

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 Friends of Glenn Thompson

ADDRESS (number and street) PO Box 1112 State College PA 16804 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00444620 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT PA 05

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 04 / 01 / 2015 through 06 / 30 / 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 Katherine Bobeck

Signature of Treasurer Katherine Bobeck [Electronically Filed] Date 07 / 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

**Friends of Glenn Thompson**

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

	<b>COLUMN A This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	<input type="text" value="109893.14"/>	<input type="text" value="227549.16"/>
(b) Total Contribution Refunds (from Line 20(d)) .....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	<input type="text" value="109893.14"/>	<input type="text" value="227549.16"/>
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	<input type="text" value="108531.84"/>	<input type="text" value="298885.43"/>
(b) Total Offsets to Operating Expenditures (from Line 14).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	<input type="text" value="108531.84"/>	<input type="text" value="298885.43"/>
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<input type="text" value="290135.55"/>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<input type="text" value="0.00"/>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<input type="text" value="0.00"/>	

**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

Friends of Glenn Thompson

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2015 To: M M / D D / Y Y Y Y 06 / 30 / 2015

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).....	57250.00	145291.17
(ii) Unitemized.....	8055.20	12970.05
(iii) TOTAL of contributions from individuals ▶	65305.20	158261.22
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	44587.94	69287.94
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	109893.14	227549.16
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	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	8.39	51.47
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	109901.53	227600.63

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	108531.84	298885.43
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	14000.00	19000.00
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	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	122531.84	317885.43

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	302765.86
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	109901.53
25. SUBTOTAL (add Line 23 and Line 24).....	412667.39
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	122531.84
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	290135.55

**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 76  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Clark**

Mailing Address 1300 Pennsylvania Avenue  
Suite 700

City Washington State DC Zip Code 20004

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

Name of Employer Strategic Marketing Internatio Occupation 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  
 04 / 10 / 2015

**Transaction ID : 0012148**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert J. Gray**

Mailing Address 6354 Alderman Dr

City Alexandria State VA Zip Code 22315

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

Name of Employer self Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 04 / 29 / 2015

**Transaction ID : 0012153**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Georgetta A. Blackburn**

Mailing Address 1100 Constitution Dr

City Tarentum State PA Zip Code 15084

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

Name of Employer Blackburn's Medical Equipment Occupation Medical equipment

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  
 04 / 29 / 2015

**Transaction ID : 0012156**

Amount of Each Receipt this Period  
2200.00

**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 6 OF 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Charles Blackburn**

Mailing Address 1100 Constitution Avenue

City Tarentum State PA Zip Code 15084

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

Name of Employer self Occupation Pharmacy

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2015

**Transaction ID : 0012157**

Amount of Each Receipt this Period  
 300.00

800.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Dale W. Howard**

Mailing Address PO Box 193

City Hazel Hurst State PA Zip Code 16733

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

Name of Employer Self Occupation Howard Drilling

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 29 / 2015

**Transaction ID : 0012162**

Amount of Each Receipt this Period  
 2500.00

2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Richard L. Conklin**

Mailing Address 105 W Water St

City Lock Haven State PA Zip Code 17745

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

Name of Employer Lock Haven Hospital Occupation administrator

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 09 / 2015

**Transaction ID : 0012058**

Amount of Each Receipt this Period  
 100.00

600.00

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

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

2900.00

**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 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Paul A. Zelinka**

Mailing Address 319 Tofrees Ave #135

City State Zip Code  
State College PA 16803

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

Name of Employer Occupation  
G & Z Ventures, LLC Personal Trainer

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  
05 / 09 / 2015

**Transaction ID : 0012060**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James Louis DeLattre**

Mailing Address 650 Glenn Rd

City State Zip Code  
State College PA 16803

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

Name of Employer Occupation  
Penn State University Research and Industrial Relationships

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  
05 / 09 / 2015

**Transaction ID : 0012064**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Frederick Sahakian**

Mailing Address 1016 Ballybunion Road

City State Zip Code  
State College PA 16801

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

Name of Employer Occupation  
Self Real Estate Developer

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  
05 / 09 / 2015

**Transaction ID : 0012065**

Amount of Each Receipt this Period  
500.00

**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 8 OF 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Donald K. Richwine**

Mailing Address 447 W. Arlington Rd

City Erie State PA Zip Code 16509-2265

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

Name of Employer Precision Profiles Occupation Plastics

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2015

**Transaction ID : 0012143**

Amount of Each Receipt this Period  
 750.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John Hornaman**

Mailing Address 4837 Summer Street

City Erie State PA Zip Code 16509

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

Name of Employer Pennsylvania State Occupation Representative

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 10 / 2015

**Transaction ID : 0012144**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas Kruse**

Mailing Address 7300 Chameleon Way

City Sarasota State FL Zip Code 34241

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

Name of Employer HoverRound Occupation Business 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  
 05 / 11 / 2015

**Transaction ID : 0012163**

Amount of Each Receipt this Period  
 500.00

**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 9 OF 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John Letizia**

Mailing Address 140 Garnet Street

City Johnstown State PA Zip Code 15909

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

Name of Employer Laurel Medical Supplies Occupation Health Care Worker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 15 / 2015

