PAGE 1 / 8

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

NAME OF COMMITTEE IN FI ROB FOR PA	ULL						
ADDRESS (number and stree	at) 44 DOCK ST						
ADDITEGO (Humber and street	UNIT 971						
CITY	ONIT 971	STATE		ZIP CODE			
PITTSTON		PA		18640-6228			
2. NAME OF CANDIDATE				OUGHT (State and Dis	strict)	4. FEC IDENTIFICATION	NUMBER
BRESNAHAN, ROB,	, , ,		House	PA	08	C00852137	
5. ISTHIS AN AMENDMENT?	NO, THIS IS A	NEW FILING	YES, IT AM	ENDS THE NOTICE F	FILED ON		
A. FULL NAME			Name of Em	ployer TION REQUEST	ED	Date (month, day, year)	Amount
HENRY, JOHN, P., MR.	,		INI ORWA	HON REQUEST		04/16/2024	1750.00
MAILING ADDRESS 55 PINECONE LN			Transaction	n ID : 6B1B4F47	784BB846F(1750.00
CITY	STATE	ZIP CODE	Occupation				
SHAVERTOWN	PA	18708-954	3 INFORMAT	TION REQUEST	ED		
B. FULL NAME			Name of Em	ployer		Date (month,	Amount
TAMBUR, VIRGINIA,	, , MRS.,		INFORMA ⁻	TION REQUEST	ED	day, year)	
MAILING ADDRESS						04/16/2024	3300.00
1045 MOUNTAIN RD			Transaction	n ID : 68FAEAF3	3596814779		
CITY	STATE	ZIP CODE	Occupation				
SHAVERTOWN	PA	18708-975	informa	TION REQUEST	ΓED		
C. FULL NAME		'	Name of Em			Date (month,	Amount
MEAGHER, TIMOTHY,	R, MR,		INFORMA	TION REQUEST	ΓED	day, year)	
MAILING ADDRESS						04/16/2024	1000.00
31 LIGHTNING DR			Transaction	n ID : 6C3D18D	91F3894D1 <i>A</i>		
CITY	STATE	ZIP CODE	Occupation				
HONESDALE	PA	18431-409	8 INFORMA	TION REQUEST	ΓED		
D. FULL NAME	·		Name of Em	ployer		Date (month,	Amount
SHIBLEY, MARC, , MR.	,		INFORMA	INFORMATION REQUESTED		day, year)	
MAILING ADDRESS						04/16/2024	3300.00
353 LAYBOURNE ST			Transaction	n ID : 6132B3A9	988B8647C9		
CITY	STATE	ZIP CODE	Occupation				
SCRANTON	PA	18508	INFORMA	TION REQUEST	TED		
E. FULL NAME	· · · · · · · · · · · · · · · · · · ·	'	Name of Em	ployer		Date (month,	Amount
BARNA, NICHOLA	AS, A, MR,			TION REQUEST	TED	day, year)	
MAILING ADDRESS						04/16/2024	1000.00
207 10TH ST			Transaction	n ID : 672D79DE	B7CB464B6		
CITY	STATE	ZIP CODE	Occupation				
HONESDALE	PA	18431-19	17 INFORMA	TION REQUES	TED		
SIGNATURE (optional)				DATE		For furth	er information
KILGORE, PAUL, , ,			04/17/2024 For further information, contact the Federal Election Comr				
KILOOKL, I ACL, , ,						contact the reder	al Election Commission



Any information copied from reports and statements filed under the Federal Election Campaign Act 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.



(See Reverse Side for Instructions)

