Transaction ID : SA11AI.29859

Amount of Each Receipt this Period
1000.00

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

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

4600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 67
	<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 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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : SA11AI.29860

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
PARTNERSHIP MCMAHON FINANCIAL LLC

B. Full Name (Last, First, Middle Initial)
MS. ANNE B. METCALF

Mailing Address 938 BLACKBURN ROAD

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
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : SA11AI.29879

Amount of Each Receipt this Period
250.00

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

Mailing Address 7181 RICHARDS DRIVE

City State Zip Code
BATON ROUGE LA 70809

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

Name of Employer Occupation
STAR SERVICE, INC. CONTRACTOR

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
 03 / 19 / 2015

Transaction ID : SA11AI.29944

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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 30 OF 67
	<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. PERRY NAPOLITANO

Mailing Address 35 HIGHLAND ROAD
APT. 5412

City State Zip Code
BETHEL PARK PA 15102

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

Name of Employer Occupation
REED SMITH 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
03 / 31 / 2015

Transaction ID : SA11AI.29977

Amount of Each Receipt this Period
2700.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DR. NGHI 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
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 18 / 2015

Transaction ID : SA11AI.29863

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. TIM O'BRIEN

Mailing Address 1180 MURRAY HILL AVENUE

City State Zip Code
PITTSBURGH PA 15217

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

Name of Employer Occupation
PJ DICK-TRUMBULL CORP. CONSTRUCTION

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
02 / 18 / 2015

Transaction ID : SA11AI.29854

Amount of Each Receipt this Period
1500.00

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: (check only one)	PAGE 31 OF 67
	<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 OELER

Mailing Address 5176 RICHLAND ROAD

City State Zip Code
GIBSONIA PA 15044

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

Name of Employer Occupation
DOLLAR BANK 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
 03 / 30 / 2015

Transaction ID : SA11AI.29953

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN C. OLIVER III

Mailing Address 535 SMITHFIELD STREET

City State Zip Code
PITTSBURGH PA 15222

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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : SA11AI.29868

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 433 JEFFERSON COURT

City State Zip Code
PITTSBURGH PA 15243

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
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : SA11AI.29867

Amount of Each Receipt this Period
 1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 67
	<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 W. RIORDAN

Mailing Address **877 BLACKBURN ROAD**

City **SEWICKLEY** State **PA** Zip Code **15143**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 18 / 2015

Transaction ID : SA11AI.29876

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES C. RODDEY

Mailing Address **1413 OAK STREET**

City **OAKMONT** State **PA** Zip Code **15139**

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

Name of Employer **BAKER TILLY** Occupation **FIRM 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 Y
02 / 18 / 2015

Transaction ID : SA11AI.29877

Amount of Each Receipt this Period
500.00

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

Mailing Address **1413 OAK STREET**

City **OAKMONT** State **PA** Zip Code **15139**

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

Name of Employer **BAKER TILLY** Occupation **FIRM DIRECTOR**

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
03 / 30 / 2015

Transaction ID : SA11AI.29954

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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 33 OF 67
	<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. JAMES E. ROHR

Mailing Address 613 DORSEYVILLE RD.

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
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11AI.29980

Amount of Each Receipt this Period
 2700.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JAMES E. ROHR

Mailing Address 613 DORSEYVILLE RD.

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
5400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11AI.29987

Amount of Each Receipt this Period
 2700.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. S. CLAYTON SAFTNER

Mailing Address 12 PINK HOUSE ROAD

City State Zip Code
SEWICKLEY PA 15143

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

Name of Employer Occupation
SIMPSON & MCCRADY LLC INSURANCE BROKER

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
 03 / 30 / 2015

Transaction ID : SA11AI.29951

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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 34 OF 67
	<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. JEMELE SANDERSON

Mailing Address 710 STRAIGHT STREET

City State Zip Code
SEWICKLEY PA 15143

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.29982

Amount of Each Receipt this Period

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ALBERT F. SCHMIDT

Mailing Address 511 WIMER CIRCLE

City State Zip Code
PITTSBURGH PA 15237

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SCHMIDT CONSULTING OWNER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.29991

