

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

11 DEC -6 AM 10:36

Office Use Only

1. NAME OF
COMMITTEE (in full)

☐

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

ROHRER FOR SENATE

ADDRESS (number and street)

PO BOX 278

☐

(Check if address
is changed)

ELVERSON

PA

19520

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☐

(Check if address
is changed)

ROHRERFORSENATE@GMAIL.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐

(Check if address
is changed)

WWW.ROHRERFORSENATE.ORG

2. DATE

11 / 21 / 2011

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

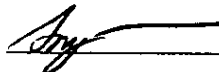
AMENDED (A)

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

Type or Print Name of Treasurer

SCOTT MCDEVITT

Signature of Treasurer



Date

11 / 29 / 2011

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

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

11020473531

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) ☒ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate

SAMUEL E. ROHRER

Candidate
Party Affiliation

REP

Office
Sought:☐

House

☒

Senate

☐

President

State

PA

District

☐

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate**Party Committee:**

- (d) ☐ This committee is a ☐ (National, State or subordinate) committee of the ☐ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- | | | |
|--|--|---|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Corporation w/o Capital Stock | <input type="checkbox"/> Labor Organization |
| <input type="checkbox"/> Membership Organization | <input type="checkbox"/> Trade Association | <input type="checkbox"/> Cooperative |
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

- | | | | |
|----|--------------------------|---------------|----------------------------|
| 1. | <input type="checkbox"/> | FEC ID number | C <input type="checkbox"/> |
| 2. | <input type="checkbox"/> | FEC ID number | C <input type="checkbox"/> |
| 3. | <input type="checkbox"/> | FEC ID number | C <input type="checkbox"/> |
| 4. | <input type="checkbox"/> | FEC ID number | C <input type="checkbox"/> |

11020473532

Write or Type Committee Name

ROHRER FOR SENATE

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

SCOTT MCDEVITT

Mailing Address

PO BOX 278

ELVERSON

PA

19520

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

610

324

1924

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name
of Treasurer

SCOTT MCDEVITT

Mailing Address

PO BOX 278

ELVERSON

PA

19520

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

610

324

1924

11020473533

Full Name of
Designated
Agent

SCOTT MCDEVITT

Mailing Address

PO BOX 278

ELVERSON

CITY

PA

STATE

19520

ZIP CODE

Title or Position

TREASURER

Telephone number

610 - 324 - 1924

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

NATIONAL PENN BANK

Mailing Address

3697 E MAIN ST

MORGANTOWN

CITY

PA

STATE

19543

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

11020473534

*Robin for Senate
PO Box 278
Ebensburg, PA*

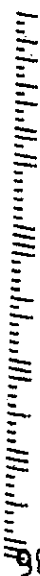
**SCREENED
BY THE SENATE
POST OFFICE**



7010 1870 0001 2143 1916

*Secretary of the Senate
Office of Public Records
PO Box 2517
Alexandria, VA 22301-0109*

2230130517



1000



22301

U.S. POSTAGE
PAID
BIRDSBORO, PA
19508
NOV 30 11
PM BOUNT

\$5.79

00014126-11

(6)

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS
11 DEC -6 AM 10:36

11020473535

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____

USPS REGISTERED/CERTIFIED _____
Postmark
11-30-11
Postmark

USPS PRIORITY MAIL _____

Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

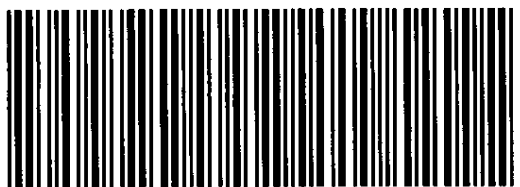
POSTMARK ILLEGIBLE ☐ NO POSTMARK ☐

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 12.06.11

11020473536



11020473537