**Transaction ID : 0012166**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. David Martine**

Mailing Address 1729 Bay Avenue

City Erie State PA Zip Code 16505

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

Name of Employer Gannon University Occupation Faculty

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 15 / 2015

**Transaction ID : 0012168**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael A. McCormick**

Mailing Address PO Box 1205

City Erie State PA Zip Code 16512

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

Name of Employer Erie Beer Co. Occupation 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  
 05 / 28 / 2015

**Transaction ID : 0012088**

Amount of Each Receipt this Period  
 500.00

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

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

3250.00

**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 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Philip S. English**

Mailing Address 1050 Connecticut Ave NW

City Washington State DC Zip Code 20036

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

Name of Employer Arent Fox Law Firm Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1091.17**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 28 / 2015**

**Transaction ID : 0012089**

Amount of Each Receipt this Period  
**750.00**

**B.** Full Name (Last, First, Middle Initial)  
**James Semple**

Mailing Address 6501 Heidler Rd

City Fairview State PA Zip Code 16415

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

Name of Employer Anesthesia Consultants of Erie Occupation MD, DO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 28 / 2015**

**Transaction ID : 0012090**

Amount of Each Receipt this Period  
**750.00**

**C.** Full Name (Last, First, Middle Initial)  
**Robert J. Lowther Jr.**

Mailing Address 12737 Forrest Dr.

City Edinboro State PA Zip Code 16412

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

Name of Employer Great Lakes Case and Cabinet Sales Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 28 / 2015**

**Transaction ID : 0012091**

Amount of Each Receipt this Period  
**750.00**

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

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

**2250.00**

**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 76  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Terrence W. Cavanaugh**

Mailing Address 6300 Lake Shore Dr

City Erie State PA Zip Code 16505

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

Name of Employer Occupation  
Erie Insurance Group Insurance Agent

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2015

**Transaction ID : 0012094**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph J. Kelly**

Mailing Address 1250 Tower Lane

City Erie State PA Zip Code 16505

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

Name of Employer Occupation  
Hubbard-Bert, Inc. Employee Benefit Programs

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2015

**Transaction ID : 0012126**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mark J. Salvia**

Mailing Address 5725 Thomas Rd

City Fairview State PA Zip Code 16415

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

Name of Employer Occupation  
Hubbard-Bert, Inc. Employee Benefit Programs

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2015

**Transaction ID : 0012127**

Amount of Each Receipt this Period  
 500.00

**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 12 OF 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Mark J. Gusek**

Mailing Address 5717 Clinton Dr.

City Erie State PA Zip Code 16509

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

Name of Employer The Village at Luther Square Occupation Administrator

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2015

**Transaction ID : 0012128**

Amount of Each Receipt this Period  
 700.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael E. Houseknecht**

Mailing Address 1966 W. Gatesburg Rd

City Warriors Mark State PA Zip Code 16877

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

Name of Employer Best Line Equipment Occupation 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  
 05 / 28 / 2015

**Transaction ID : 0012129**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Torie L. Houseknecht**

Mailing Address 1966 W. Gatesburg Rd

City Warriors Mark State PA Zip Code 16877

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

Name of Employer self Occupation Homemaker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2015

**Transaction ID : 0012131**

Amount of Each Receipt this Period  
 2700.00

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

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

6100.00

**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 13 OF 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**C. Grant Miller**

Mailing Address 493 Mackeyville Road

City Mill Hall	State PA	Zip Code 17751
-------------------	-------------	-------------------

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

Name of Employer Miller Auto Sales	Occupation Business Owner
---------------------------------------	------------------------------

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  
 05 / 28 / 2015

**Transaction ID : 0012134**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert S. Ramm**

Mailing Address 101 Beech Tree Lane

City Lock Haven	State PA	Zip Code 17745
--------------------	-------------	-------------------

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

Name of Employer self	Occupation Farmer
--------------------------	----------------------

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  
 05 / 28 / 2015

**Transaction ID : 0012136**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Carl L. Watkins**

Mailing Address 23 Griswold CT

City Sterling	State VA	Zip Code 20165
------------------	-------------	-------------------

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

Name of Employer self	Occupation Business development
--------------------------	------------------------------------

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  
 05 / 28 / 2015

**Transaction ID : 0012137**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

**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 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Wise**

Mailing Address 1290 Arbutus Drive

City Lock Haven State PA Zip Code 17745

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

Name of Employer Self Occupation Chiropractor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 28 / 2015

**Transaction ID : 0012139**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Blaise Alexander**

Mailing Address 125 Allendale Dr.

City Montoursville State PA Zip Code 17754

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

Name of Employer Blaise Alexander Dealerships Occupation Auto Dealer

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 05 / 31 / 2015

**Transaction ID : 0012099**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Richard L. Conklin**

Mailing Address 105 W Water St

City Lock Haven State PA Zip Code 17745

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

Name of Employer Lock Haven Hospital Occupation administrator

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 02 / 2015

**Transaction ID : 0012102**

Amount of Each Receipt this Period  
 100.00

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

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

1350.00

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

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

FOR LINE NUMBER: PAGE 15 OF 76  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Betty B. Schantz Dr.**

Mailing Address 831 Island Rd

City Lock Haven State PA Zip Code 17745

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

Name of Employer Lock Haven university Occupation Professor

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2015

**Transaction ID : 0012103**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Micah Clausen**

Mailing Address 8 Caroline Ave

City Lock Haven State PA Zip Code 17745

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

Name of Employer Advantage Sales Occupation Salesperson

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 02 / 2015

**Transaction ID : 0012104**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James E. Walsh Jr.**

Mailing Address PO Box 596

City Waterloo State IA Zip Code 50704

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

Name of Employer self 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 Y  
 06 / 02 / 2015