Amount of Each Receipt this Period

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. LINDA SEDWICK

Mailing Address 443 BELMONT ROAD

City State Zip Code
BUTLER PA 16001

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.29984

Amount of Each Receipt this Period

CONTRIBUTION

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 35 OF 67
	<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. LINDA 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
NONE 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 Y Y
03 / 31 / 2015

Transaction ID : SA11AI.30014

Amount of Each Receipt this Period
2700.00

REATTRIBUTION REQUESTED

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

Mailing Address 102 BUCKINGHAM ROAD

City State Zip Code
PITTSBURGH PA 15215

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

Name of Employer Occupation
SIMPSON & MCCRADY INSURANCE BROKER

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
03 / 30 / 2015

Transaction ID : SA11AI.29962

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PROF. KIRON SKINNER

Mailing Address 610 ARBOR COURT

City State Zip Code
PITTSBURGH PA 15238

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

Name of Employer Occupation
CARNEGIE MELLON UNIVERSITY PROFESSOR

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
03 / 28 / 2015

Transaction ID : SA11AI.29995

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

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 36 OF 67
	<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. DANIEL C. STATLER

Mailing Address 745 MUIRFIELD DRIVE

City Greensburg State PA Zip Code 15601

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

Name of Employer JENNMAR Occupation VICE PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 02 / 18 / 2015

Transaction ID : SA11AI.29874

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
MR. PETER STEPHAICH

Mailing Address 525 WILLIAM PENN PLAZA SUITE 3101

City Pittsburgh State PA Zip Code 15219

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

Name of Employer BLUE DANUBE INCORPORATED 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
 02 / 18 / 2015

Transaction ID : SA11AI.29856

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN TUMOLO

Mailing Address 15 TEAL DRIVE

City Pittsburgh State PA Zip Code 15238

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

Name of Employer SELF EMPLOYED 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
 02 / 18 / 2015

Transaction ID : SA11AI.29843

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: PAGE 37 OF 67
(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. H. WOODRUFF TURNER

Mailing Address 145 NORTH DRIVE

City State Zip Code
PITTSBURGH PA 15238

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

Name of Employer Occupation
K&L GATES, LLC 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
 03 / 30 / 2015

Transaction ID : SA11AI.29957

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BRUCE VAN SAUN

Mailing Address 324 MANCHESTER RD

City State Zip Code
RIDGEWOOD NJ 07450

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

Name of Employer Occupation
CITIZENS FINANCIAL GROUP 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
 03 / 30 / 2015

Transaction ID : SA11AI.29967

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. DANIEL VERES

Mailing Address 10210 GRUBBS ROAD

City State Zip Code
WEXFORD PA 15090

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

Name of Employer Occupation
GRANT STREET GROUP COO

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
 03 / 09 / 2015

Transaction ID : SA11AI.29915

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 67
	<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 G. WILMERS

Mailing Address **ONE M&T BANK**

City **BUFFALO** State **NY** Zip Code **14203**

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

Name of Employer **M&T BANK** Occupation **CHAIRMAN**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11AI.29975

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address **44 WAY HOLLOW ROAD**

City **SEWICKLEY** State **PA** Zip Code **15143**

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

Name of Employer **WELLS FARGO** Occupation **FINANCIAL ADVISOR**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 18 / 2015

Transaction ID : SA11AI.29845

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
MS. MARY G. WOLF

Mailing Address **178 BACKBONE ROAD**

City **SEWICKLEY** State **PA** Zip Code **15143**

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

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

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
02 / 18 / 2015

Transaction ID : SA11AI.29878

Amount of Each Receipt this Period
 400.00

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 39 OF 67
	<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 T. WOODINGS

Mailing Address 6 MEADOWOOD DRIVE

City State Zip Code
PITTSBURGH PA 15215

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

Name of Employer Occupation
IWCC 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
 02 / 18 / 2015