NAME OF COMMITTEE IN FULL		7	
ROB FOR PA			
ADDRESS (number and street) 11 DOCK ST			
UNIT 971			
CITY, STATE, and ZIP CODE			
PITTSTON	PA 18640-6228	continuation	n page
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATIO	N NUMBER
BRESNAHAN, ROB, , ,	House PA 08	C00852137	
5. IS THIS AN AMENDMENT? NO, THIS IS A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON	/	<i>I</i>
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
HEED, ROBERT, C., MR., II	INFORMATION REQUESTED	day, year)	
riees, robert, o., witt, ii		04/16/2024	1000.00
946 WILLIAMS RD			
	Transaction ID : 6B057BC6DBE1940	286A02	
MONTROSE PA 18801-6	Occupation S844 INFORMATION REQUESTED		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
CAVACE MICHAEL WAY MD		day, year)	
CAVAGE, MICHAEL, W., MR.,	INFORMATION REQUESTED	04/16/2024	1000.00
3298 LAKE ARIEL HWY			
	Transaction ID: 6CA35EDE306684F	C98EC	
HONESDALE PA 18431-7	Occupation INFORMATION REQUESTED		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
CAVANAUGH, JOSEPH, , MR,	CAVANAUGH ELECTRICAL	day, year)	
57 (V7 (17 (5 5) 1), 5 5 5 E1 11, , 1 WITC,	O/W/WWW.CONTELLOTHIO/AL	04/16/2024	1000.00
1022 ASPEN DR			
	Transaction ID : 6B39AB7DEABFB4	F2D94!	
MOUNTAIN TOP PA 18707-9	Occupation P102 ELECTRICAL CONTRACTOR		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
CAVACE MICHAEL WAR		day, year)	
CAVAGE, MICHAEL, W., MR.,	INFORMATION REQUESTED	04/16/2024	2000.00
3298 LAKE ARIEL HWY			
	Transaction ID: 6C5BE49A3D4D146	54A45	
HONESDALE PA 18431-7	Occupation PEOUS		
	information requested	Data (manda	A
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
TAMBUR, ROBERT, L., MR,	TFP LIMITED	04/46/0004	2200.00
1045 MOLINTAIN PD		04/16/2024	3300.00
1045 MOUNTAIN RD	Transaction ID : 67515C5EA99284C9	9FA5A	
0	Occupation		
SHAVERTOWN PA 18708-9	OWNER OWNER		



(See Reverse Side for Instructions)

NAME OF COMMITTEE IN FULL ROB FOR PA			1	
ADDRESS (number and street) 11 DOCK ST			-	
UNIT 971				
CITY, STATE, and ZIP CODE			·	
PITTSTON		PA 18640-6228	continuatio	on page
2. NAME OF CANDIDATE		3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATIO	N NUMBER
BRESNAHAN, ROB, , ,		House PA 08	C00852137	
5. ISTHIS AN AMENDMENT? NO, THIS IS A NE	W FILING	YES, IT AMENDS THE NOTICE FILED ON	/	/
A. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
HEED, AMBER, K, MRS,		INFORMATION REQUESTED	day, year)	
			04/16/2024	1000.00
946 WILLIAMS RD				
		Transaction ID: 66835F61A1B014C98 Occupation	B976	
MONTROSE	PA 18801-6844	INFORMATION REQUESTED		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
ASHER, ROBERT, B., MR.,		INFORMATION REQUESTED	day, year)	
MONER, NOBERT, B., WIR.,		IN ONMATION REGUESTED	04/16/2024	3300.00
PO BOX 305				
		Transaction ID : 690DD200EEFB4494	192C	
GWYNEDD VALLEY	PA 19437-0305	Occupation INFORMATION REQUESTED		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
	4D		day, year)	7.11104111
OLSOMMER, JEFFREY, H, M	ΊR,	INFORMATION REQUESTED	04/16/2024	1000.00
PO BOX 893			0 17 10/2021	1000.00
		Transaction ID: 6BA76BA13FE41462	9A55	
HAMLIN	PA 18427-0893	Occupation		
	10-127 0000	INFORMATION REQUESTED	Date (month,	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	day, year)	Amount
DEBENEDICTIS, NICHOLAS	, , MR.,	INFORMATION REQUESTED	04/16/2024	1500.00
224 COLEVIEW DD			04/16/2024	1500.00
231 GOLFVIEW RD		Transaction ID : 69F367D87686E42B2	2BA1	
	40000 4040	Occupation	_	
ARDMORE	PA 19003-1019	INFORMATION REQUESTED		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month, day, year)	Amount
GRIMM, ROBERT, C., MR.,		INFORMATION REQUESTED	04/16/2024	1000.00
PO BOX 172				
		Transaction ID: 688B6AED883AA468	\$\$B4D	
WAYMART	PA 18472-0172	Occupation INFORMATION REQUESTED		