**Transaction ID : 0012114**

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: PAGE 16 OF 76  
(check only one)  
 11a 12   
  11b 13a   
  11c 13b   
  11d 14   
  15

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NAME OF COMMITTEE (In Full)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Van G. Miller**

Mailing Address **PO Box 2817**  
**1111W. San Marnan Dr**

City **Waterloo** State **IA** Zip Code **50704**

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

Name of Employer **The VGM Group** Occupation **Home Medical Equipment**

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  
**06 / 02 / 2015**

**Transaction ID : 0012115**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**Robert J. Gray**

Mailing Address **6354 Alderman Dr**

City **Alexandria** State **VA** Zip Code **22315**

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

Name of Employer **self** Occupation **Consultant**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**550.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 02 / 2015**

**Transaction ID : 0012119**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert F. Brown Jr.**

Mailing Address **1601 Cherry St.**

City **Scranton** State **PA** Zip Code **18505**

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

Name of Employer **Andrew Browns Home Health Care Center** Occupation **Medical Supplies**

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  
**06 / 02 / 2015**

**Transaction ID : 0012120**

Amount of Each Receipt this Period  
**250.00**

**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 17 OF 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Gregory J. Rubino**

Mailing Address 520 Elizabeth Lane

City Erie State PA Zip Code 16505

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

Name of Employer Self Occupation Realtor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2015

**Transaction ID : 0012085**

Amount of Each Receipt this Period  
 750.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Vincent T. Ridikas**

Mailing Address 5080 Saybrooke Place

City Erie State PA Zip Code 16505

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

Name of Employer Compass Holdings Occupation Principal

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 04 / 2015

**Transaction ID : 0012086**

Amount of Each Receipt this Period  
 750.00

**C.** Full Name (Last, First, Middle Initial)  
**Gary A. Kriebel**

Mailing Address 93 Oak Ridge Drive

City Clarion State PA Zip Code 16214

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

Name of Employer Kriebel Gas Occupation Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2015

**Transaction ID : 0012171**

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 18 OF 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**James E. Kriebel**

Mailing Address 335 Highland Dr

City Shippenville State PA Zip Code 16254

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

Name of Employer Kriebel Minerals INC. Occupation President

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 12 / 2015

**Transaction ID : 0012172**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Gregory R. Kriebel**

Mailing Address 140 Shannon Dr

City Clarion State PA Zip Code 16214

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

Name of Employer Kriebel Gas Occupation Business Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 12 / 2015

**Transaction ID : 0012173**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**James V. Brant**

Mailing Address 99 Jenks St.

City Brookville State PA Zip Code 15825

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

Name of Employer Kriebel Group Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 12 / 2015

**Transaction ID : 0012175**

Amount of Each Receipt this Period  
 500.00

**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 19 OF 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Shane Kriebel**

Mailing Address 124 Bigley Rd

City Shippenville State PA Zip Code 16254

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

Name of Employer Kriebel Minerals INC. Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 12 / 2015

**Transaction ID : 0012176**

Amount of Each Receipt this Period  
 1200.00

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Milissa Bauer**

Mailing Address 338 Corbett Lane

City Clarion State PA Zip Code 16214

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

Name of Employer Kriebel Group Occupation Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 12 / 2015

**Transaction ID : 0012177**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**John C. Neyhart**

Mailing Address 2205 Teaberry Lane

City Lock Haven State PA Zip Code 17745

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

Name of Employer Self Occupation Education Materials

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 06 / 12 / 2015

**Transaction ID : 0012180**

Amount of Each Receipt this Period  
 250.00

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

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

2450.00

**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 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Robert J. Matheney**

Mailing Address 106 South Parsons Drive

City State Zip Code  
Mill Hall PA 17751

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

Name of Employer Occupation  
First Affiliated Insurance Group President

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  
 06 / 12 / 2015

**Transaction ID : 0012181**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**A. Curtin Candor III**

Mailing Address 211 West Church Street

City State Zip Code  
Lock Haven PA 17745

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

Name of Employer Occupation  
self Restaurateur

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  
 06 / 12 / 2015

**Transaction ID : 0012182**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John A. Gummo**

Mailing Address 247 Sugar Run Rd.

City State Zip Code  
Beech Creek PA 16822

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

Name of Employer Occupation  
Self Restaurant Design

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  
 06 / 12 / 2015

**Transaction ID : 0012183**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

**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 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**James Berkebile**

Mailing Address 239 S. Jones Street  
PO Box 394

City Lock Haven State PA Zip Code 17745

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

Name of Employer self Occupation Realtor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2015

**Transaction ID : 0012184**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James Maguire Sr.**

Mailing Address PO Box 241

City McElhattan State PA Zip Code 17748

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

Name of Employer retired 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  
 06 / 12 / 2015

**Transaction ID : 0012185**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Thomas H. Bossert**

Mailing Address 333 Beech Creek Avenue

City Mill Hall State PA Zip Code 17751

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

Name of Employer Clinton County Occupation Commissioner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2015

**Transaction ID : 0012186**

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 22 OF 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Sharanjit Singh**