Transaction ID : SA11AI.29847

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 10 EDGEWOOD ROAD

City State Zip Code
PITTSBURGH PA 15215

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

Name of Employer Occupation
WHITMER & WORRALL GOV'T RELATIONS

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 23 / 2015

Transaction ID : SA11AI.29900

Amount of Each Receipt this Period
 500.00

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

Mailing Address 1625 KING JAMES DRIVE

City State Zip Code
PITTSBURGH PA 15237

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

Name of Employer Occupation
STANDARD BANK 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
 03 / 30 / 2015

Transaction ID : SA11AI.29947

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

3350.00

148550.00

**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 67
	<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)
ACTION COMMITTEE FOR RURAL ELECTRIFICATION. (ACRE) NATIONAL RURAL ELECTRIC COOPERATIVE

A. Mailing Address 4301 WILSON BOULEVARD

City	State	Zip Code
ARLINGTON	VA	22203

FEC ID number of contributing federal political committee. **C** C00002972

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 _____ 1000.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		16		2015

Transaction ID : SA11C.29933

Amount of Each Receipt this Period
 _____ 1000.00
 CONTRIBUTION

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

Mailing Address 1000 SIX PPG PLACE

City	State	Zip Code
PITTSBURGH	PA	15222

FEC ID number of contributing federal political committee. **C** C00141697

Name of Employer	Occupation

Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		18		2015

Transaction ID : SA11C.29864

Amount of Each Receipt this Period
 _____ 1000.00
 CONTRIBUTION

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

Mailing Address 1000 SIX PPG PLACE

City	State	Zip Code
PITTSBURGH	PA	15222

FEC ID number of contributing federal political committee. **C** C00141697

Name of Employer	Occupation

Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1500.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		30		2015

Transaction ID : SA11C.29952

Amount of Each Receipt this Period
 _____ 500.00
 CONTRIBUTION

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

_____ 2500.00

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

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

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

FOR LINE NUMBER: PAGE 41 OF 67
(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 FINANCIAL SVS ASSOC. PAC

Mailing Address 919 EIGHTEETH STREET NW #300

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C C00038604**

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
 03 / 16 / 2015

Transaction ID : SA11C.29934

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ARCH LEADERSHIP PAC

Mailing Address PO BOX 190033

City State Zip Code
ST LOUIS MO 63119

FEC ID number of contributing federal political committee. **C C00416404**

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
 03 / 16 / 2015

Transaction ID : SA11C.29932

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

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

City State Zip Code
PITTSBURGH PA 15219

FEC ID number of contributing federal political committee. **C C00195388**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.29963

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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 42 OF 67
	<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)
CALGON CARBON CORPORATION PAC INC DBA CCC PAC OR CALGON CARBON PAC

Mailing Address 400 CALGON CARBON DRIVE

City State Zip Code
PITTSBURGH PA 15205

FEC ID number of contributing federal political committee. **C** C00543876

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
 02 / 18 / 2015

Transaction ID : SA11C.29865

Amount of Each Receipt this Period
1000.00

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

Mailing Address CNX CENTER
1000 CONSOL ENERGY DRIVE

City State Zip Code
CANONSBURG PA 15317

FEC ID number of contributing federal political committee. **C** C00279331

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 06 / 2015

Transaction ID : SA11C.29911

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DOLLAR SAVINGS BANK POLITICAL ACTION COMMITTEE (DOLPAC)

Mailing Address THREE GATEWAY CENTER
PUBLIC AFFAIRS 1 EAST

City State Zip Code
PITTSBURGH PA 15222

FEC ID number of contributing federal political committee. **C** C00151563

Name of Employer Occupation

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
 03 / 30 / 2015

Transaction ID : SA11C.29970

Amount of Each Receipt this Period
2700.00

CONTRIBUTION

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

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

6200.00

**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 67
	<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)
EDUCATION MANAGEMENT CORPORATION EMPLOYEE PAC (EDMC EDU-PAC)

Mailing Address **210 SIXTH AVENUE
33RD FLOOR**

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

FEC ID number of contributing federal political committee. **C C00466169**

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
03 / 30 / 2015

Transaction ID : SA11C.29956

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B. 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
03 / 30 / 2015