(See Reverse Side for Instructions)

NAME OF COMMITTEE IN FULL ROB FOR PA				
ADDRESS (number and street) 11 DOCK ST			-	
UNIT 971				
CITY, STATE, and ZIP CODE				
PITTSTON		PA 18640-6228	continuatio	n page
2. NAME OF CANDIDATE		3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATIO	N NUMBER
BRESNAHAN, ROB, , ,		House PA 08	C00852137	
5. IS THIS AN AMENDMENT? NO, THIS IS A N	EW FILING	YES, IT AMENDS THE NOTICE FILED ON	/	<i></i>
A. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
GILCHRIST, CHRISTOPHER	I MR	INFORMATION REQUESTED	day, year)	
GILOTINIOT, GITNIOTOT TIEN	, 0., 1011,	III GIUWATIGIT REGESTES	04/16/2024	1000.00
164 S HIGHLAND DR				
		Transaction ID: 68D5B650A85074DC	8B81	
PITTSTON	PA 18640-3249	Occupation INFORMATION REQUESTED		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
,		Name of Employer	day, year)	7 1110 4111
SHERWOOD, DONALD, L., N	⁄IR.,	INFORMATION REQUESTED	04/16/2024	3300.00
44 SHEDWOOD DD			04/10/2024	3300.00
41 SHERWOOD DR		Transaction ID: 652F8DADC3B21405	F8E6	
		Occupation		
TUNKHANNOCK	PA 18657-7882	INFORMATION REQUESTED		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
TAMBUR, VIRGINIA, , MRS.,		INFORMATION REQUESTED	day, year)	
			04/16/2024	3300.00
1045 MOUNTAIN RD				
		Transaction ID: 6D06FCA0F38BB459	9B96B	
SHAVERTOWN	PA 18708-9753	Occupation INFORMATION REQUESTED		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
	ID		day, year)	
BANKS, BERNARD, C., MR.,	JR.	INFORMATION REQUESTED	04/16/2024	1000.00
298 OLD CARVERTON RD				
200 OLD ONIVERVIOUR		Transaction ID : 6D78B0507320E4F92	2AAA	
CLIANEDTONANI	DA 10700 1740	Occupation		
SHAVERTOWN	PA 18708-1743	INFORMATION REQUESTED		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month, day, year)	Amount
KANNEBECKER, CHARLES,	, MR.,	INFORMATION REQUESTED	,,,,,,	
·	•		04/16/2024	3300.00
104 W HIGH ST		Transaction ID: 64B79DD42289A4BE	38B36	
		Occupation Occupation	30230	
MILFORD	PA 18337-1618	INFORMATION REQUESTED		



(See Reverse Side for Instructions)