Mailing Address 586 McElhattan Dr  
PO Box 596

City McElhattan State PA Zip Code 17748

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

Name of Employer Bald Eagle Truck Stop Occupation Restaurant Manager

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  
 06 / 12 / 2015

**Transaction ID : 0012187**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Eric C. Nicholson**

Mailing Address 2550 Shingletown Rd

City State College State PA Zip Code 16801

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

Name of Employer Centre Concrete Occupation Manager

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  
 06 / 19 / 2015

**Transaction ID : 0012188**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. George B. Duke**

Mailing Address 580 E. Main Street

City Bradford State PA Zip Code 16701

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

Name of Employer Zippo Manufacturing Co. Occupation Chairman

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  
 06 / 22 / 2015

**Transaction ID : 0012194**

Amount of Each Receipt this Period  
2700.00

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

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

4700.00

**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 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Kay F. Barker**

Mailing Address 160 Dartmouth Lane

City State Zip Code  
State College PA 16803

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

Name of Employer Occupation  
retired 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  
 06 / 22 / 2015

**Transaction ID : 0012195**

Amount of Each Receipt this Period  
 2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Walter D. Barker**

Mailing Address 160 Dartmouth Lane

City State Zip Code  
State College PA 16803

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

Name of Employer Occupation  
Pyrotechnics Management Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2015

**Transaction ID : 0012196**

Amount of Each Receipt this Period  
 2700.00

**C.** Full Name (Last, First, Middle Initial)  
**Richard L. Conklin**

Mailing Address 105 W Water St

City State Zip Code  
Lock Haven PA 17745

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

Name of Employer Occupation  
Lock Haven Hospital administrator

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : 0012278**

Amount of Each Receipt this Period  
 100.00

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

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

5500.00

**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 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Willard Cline**

Mailing Address 1 Longfellow Ave

City Bradford State PA Zip Code 16701

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

Name of Employer Cline Oil Occupation 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  
 06 / 30 / 2015

**Transaction ID : 0012279**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Chris F. Fette**

Mailing Address 6103 Volkman Rd

City Erie State PA Zip Code 16506

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

Name of Employer Transportation Equipment Supply Co. Occupation Manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : 0012280**

Amount of Each Receipt this Period  
 750.00

**C.** Full Name (Last, First, Middle Initial)  
**Stephen M. Krentzman**

Mailing Address 810 Red Gate Rd

City State College State PA Zip Code 16801

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

Name of Employer Self Occupation Business Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : 0012281**

Amount of Each Receipt this Period  
 1000.00

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

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

3250.00



**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 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Clark**

Mailing Address 1300 Pennsylvania Avenue  
Suite 700

City Washington State DC Zip Code 20004

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

Name of Employer Strategic Marketing Internatio 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  
 06 / 30 / 2015

**Transaction ID : 0012290**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Edward J. Anderson**

Mailing Address PO Box 576

City Huntingdon State PA Zip Code 16652

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

Name of Employer retired Occupation Contractors

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  
 06 / 30 / 2015

**Transaction ID : 0012291**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Craig Lee Mayer**

Mailing Address 221 Central Avenue

City Warren State PA Zip Code 16365

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

Name of Employer PGE Energy 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  
 06 / 30 / 2015

**Transaction ID : 0012293**

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)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 26 OF 76

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NAME OF COMMITTEE (In Full)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Arthur J. Stewart**

Mailing Address 7 Branch Street

City Warren State PA Zip Code 16365

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

Name of Employer Duhring Resources Occupation partner

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : 0012294**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

57250.00

**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 76  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Nisource Inc. PAC**

Mailing Address 200 Civic Center Drive

City Columbus State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C** C00051979

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  
 04 / 10 / 2015

**Transaction ID : 0012149**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AGC PAC**

Mailing Address 2300 Wilson Blvd Suite 400

City Arlington State VA Zip Code 22201

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

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  
 04 / 10 / 2015

**Transaction ID : 0012150**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Agri Mark Legislation & Education Committee**

Mailing Address PO Box 5800

City Lawrence State MA Zip Code 01842

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

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  
 04 / 29 / 2015

**Transaction ID : 0012151**

Amount of Each Receipt this Period  
 250.00

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

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

2750.00

**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 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**CornPac**

Mailing Address 122 C Street NW Suite 510

City Washington State DC Zip Code 20001-2109

FEC ID number of contributing federal political committee. **C** C00444620

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  
 04 / 29 / 2015

**Transaction ID : 0012152**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Hunton & Williams, LLP**

Mailing Address 1900 K Street N.W.

City Washington State DC Zip Code 20006

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

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  
 04 / 29 / 2015

**Transaction ID : 0012154**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Independent Bakers Association BAKEPAC**

Mailing Address 1223 Potomac St N.W.