Transaction ID : SA11C.29972

Amount of Each Receipt this Period

2700.00

CONTRIBUTION

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

Mailing Address **1001 LIBERTY AVENUE #850**

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

FEC ID number of contributing federal political committee. **C C00336842**

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
02 / 18 / 2015

Transaction ID : SA11C.29861

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: (check only one)	PAGE 44 OF 67
	<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. FINANCIAL SERVICES POLITICAL COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address LIBERTY CENTER-27TH FLOOR

City State Zip Code
PITTSBURGH PA 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
 03 / 16 / 2015

Transaction ID : SA11C.29940

Amount of Each Receipt this Period
 2600.00

CONTRIBUTION

B. GENESEE & WYOMING INC. PAC

Full Name (Last, First, Middle Initial)
Mailing Address 3601 CONCORD ROAD
2ND FLOOR

City State Zip Code
YORK PA 17402

FEC ID number of contributing federal political committee. **C** C00289058

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
 02 / 18 / 2015

Transaction ID : SA11C.29839

Amount of Each Receipt this Period
 1000.00

C. HIGHMARK HEALTH PAC OF HIGHMARK INC.

Full Name (Last, First, Middle Initial)
Mailing Address 1800 CENTER STREET

City State Zip Code
CAMP HILL PA 17089

FEC ID number of contributing federal political committee. **C** C00302844

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 06 / 2015

Transaction ID : SA11C.29903

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

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

4600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 67
	<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)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

A. 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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11C.29988

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

B. Mailing Address 1101 PENNSYLVANIA AVENUE NW
SUITE 200

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00034405

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
 02 / 18 / 2015

Transaction ID : SA11C.29841

Amount of Each Receipt this Period
 1000.00

Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF HEALTH UNDERWRITERS PAC (HUPAC)

C. Mailing Address 1212 NEW YORK AVE NW
SUITE 1100

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00283135

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
 03 / 30 / 2015

Transaction ID : SA11C.29964

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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 46 OF 67
	<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)
POLITICAL ACTION COMMITTEE/THE BANK OF NEW YORK MELLON CORPORATION-FEDERAL(BNY MELLON-FED)

A. Mailing Address **BNY MELLON CENTER ROOM 3225**
500 GRANT STREET

City **PITTSBURGH** State **PA** Zip Code **15258**

FEC ID number of contributing federal political committee. **C C00494534**

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
03 / 06 / 2015

Transaction ID : SA11C.29904

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
PPG BETTER GOVERNMENT TEAM; PPG INDUSTRIES INC.

B. Mailing Address **ONE PPG PLACE**
40TH FLOOR

City **PITTSBURGH** State **PA** Zip Code **15272**

FEC ID number of contributing federal political committee. **C C00034298**

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
02 / 18 / 2015

Transaction ID : SA11C.29855

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
S&T BANK/S&T BANCORP, INC. POLITICAL ACTION COMMITTEE

C. Mailing Address **P.O. BOX 190**
800 PHILADELPHIA ST

City **INDIANA** State **PA** Zip Code **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
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11C.29958