NAME OF COMMITTEE IN FULL				1	
ROB FOR PA					
ADDRESS (number and street) 11 DOCK ST					
UNIT 971					
CITY, STATE, and ZIP CODE				 	
PITTSTON			PA 18640-6228	continuation	on page
2. NAME OF CANDIDATE			3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATIO	N NUMBER
BRESNAHAN, ROB, , ,			House PA 08	C00852137	
5. ISTHIS AN AMENDMENT? NO, THIS IS A N	NEW FILIN	IG	YES, IT AMENDS THE NOTICE FILED ON	/	/
A. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer	Date (month,	Amount
CLEMENTE LAMES MD			INFORMATION REQUESTED	day, year)	
CLEMENTE, JAMES, , MR.,			INFORMATION REQUESTED	04/16/2024	3300.00
575 PIERCE ST					
			Transaction ID: 625515C3A88D24D7	7B04	
STE 400 KINGSTON	DΛ	18704-5754	Occupation		
KINGSTON	PA	16704-5754	INFORMATION REQUESTED		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer	Date (month, day, year)	Amount
VANESKO, PHILLIP, J., MR.	_		INFORMATION REQUESTED	day, year)	
	,			04/16/2024	1500.00
15 MAPLESEED DR					
			Transaction ID: 63C9F8D524D554D1	EBBD	
DALLAS	PA	18612-9760	Occupation		
-	. , ,		INFORMATION REQUESTED		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer	Date (month, day, year)	Amount
HENRY, SCOTT, M., MR.,			INFORMATION REQUESTED	auj, you.	
, , ,				04/16/2024	1750.00
753 RANSOM RD					
			Transaction ID: 6D2F55AD374934F5	99E4	
DALLAS	PA	18612-9481	Occupation INFORMATION REQUESTED		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE				Date (month,	Amount
	_		Name of Employer	day, year)	711104111
SUHOSKY, ROBERT, J, CO	L,		INFORMATION REQUESTED	04/46/2024	1000.00
00 145 15 15 15 15 15 15 1				04/16/2024	1000.00
26 LAKEVIEW HEIGHTS DR			Transaction ID : 63D16A6C14AAB42	5AA53	
			Occupation		
HONESDALE	PA	18431-9604	INFORMATION REQUESTED		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE			Name of Employer	Date (month, day, year)	Amount
DOWD, JOHN, J., MR.,			INFORMATION REQUESTED		
				04/16/2024	3300.00
325 ELM ST			Transaction ID : 6247022D697594264	1891	
			Occupation		
LEHIGHTON	PA	18235-9326	INFORMATION REQUESTED		

(See Reverse Side for Instructions)

NAME OF COMMITTEE IN FULL]	
ROB FOR PA				
ADDRESS (number and street) 11 DOCK ST			1	
UNIT 971				
CITY, STATE, and ZIP CODE				
PITTSTON		PA 18640-6228	continuation	on page
2. NAME OF CANDIDATE		3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION	N NUMBER
BRESNAHAN, ROB, , ,		House PA 08	C00852137	
5. ISTHIS AN AMENDMENT? NO, THIS IS A N	EW FILING	YES, IT AMENDS THE NOTICE FILED ON	/	/
A. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
EINII AV DODEDT MD		INFORMATION REQUESTED	day, year)	
FINLAY, ROBERT, , MR.,		INFORMATION REQUESTED	04/16/2024	1000.00
22 SHRINE VW				
LE GIRANE VVI		Transaction ID: 6C8DB8DC9460349E	3B94C	
DALLAS	PA 18612-9213	Occupation		
DALLAS	PA 18612-9213	INFORMATION REQUESTED		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month, day, year)	Amount
ASHER, JOYCE, W., MRS.,		INFORMATION REQUESTED	day, year)	
7.6.1.2.1., 66.1.62, 11., III.(6.,		III GIAMATIGATICAGEGIES	04/16/2024	1700.00
PO BOX 305				
		Transaction ID: 638AC3395FA394FC	EAED	
GWYNEDD VALLEY	PA 19437-0305	Occupation		
	177 10107 0000	INFORMATION REQUESTED		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month, day, year)	Amount
MEAGHER, PAUL, M., MR.,	JR.	INFORMATION REQUESTED	day, your)	
,,			04/16/2024	1000.00
119 MILLER DR				
		Transaction ID : 6372D3CD8FD5F4EB	FA04	
HONESDALE	PA 18431-4117	Occupation		
		INFORMATION REQUESTED	Date (month,	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	day, year)	Amount
MACK, JOSEPH, J., MR., JR		INFORMATION REQUESTED		
			04/16/2024	3300.00
451 MOUNTAIN RD		Transaction ID - CD000EA 40 A 750 400	4005	
		Transaction ID: 6B999EA43A7F8462 Occupation	1003	
SHAVERTOWN	PA 18708-9750	INFORMATION REQUESTED		
F FULL NAME MAILING ADDDESS AND 71D CODE			Date (month,	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	day, year)	, σαιτ
KRETCHIK, THOMAS, E., MI	₹.,	INFORMATION REQUESTED		
			04/16/2024	1000.00
381 BODLE RD		Transaction ID : 6114B53693E024775	i Δ Δ Δ	
		Occupation		
WYOMING	PA 18644-6013	INFORMATION REQUESTED		

(See Reverse Side for Instructions)