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C** C00437061

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  
 05 / 09 / 2015

**Transaction ID : 0012061**

Amount of Each Receipt this Period  
 350.00

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

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

3350.00

**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 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**American Society of Association Executives Apac**

Mailing Address 1575 I Street NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00041566

Name of Employer Occupation

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  
05 / 09 / 2015

**Transaction ID : 0012062**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Bankers Association PAC (bankpac)**

Mailing Address 1120 Connecticut Avenue NW  
Suite 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

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  
05 / 09 / 2015

**Transaction ID : 0012081**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**NFG FEDPAC**

Mailing Address 10 Lafayette Square

City Buffalo State NY Zip Code 14203

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 28 / 2015

**Transaction ID : 0012087**

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 30 OF 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Action Committee for Rural Electrification**

Mailing Address 4301 Wilson Boulevard

City State Zip Code  
Arlington VA 22203

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

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  
 05 / 28 / 2015

**Transaction ID : 0012132**

Amount of Each Receipt this Period  
 1500.00

**B.** Full Name (Last, First, Middle Initial)  
**Pride Mobility Products Corp PAC**

Mailing Address 182 Susquehanna Ave

City State Zip Code  
Exeter PA 18643

FEC ID number of contributing federal political committee. **C** C00388132

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  
 06 / 02 / 2015

**Transaction ID : 0012105**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Employees Political Action Committee**

Mailing Address 1550 Crystal Drive  
Crystal Square Two, Suite 300

City State Zip Code  
Arlington VA 22202

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

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  
 06 / 02 / 2015

**Transaction ID : 0012106**

Amount of Each Receipt this Period  
 1000.00

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

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

5000.00

**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 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Sanofi Pasteur, Inc. Political Action Committee**

Mailing Address Discovery Drive

City State Zip Code  
Swiftwater PA 18370

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

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  
 06 / 02 / 2015

**Transaction ID : 0012107**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**APRIA Healthcare PAC**

Mailing Address 26220 Enterprise Court

City State Zip Code  
Lake Forest CA 92630

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

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  
 06 / 02 / 2015

**Transaction ID : 0012108**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**National Roofing Contractors Association (roofpac)**

Mailing Address 324 Fourth Street NE

City State Zip Code  
Washington DC 20002

FEC ID number of contributing federal political committee. **C** C00244863

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  
 06 / 02 / 2015

**Transaction ID : 0012109**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

**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 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**International Paper PAC**

Mailing Address 1101 Pennsylvania Ave NW Suite 200

City Washington State DC Zip Code 20004

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

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  
 06 / 02 / 2015

**Transaction ID : 0012110**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Ice Cream Milk & Cheese**

Mailing Address 1250 H St NW Ste 900

City Washington State DC Zip Code 20005

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

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  
 06 / 02 / 2015

**Transaction ID : 0012111**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Committee for Advancement of Cotton**

Mailing Address PO Box 2995

City Cordova State TN Zip Code 38088

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

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  
 06 / 02 / 2015

**Transaction ID : 0012112**

Amount of Each Receipt this Period  
 1000.00

**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 33 OF 76
	<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)  
**Friends of Glenn Thompson**

**A. National Air Traffic Controllers Association PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1325 Massachusetts Avenue, NW  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C C00238725**  
 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  
 06 / 02 / 2015  
**Transaction ID : 0012113**  
 Amount of Each Receipt this Period  
 1000.00

**B. Philips Electronics North America Corporation Employees Poli**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1300 I St. NW Ste 1070 East  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C C00239780**  
 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  
 06 / 02 / 2015  
**Transaction ID : 0012116**  
 Amount of Each Receipt this Period  
 500.00

**C. VGM PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 2817  
 City Waterloo State IA Zip Code 50704  
 FEC ID number of contributing federal political committee. **C C00402545**  
 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  
 06 / 02 / 2015  
**Transaction ID : 0012117**  
 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 34 OF 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Invacare Corporation PAC**

Mailing Address One Invacare Way

City Elyria State OH Zip Code 44035

FEC ID number of contributing federal political committee. **C** C00249896

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  
 06 / 02 / 2015

**Transaction ID : 0012118**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**American Association for homecare**

Mailing Address 2011 Crystal Drive, Duite 725

City Arlington State VA Zip Code 22202

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

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  
 06 / 12 / 2015

**Transaction ID : 0012170**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Realtors Political Action Committee (R.P.A.C.)**

Mailing Address 430 N Michigan Ave

City Chicago State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

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  
 06 / 22 / 2015

**Transaction ID : 0012191**

Amount of Each Receipt this Period  
 1000.00

**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 35 OF 76
	<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	

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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Rain and Hail Insurance Society PAC**

Mailing Address 9200 Northpark Dr. Suite 300

City Johnston State IA Zip Code 50131

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

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  
 06 / 22 / 2015

**Transaction ID : 0012192**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**American Veterinary Medical Association Political Action Com**

Mailing Address 1910 Sunderland Place NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00114132

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  
 06 / 30 / 2015

**Transaction ID : 0012266**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Investment Company Institute PAC**

Mailing Address 1401 H Street NW #1200

City Washington State DC Zip Code 20005

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

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  
 06 / 30 / 2015

**Transaction ID : 0012267**

Amount of Each Receipt this Period  
 1000.00

**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: PAGE 36 OF 76  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Aircraft Owners and Pilots Association Political Action Comm**

Mailing Address 421 Aviation Way

City State Zip Code  
Frederick MD 21701

FEC ID number of contributing federal political committee. **C** C00131185

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  
 06 / 30 / 2015

**Transaction ID : 0012268**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Road to Victory PAC**

Mailing Address 1306 Belleview Blvd A-2

City State Zip Code  
Alexandria VA 22307

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

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  
 06 / 30 / 2015

**Transaction ID : 0012269**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**American Forest & Paper Association PAC**