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

2500.00

27000.00

**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 47 OF 67	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input 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. BEAVER COUNTY CHAMBER OF COMMERCE			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2015	
Mailing Address 798 TURNPIKE ST			Amount of Each Disbursement this Period 400.00	
City BEAVER	State PA	Zip Code 15009	Transaction ID : SB17.29922	
Purpose of Disbursement EVENT TICKETS		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. BIG BROTHERS BIG SISTERS BEAVER CO.			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2015	
Mailing Address 1475 3RD AVE			Amount of Each Disbursement this Period 275.00	
City NEW BRIGHTON	State PA	Zip Code 15066	Transaction ID : SB17.29885	
Purpose of Disbursement ADVERTISING		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. CAMBRIA COUNTY REPUBLICAN COMMITTEE			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2015	
Mailing Address 450 LURAY			Amount of Each Disbursement this Period 500.00	
City JOHNSTOWN	State PA	Zip Code 15904	Transaction ID : SB17.29928	
Purpose of Disbursement EVENT TICKETS		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).....	1175.00
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 48 OF 67			
	<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 03 / 17 / 2015
Mailing Address PO BOX 387			Amount of Each Disbursement this Period 2620.81 Transaction ID : SB17.29920
City PITTSBURGH	State PA	Zip Code 15230	
Purpose of Disbursement EVENT CATERING	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. EC CONSULTING, LLC			Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2015
Mailing Address 526 6TH ST, SE			Amount of Each Disbursement this Period 5406.06 Transaction ID : SB17.29793
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement FUNDRAISING CONSULTING	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. EC CONSULTING, LLC			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2015
Mailing Address 526 6TH ST, SE			Amount of Each Disbursement this Period 2265.85 Transaction ID : SB17.29888
City WASHINGTON	State DC	Zip Code 20003	
Purpose of Disbursement FUNDRAISING CONSULTING	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).....	10292.72
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 49 OF 67			
	<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. EC CONSULTING, LLC			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2015	
Mailing Address 526 6TH ST, SE			Amount of Each Disbursement this Period 1219.95	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.29930	
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. ELECTEKUSA			Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2015	
Mailing Address PO BOX 23715			Amount of Each Disbursement this Period 9219.68	
City CHAGRIN FALLS	State OH	Zip Code 44023	Transaction ID : SB17.29816	
Purpose of Disbursement DATABASE SOFTWARE		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. ELECTEKUSA			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2015	
Mailing Address PO BOX 23715			Amount of Each Disbursement this Period 2323.52	
City CHAGRIN FALLS	State OH	Zip Code 44023	Transaction ID : SB17.29891	
Purpose of Disbursement DATABASE SOFTWARE		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).....	12763.15
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 50 OF 67	
	<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. GREATER JOHNSTOWN CAMBRIA COUNTY CHAMBER OF COMMERCE			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2015	
Mailing Address 245 MARKET STREET			Amount of Each Disbursement this Period 244.00	
City JOHNSTOWN	State PA	Zip Code 15901	Transaction ID : SB17.29923	
Purpose of Disbursement MEMBERSHIP DUES		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. LONG NYQUIST & ASSOCIATES CONSULTING			Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2015	
Mailing Address 121 STATE STREET			Amount of Each Disbursement this Period 14000.00	
City HARRISBURG	State PA	Zip Code 17101	Transaction ID : SB17.29790	
Purpose of Disbursement STRATEGY CONSULTING		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. LONG NYQUIST & ASSOCIATES CONSULTING			Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015	
Mailing Address 121 STATE STREET			Amount of Each Disbursement this Period 2331.72	
City HARRISBURG	State PA	Zip Code 17101	Transaction ID : SB17.29813	
Purpose of Disbursement STRATEGY CONSULTING		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).....	16575.72
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 51 OF 67	
	<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 01 / 05 / 2015
Mailing Address PO BOX 262		Amount of Each Disbursement this Period 2015 10593.44 Transaction ID : SB17.29794
City BEAVER	State PA	
Zip Code 15009	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 01 / 12 / 2015
Mailing Address PO BOX 262		Amount of Each Disbursement this Period 2015 5809.16 Transaction ID : SB17.29797
City BEAVER	State PA	