NAME OF COMMITTEE IN FULL ROB FOR PA				
ADDRESS (number and street) 11 DOCK ST				
UNIT 971				
CITY, STATE, and ZIP CODE				
PITTSTON		PA 18640-6228	continuation	on page
2. NAME OF CANDIDATE		3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION	N NUMBER
BRESNAHAN, ROB, , ,		House PA 08	C00852137	
5. ISTHIS AN AMENDMENT? NO, THIS IS A N	IEW FILING	YES, IT AMENDS THE NOTICE FILED ON	/	/
A. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
MASEYCHIK, ROBERT, S, N	/IR	INFORMATION REQUESTED	day, year)	
W. (32 31 mx, 1(322 111, 3, 11	,		04/16/2024	2000.00
240 SAINT MARYS VILLA RD				
		Transaction ID: 67A53DDB6FEEE4B4 Occupation	18BC	
ROARING BROOK TWP	PA 18444-9674	INFORMATION REQUESTED		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
DOWD, TINA, M., MRS.,		INFORMATION REQUESTED	day, year)	
50 V 5, TH 47 X, WI., WING.,		IN ORMATION REGUESTES	04/16/2024	3300.00
325 ELM ST				
		Transaction ID : 679E087C875064405	B9A	
LEHIGHTON	PA 18235-9326	Occupation INFORMATION REQUESTED		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month,	Amount
		name of Employer	day, year)	
FRIENDS OF TIM MOORE			04/16/2024	1000.00
PO BOX 97275				
		Transaction ID: 6C0AC7B80240D460	F83C	
RALEIGH	NC 27624-7275	Occupation		
	110 2/02//2/0	N (5)	Date (month,	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	_	Name of Employer	day, year)	Amount
COSTELLO FOR CONGRES	SS		04/16/2024	1000.00
DO DOV 2004			04/10/2024	1000.00
PO BOX 2891		Transaction ID : 6635D4936D36141C0	906	
0001100110	00450 0004	Occupation	-	
SPRINGFIELD	VA 22152-0891			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	Date (month, day, year)	Amount
GREATER TOMORROW PA	С			
DO DOV 00044			04/16/2024	5000.00
PO BOX 30844		Transaction ID : 69295D511825B4A3I	A50	
		Occupation	1	
BETHESDA	MD 20824-0844			

(See Reverse Side for Instructions)

То	To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.				
1.	NAME OF COMMITTEE IN FULL				
	ROB FOR PA				

ADDRESS (number and street) 11 DOCK ST			
UNIT 971			
CITY, STATE, and ZIP CODE	PA 18640-6228	continuation	page
PITTSTON 2. NAME OF CANDIDATE	PA 18640-6228 3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION N	
BRESNAHAN, ROB, , ,		24. FEC IDENTIFICATION N C00852137	UMBER
BRESIVALIAN, ROB, , ,	Tiouse FA (000002137	
5. ISTHIS AN AMENDMENT? NO, THIS IS A NEW FILING	YES, IT AMENDS THE NOTICE FILED (ON / /	
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
GIBBS FOR CONGRESS		day, year)	
GIBBS FOR CONGRESS		04/16/2024	1000.00
PO BOX 21			
1000/121	Transaction ID: 6BE4F3307BB	0D439785E	
LAKEVILLE OH 44638-002	Occupation		
LAKEVILLE OH 44638-002	21		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
FRIENDS OF GLENN THOMPSON		day, year)	
THENDO OF GEETH THOM CON		04/16/2024	2000.00
400 N MICHAEL ST			
	Transaction ID: 626163DF7344	3423DAF8	
SAINT MARYS PA 15857-115	Occupation 52		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
BAKER FOR SENATE		day, year)	
DAILER FOR SENATE		04/16/2024	1000.00
PO BOX 59			
	Transaction ID: 62A764E88AB	8E4282B80	
LEHMAN PA 18627-005	Occupation		
	59		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
		,, , ,	
	Occupation		
	Occupation		
E FULL NAME MANUNG ADDDESS AND ZID CODE	N (5)	Date (month,	Amount
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	day, year)	,
	Occupation		