Mailing Address 1101 K Street NW  
Suite 700

City State Zip Code  
Washington DC 20005

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

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  
 06 / 30 / 2015

**Transaction ID : 0012270**

Amount of Each Receipt this Period  
 1500.00

**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 37 OF 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**PPL People for Good Gvt - Federal Multicandidate Committee**

Mailing Address 2 North Ninth Street

City Allentown State PA Zip Code 18101

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

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  
 06 / 30 / 2015

**Transaction ID : 0012271**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**RPG PAC**

Mailing Address 1140 Connecticut Ave NW Suite 510

City Washington State DC Zip Code 20036

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

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  
 06 / 30 / 2015

**Transaction ID : 0012272**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Caterpillar Employees PAC**

Mailing Address 100 N Adams St

City Peoria State IL Zip Code 61629

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

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  
 06 / 30 / 2015

**Transaction ID : 0012273**

Amount of Each Receipt this Period  
 1000.00

**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 38 OF 76
	<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)  
**Friends of Glenn Thompson**

**A. Independent Bakers Association BAKEPAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1223 Potomac St N.W.

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C** C00437061

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : 0012274**

Amount of Each Receipt this Period  
750.00

**B. Friends of Fred Weaver**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 163

City Oil City State PA Zip Code 16301

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1237.94

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2015

**Transaction ID : 0012275**

Amount of Each Receipt this Period  
1237.94

**C. Firstenergy Political Action Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address 76 South Main Street

City Akron State OH Zip Code 44308

FEC ID number of contributing federal political committee. **C** C00140855

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  
 06 / 30 / 2015

**Transaction ID : 0012276**

Amount of Each Receipt this Period  
1000.00

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

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

2987.94

**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 76
	<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)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Tuesday Group Political Action Committee**

Mailing Address **PO Box 11586**

City **Washington** State **DC** Zip Code **20008**

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : 0012277**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**National Rifle Association of America Political Victory Fund**

Mailing Address **11250 Waples Mill Road**

City **Fairfax** State **VA** Zip Code **22030**

FEC ID number of contributing federal political committee. **C C00053553**

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  
**06 / 30 / 2015**

**Transaction ID : 0012288**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Highmark Health PAC of Highmark Inc.**

Mailing Address **1800 Center Street**

City **Camp Hill** State **PA** Zip Code **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  
**1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : 0012289**

Amount of Each Receipt this Period  
**1500.00**

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

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

**5000.00**

**44587.94**

**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 76
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Friends of Glenn Thompson**

**A.** Full Name (Last, First, Middle Initial)  
**Northwest Savings Bank**

Mailing Address 104 Winfield Drive

City Centre Hall State PA Zip Code 16828

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**51.47**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2015**

**Transaction ID : 0012402**

Amount of Each Receipt this Period  
**8.39**  
 interest income

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

**8.39**

**8.39**



**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 41 OF 76			
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Michael Russell</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2015
Mailing Address 506 Nimitz Ave		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : 0012006</b>
City State College	State PA Zip Code 16801	
Purpose of Disbursement advertising expenses, public relations	Category/Type 004	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Clyde Mighells</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2015
Mailing Address 111 Beck Lane		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 0012007</b>
City Howard	State PA Zip Code 16841	
Purpose of Disbursement advertising expenses, public relations	Category/Type 004	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Tara Sollman</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2015
Mailing Address 101 Beech St.		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : 0012008</b>
City Edinboro	State PA Zip Code 16412	
Purpose of Disbursement advertising expenses, public relations	Category/Type 004	
Candidate Name		
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3650.00
<b>TOTAL</b> 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 42 OF 76	
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. The Catalyst Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2015
Mailing Address 600 Pennsylvania Ave SE Suite 330		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : 0012009</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement fundraising event personnel fees 003 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. David Brent Pasquinelli</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2015
Mailing Address 3089 Shingletown Road		Amount of Each Disbursement this Period 6719.57 <b>Transaction ID : 0012415</b>
City State College State PA Zip Code 16801	Purpose of Disbursement payroll 001 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Cheryl Lynch</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2015
Mailing Address Po Box 285		Amount of Each Disbursement this Period 2733.34 <b>Transaction ID : 0012423</b>
City Spring Mills State PA Zip Code 16875	Purpose of Disbursement payroll 001 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12952.91
<b>TOTAL</b> 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 43 OF 76		
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Hold It Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2015
Mailing Address 3012 Enterprise Drive		Amount of Each Disbursement this Period 320.00
City State College	State PA Zip Code 16801	
Purpose of Disbursement Office rent	Category/Type 001	<b>Transaction ID : 0012010</b>
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. David Brent Pasquinelli</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2015
Mailing Address 3089 Shingletown Road		Amount of Each Disbursement this Period 561.40
City State College	State PA Zip Code 16801	
Purpose of Disbursement travel Exp-mileage reimbursement lodging	Category/Type 002	<b>Transaction ID : 0012050</b>
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. The Hope Fund of Penns Valley</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2015
Mailing Address PO Box 427		Amount of Each Disbursement this Period 500.00
City Centre Hall	State PA Zip Code 16828	
Purpose of Disbursement donations made toward charitable orgs	Category/Type 012	<b>Transaction ID : 0012012</b>
Candidate Name		
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1381.40
<b>TOTAL</b> 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 44 OF 76	
	<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)  
**Friends of Glenn Thompson**