Zip Code 15009	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 02 / 16 / 2015
Mailing Address PO BOX 262		Amount of Each Disbursement this Period 2015 4373.66 Transaction ID : SB17.29892
City BEAVER	State PA	
Zip Code 15009	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).....	20776.26
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 52 OF 67			
	<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 03 / 10 / 2015	
Mailing Address PO BOX 262			Amount of Each Disbursement this Period 4122.95	
City BEAVER	State PA	Zip Code 15009	Transaction ID : SB17.29918	
Purpose of Disbursement FUNDRAISING CONSULTING		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. MINUTEMAN PRESS			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2015	
Mailing Address 4790 WILLIAM ANDERSON PARK			Amount of Each Disbursement this Period 1702.97	
City ALLISON PARK	State PA	Zip Code 15101	Transaction ID : SB17.29887	
Purpose of Disbursement PRINTING		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. MINUTEMAN PRESS			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2015	
Mailing Address 4790 WILLIAM ANDERSON PARK			Amount of Each Disbursement this Period 495.42	
City ALLISON PARK	State PA	Zip Code 15101	Transaction ID : SB17.29889	
Purpose of Disbursement PRINTING		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).....	6321.34
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 53 OF 67			
	<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. NRA FOUNDATION			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2015
Mailing Address 380 HILLSIDE LN			Amount of Each Disbursement this Period 300.00 Transaction ID : SB17.29881
City SOMERSET	State PA	Zip Code 15501	
Purpose of Disbursement EVENT TICKET	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 01 / 02 / 2015
Mailing Address PO BOX 609			Amount of Each Disbursement this Period 16.00 Transaction ID : SB17.29781
City PITTSBURGH	State PA	Zip Code 15230	
Purpose of Disbursement CC TRANSACTION 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 01 / 02 / 2015
Mailing Address PO BOX 609			Amount of Each Disbursement this Period 39.50 Transaction ID : SB17.29782
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).....	355.50
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 54 OF 67	
	<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 MM / DD / YYYY 02 / 02 / 2015
Mailing Address PO BOX 609		Amount of Each Disbursement this Period 30.50
City PITTSBURGH	State PA	
Zip Code 15230	Purpose of Disbursement BANK FEES	Transaction ID : SB17.29835
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 MM / DD / YYYY 03 / 02 / 2015
Mailing Address PO BOX 609		Amount of Each Disbursement this Period 153.08
City PITTSBURGH	State PA	
Zip Code 15230	Purpose of Disbursement CC TRANSACTION FEES	Transaction ID : SB17.29893
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 MM / DD / YYYY 03 / 02 / 2015
Mailing Address PO BOX 609		Amount of Each Disbursement this Period 53.85
City PITTSBURGH	State PA	
Zip Code 15230	Purpose of Disbursement CC TRANSACTION FEES	Transaction ID : SB17.29894
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).....	237.43
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 55 OF 67			
	<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 03 / 02 / 2015
Mailing Address PO BOX 609		Amount of Each Disbursement this Period 30.50
City PITTSBURGH	State PA	
Zip Code 15230	Purpose of Disbursement BANK FEES	Transaction ID : SB17.29895
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 03 / 02 / 2015
Mailing Address PO BOX 609		Amount of Each Disbursement this Period 17.48
City PITTSBURGH	State PA	
Zip Code 15230	Purpose of Disbursement CC TRANSACTION FEES	Transaction ID : SB17.30004
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 01 / 05 / 2015
Mailing Address PO BOX 856177		Amount of Each Disbursement this Period 469.00
City LOUISVILLE	State KY	
Zip Code 40285	Purpose of Disbursement SEE BELOW	Transaction ID : SB17.29791
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).....	516.98
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 56 OF 67			
	<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 MM / DD / YYYY 01 / 26 / 2015
Mailing Address PO BOX 856177		Amount of Each Disbursement this Period 12402.94 Transaction ID : SB17.29817
City LOUISVILLE State KY Zip Code 40285	Purpose of Disbursement SEE BELOW 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. VERIZON		Date of Disbursement MM / DD / YYYY 01 / 26 / 2015
Mailing Address PO BOX 4002		Amount of Each Disbursement this Period 220.06 Transaction ID : SB17.29818 [MEMO ITEM]
City ACWORTH State GA Zip Code 30101	Purpose of Disbursement TELEPHONE 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. HOLIDAY INN		Date of Disbursement MM / DD / YYYY 01 / 26 / 2015
Mailing Address 4859 MCKNIGHT ROAD		Amount of Each Disbursement this Period 239.74 Transaction ID : SB17.29820 [MEMO ITEM]
City PITTSBURGH State PA Zip Code 15237	Purpose of Disbursement TRAVEL 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:		

SUBTOTAL of Disbursements This Page (optional).....	12402.94
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 57 OF 67	
	<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. THE CONGRESSIONAL INSTITUTE			Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015	
Mailing Address 1700 DIAGONAL ROAD			Amount of Each Disbursement this Period 738.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SB17.29821	
Purpose of Disbursement EVENT TICKET		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. SINE IRISH PUB			Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015	
Mailing Address 1301 S JOYCE STREET			Amount of Each Disbursement this Period 961.11	
City ARLINGTON	State VA	Zip Code 22202	Transaction ID : SB17.29822	
Purpose of Disbursement EVENT CATERING		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. US POSTMASTER			Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015	
Mailing Address 521 THORN STREET			Amount of Each Disbursement this Period 931.00	
City SEWICKLEY	State PA	Zip Code 15143	Transaction ID : SB17.29823	
Purpose of Disbursement POSTAGE		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 58 OF 67	
	<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. DOUBLETREE HOTEL			Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015	
Mailing Address 569 LEXINGTON AVE			Amount of Each Disbursement this Period 2793.93	
City NEW YORK	State NY	Zip Code 10022	Transaction ID : SB17.29824	
Purpose of Disbursement TRAVEL 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. AMTRAK			Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015	
Mailing Address PO BOX 14368			Amount of Each Disbursement this Period 662.00	
City PHILADELPHIA	State PA	Zip Code 19115	Transaction ID : SB17.29825	
Purpose of Disbursement TRAVEL 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) C. RENAISSANCE			Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015	
Mailing Address 9801 NATURAL BRIDGE RD			Amount of Each Disbursement this Period 395.18	
City BERKELEY	State MO	Zip Code 63134	Transaction ID : SB17.29826	
Purpose of Disbursement TRAVEL 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:			