**A. Huntingdon Co. Rep. Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 61

City: Huntingdon State: PA Zip Code: 16652

Purpose of Disbursement: Lincoln Day Banquet

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 03 / 2015

Amount of Each Disbursement this Period: 250.00

Transaction ID : 0012011

Category/Type: 001

**B. Comcast**

Full Name (Last, First, Middle Initial)  
Mailing Address 60 Decibel Rd

City: State College State: PA Zip Code: 16801

Purpose of Disbursement: telephone

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 03 / 2015

Amount of Each Disbursement this Period: 83.68

Transaction ID : 0012013

Category/Type: 001

**C. PA GOP**

Full Name (Last, First, Middle Initial)  
Mailing Address 112 State Street

City: Harrisburg State: PA Zip Code: 17101

Purpose of Disbursement: advertising expenses, public relations

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 06 / 2015

Amount of Each Disbursement this Period: 500.00

Transaction ID : 0012018

Category/Type: 004

**SUBTOTAL** of Disbursements This Page (optional) ..... 833.68

**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 45 OF 76	
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial)  
**A. Capital One**

Mailing Address PO Box 30285

City Salt Lake City State UT Zip Code 84130

Purpose of Disbursement advertising expenses, public relations

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 06 / 2015

Amount of Each Disbursement this Period: 115.21

Transaction ID : 0012020

Category/Type: 004

Full Name (Last, First, Middle Initial)  
**B. The Catalyst Group, LLC**

Mailing Address 600 Pennsylvania Ave SE Suite 330

City Washington State DC Zip Code 20003

Purpose of Disbursement fundraising event Exp-signage, printing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 06 / 2015

Amount of Each Disbursement this Period: 320.00

Transaction ID : 0012014

Category/Type: 003

Full Name (Last, First, Middle Initial)  
**c. United States Postal Service**

Mailing Address 54 McAllister Bldg

City State College State PA Zip Code 16801

Purpose of Disbursement office expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 04 / 06 / 2015