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 59 OF 67			
	<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. GIANT EAGLE		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015
Mailing Address 5550 CENTRE AVENUE		Amount of Each Disbursement this Period 235.20
City PITTSBURGH	State PA	
Zip Code 15219	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.29827 [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. US POSTMASTER		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015
Mailing Address 521 THORN STREET		Amount of Each Disbursement this Period 3472.60
City SEWICKLEY	State PA	
Zip Code 15143	Purpose of Disbursement POSTAGE	Transaction ID : SB17.29828 [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. HAMPTON INN		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2015
Mailing Address 4575 MCKNIGHT RD		Amount of Each Disbursement this Period 599.64
City PITTSBURGH	State PA	
Zip Code 15237	Purpose of Disbursement TRAVEL EXPENSE	Transaction ID : SB17.29829 [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 60 OF 67	
	<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 MM / DD / YYYY 02 / 02 / 2015
Mailing Address PO BOX 856177		Amount of Each Disbursement this Period 16.00 Transaction ID : SB17.29836
City LOUISVILLE	State KY	
Zip Code 40285	Purpose of Disbursement 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. MR. THOMAS RAVIS		Date of Disbursement MM / DD / YYYY 01 / 15 / 2015
Mailing Address 1003 PERRY HIGHWAY		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB17.29812
City PITTSBURGH	State PA	
Zip Code 15237	Purpose of Disbursement RENT	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. THOMAS RAVIS		Date of Disbursement MM / DD / YYYY 02 / 16 / 2015
Mailing Address 1003 PERRY HIGHWAY		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.29886
City PITTSBURGH	State PA	
Zip Code 15237	Purpose of Disbursement RENT	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).....	3616.00
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 61 OF 67	
	<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. MR. THOMAS RAVIS		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2015
Mailing Address 1003 PERRY HIGHWAY		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.29927
City PITTSBURGH	State PA	
Zip Code 15237	Purpose of Disbursement OFFICE RENT	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. REPUBLICAN COMMITTEE OF ALLEGHENY COUNTY		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2015
Mailing Address 100 FLEET STREET, #205		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.29925
City PITTSBURGH	State PA	
Zip Code 15220	Purpose of Disbursement EVENT 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. REPUBLICAN COMMITTEE OF BEAVER CO.		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2015
Mailing Address 913 PENNSYLVANIA AVENUE		Amount of Each Disbursement this Period 460.00 Transaction ID : SB17.29926
City MONACA	State PA	
Zip Code 15061	Purpose of Disbursement EVENT TICKETS	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).....	2560.00
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 62 OF 67	
	<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. MR. ARMSTRONG ROBINSON		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2015
Mailing Address 2502 SOUTH ARLINGTON MILL DRIVE UNIT B		Amount of Each Disbursement this Period 853.86 Transaction ID : SB17.29792
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement MILEAGE REIMBURSEMENT 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. MR. ARMSTRONG ROBINSON		Date of Disbursement M M / D D / Y Y Y Y 01 / 05 / 2015
Mailing Address 2502 SOUTH ARLINGTON MILL DRIVE UNIT B		Amount of Each Disbursement this Period 6000.00 Transaction ID : SB17.29795
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement STRATEGY CONSULTING 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. MR. ARMSTRONG ROBINSON		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2015
Mailing Address 2502 SOUTH ARLINGTON MILL DRIVE UNIT B		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.29919
City ARLINGTON State VA Zip Code 22206	Purpose of Disbursement STRATEGY CONSULTING 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).....	10853.86
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 63 OF 67			
	<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 03 / 20 / 2015
Mailing Address 3180 18TH STREET		Amount of Each Disbursement this Period 158.60 Transaction ID : SB17.30005
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 03 / 26 / 2015
Mailing Address 3180 18TH STREET		Amount of Each Disbursement this Period 79.30 Transaction ID : SB17.29994
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 03 / 28 / 2015
Mailing Address 3180 18TH STREET		Amount of Each Disbursement this Period 213.60 Transaction ID : SB17.29996
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).....	451.50
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 64 OF 67			
	<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 03 / 29 / 2015
Mailing Address 3180 18TH STREET		Amount of Each Disbursement this Period 158.30 Transaction ID : SB17.29998
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 03 / 31 / 2015
Mailing Address 3180 18TH STREET		Amount of Each Disbursement this Period 426.90 Transaction ID : SB17.30006
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. VETERANS BREAKFAST CLUB		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2015
Mailing Address 200 MAGNOLIA PLACE		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.29883
City PITTSBURGH	State PA	
Zip Code 15228	Purpose of Disbursement ADVERTISING	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).....	835.20
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 65 OF 67	
	<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. WESTMORELAND COUNTY REPUBLICAN COMMITTEE		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2015
Mailing Address 23 N. MAPLE AVE		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.29924
City GREENSBURG State PA Zip Code 15601	Purpose of Disbursement EVENT SPONSORSHIP	
Candidate Name WESTMORELAND COUNTY REPUBLICAN COMMITTEE		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. ED YAP		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2015
Mailing Address 701 7TH ST SE		Amount of Each Disbursement this Period 385.60 Transaction ID : SB17.29814
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement REIMB TRAVEL EXP-NOITEMIZATION	
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).....	985.60
TOTAL This Period (last page this line number only).....	100719.20

**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 66 OF 67	
	<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. FRIENDS OF FRANK GUINTA		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2015
Mailing Address PO BOX 877		Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.29929
City MANCHESTER	State NH	
Zip Code 03105	Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011
Candidate Name FRANK GUINTA	Office Sought: <input checked="" 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: NH	District: 01	

Full Name (Last, First, Middle Initial) B. POLIQUIN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2015
Mailing Address 499 SOUTH CAPITOL ST, SW, STE 420		Amount of Each Disbursement this Period 500.00 Transaction ID : SB21.30000
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type 011
Candidate Name BRUCE POLIQUIN	Office Sought: <input checked="" 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: ME	District: 02	

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	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).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 67 OF 67
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
ROTHFUS FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor KEITH ROTHFUS	Nature of Debt (Purpose): 2014 POST GEN SHIPPING, MEETING EXPENSE, PARKING
Mailing Address PO BOX 435	
City State Zip Code SEWICKLEY PA 15143	

Outstanding Balance Beginning This Period 378.57	Transaction ID : SD10.31	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 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 1159.59	Transaction ID : SD10.32	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1159.59

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	1538.16
2) TOTALS This Period (last page this line number only)	1538.16
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	1538.16