Amount of Each Disbursement this Period: 62.00

Transaction ID : 0012019

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 497.21

**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 46 OF 76			
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2015
Mailing Address 700 Cranberry Woods Dr		Amount of Each Disbursement this Period 25.57
City Cranberry Twp	State PA Zip Code 16066	
Purpose of Disbursement telephone	Category/Type 001	<b>Transaction ID : 0012017</b>
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Front Porch Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address 7669 Stagers Loop		Amount of Each Disbursement this Period 2900.00
City Delaware	State OH Zip Code 43015	
Purpose of Disbursement advertising expenses, public relations	Category/Type 004	<b>Transaction ID : 0012198</b>
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>C. Southern Clinton County Friends of NRA</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address 43 Fairway View Drive		Amount of Each Disbursement this Period 250.00
City Mill Hall	State PA Zip Code 17751	
Purpose of Disbursement advertising expenses, public relations	Category/Type 004	<b>Transaction ID : 0012199</b>
Candidate Name		
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3175.57
<b>TOTAL</b> 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 47 OF 76	
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Centre County GOP</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address 126 Presidents Drive		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : 0012200</b>
City State College	State PA Zip Code 16803	
Purpose of Disbursement advertising expenses, public relations	Category/Type 004	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. David Brent Pasquinelli</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2015
Mailing Address 3089 Shingletown Road		Amount of Each Disbursement this Period 970.81 <b>Transaction ID : 0012416</b>
City State College	State PA Zip Code 16801	
Purpose of Disbursement travel Exp-mileage reimbursement lodging	Category/Type 002	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Cheryl Lynch</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2015
Mailing Address Po Box 285		Amount of Each Disbursement this Period 758.94 <b>Transaction ID : 0012424</b>
City Spring Mills	State PA Zip Code 16875	
Purpose of Disbursement travel Exp-mileage reimbursement lodging	Category/Type 002	
Candidate Name		
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2029.75
<b>TOTAL</b> 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 76	
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue Service</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 15 / 2015</b>
Mailing Address Department of the Treasury		Amount of Each Disbursement this Period <b>3244.94</b>
City Ogden State UT Zip Code 84201	Purpose of Disbursement payroll taxes	<b>Transaction ID : 0012430</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Pennsylvania Department of Revenue</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 15 / 2015</b>
Mailing Address Strawberry Square		Amount of Each Disbursement this Period <b>381.60</b>
City Harrisburg State PA Zip Code 17128	Purpose of Disbursement payroll taxes	<b>Transaction ID : 0012433</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Hometown Sports</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 16 / 2015</b>
Mailing Address 469 Plum St.		Amount of Each Disbursement this Period <b>215.00</b>
City Bellefonte State PA Zip Code 16823	Purpose of Disbursement advertising expenses, public relations	<b>Transaction ID : 0012204</b>
Candidate Name	Category/Type <b>004</b>	
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3841.54</b>
<b>TOTAL</b> 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 76	
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Kelly-Thompson Victory Fund</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 16 / 2015</b>
Mailing Address <b>6758 St. Regis Blvd</b>		Amount of Each Disbursement this Period <b>2500.00</b> <b>Transaction ID : 0012201</b>
City <b>Hudson</b> State <b>OH</b> Zip Code <b>44236</b>	Purpose of Disbursement equipment and facility rental, catering <b>003</b> Category/Type	
Candidate Name	Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 16 / 2015</b>
Mailing Address <b>300 First Street, SE</b>		Amount of Each Disbursement this Period <b>59.42</b> <b>Transaction ID : 0012203</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003</b>	Purpose of Disbursement equipment and facility rental, catering <b>003</b> Category/Type	
Candidate Name	Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Clearfield County GOP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 16 / 2015</b>
Mailing Address <b>PO Box 305</b>		Amount of Each Disbursement this Period <b>275.00</b> <b>Transaction ID : 0012202</b>
City <b>Madera</b> State <b>PA</b> Zip Code <b>16661</b>	Purpose of Disbursement Lincoln Day Banquet <b>001</b> Category/Type	
Candidate Name	Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2834.42</b>
<b>TOTAL</b> 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 76			
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Highmark</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2015
Mailing Address 120 Fifth Ave		Amount of Each Disbursement this Period 202.92 <b>Transaction ID : 0012206</b>
City Pittsburgh	State PA	
Zip Code 15222	Purpose of Disbursement Insurance	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>B. Capital One</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2015
Mailing Address PO Box 30285		Amount of Each Disbursement this Period 332.07 <b>Transaction ID : 0012209</b>
City Salt Lake City	State UT	
Zip Code 84130	Purpose of Disbursement advertising expenses, public relations	Category/ Type 004
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>c. The Pennsylvania Future Fund</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2015
Mailing Address 80 Wambold Rd		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : 0012282</b>
City Souderton	State PA	
Zip Code 18964	Purpose of Disbursement equipment and facility rental, catering	Category/ Type 003
Candidate Name	Office Sought: <input 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: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5534.99
<b>TOTAL</b> 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 76			
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Barash Media</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 403 S. Allen Street		Amount of Each Disbursement this Period 650.00 <b>Transaction ID : 0012210</b>
City State College	State PA Zip Code 16801	
Purpose of Disbursement advertising expenses, public relations	Category/Type 004	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. David Brent Pasquinelli</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2015
Mailing Address 3089 Shingletown Road		Amount of Each Disbursement this Period 264.60 <b>Transaction ID : 0012418</b>
City State College	State PA Zip Code 16801	
Purpose of Disbursement travel Exp-mileage reimbursement lodging	Category/Type 002	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Tara Sollman</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 101 Beech St.		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : 0012211</b>
City Edinboro	State PA Zip Code 16412	
Purpose of Disbursement advertising expenses, public relations	Category/Type 004	
Candidate Name		
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1314.60
<b>TOTAL</b> 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 76		
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Michael Russell</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 506 Nimitz Ave		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : 0012212</b>
City State Zip Code State College PA 16801	Purpose of Disbursement advertising expenses, public relations 004 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Clyde Mighells</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 111 Beck Lane		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 0012213</b>
City State Zip Code Howard PA 16841	Purpose of Disbursement advertising expenses, public relations 004 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. The Catalyst Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 600 Pennsylvania Ave SE Suite 330		Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : 0012214</b>
City State Zip Code Washington DC 20003	Purpose of Disbursement fundraising event personnel fees 003 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6750.00
<b>TOTAL</b> 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 76			
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. United Healthcare Insurance Company</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address PO Box 371337			Amount of Each Disbursement this Period 137.55 <b>Transaction ID : 0012216</b>
City Pittsburgh	State PA	Zip Code 15250	
Purpose of Disbursement Insurance	Candidate Name		Category/ Type 001
Office Sought: <input 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: District:			

Full Name (Last, First, Middle Initial) <b>B. David Brent Pasquinelli</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address 3089 Shingletown Road			Amount of Each Disbursement this Period 6719.57 <b>Transaction ID : 0012417</b>
City State College	State PA	Zip Code 16801	
Purpose of Disbursement payroll	Candidate Name		Category/ Type 001
Office Sought: <input 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: District:			

Full Name (Last, First, Middle Initial) <b>c. Cheryl Lynch</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2015
Mailing Address Po Box 285			Amount of Each Disbursement this Period 2733.34 <b>Transaction ID : 0012425</b>
City Spring Mills	State PA	Zip Code 16875	
Purpose of Disbursement payroll	Candidate Name		Category/ Type 001
Office Sought: <input 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: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9590.46
<b>TOTAL</b> 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 76	
	<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)  
**Friends of Glenn Thompson**

**A. Hold It Associates**

Full Name (Last, First, Middle Initial)  
Mailing Address 3012 Enterprise Drive

City State Zip Code  
State College PA 16801

Purpose of Disbursement  
Office rent

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
05 / 01 / 2015

Amount of Each Disbursement this Period  
320.00

Transaction ID : 0012215

Category/Type: 001

**B. Front Porch Strategies**

Full Name (Last, First, Middle Initial)  
Mailing Address 7669 Stagers Loop

City State Zip Code  
Delaware OH 43015

Purpose of Disbursement  
advertising expenses, public relations

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
05 / 06 / 2015

Amount of Each Disbursement this Period  
2900.00

Transaction ID : 0012217

Category/Type: 004

**c. Michael Russell**

Full Name (Last, First, Middle Initial)  
Mailing Address 506 Nimitz Ave

City State Zip Code  
State College PA 16801

Purpose of Disbursement  
advertising expenses, public relations

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
05 / 06 / 2015

Amount of Each Disbursement this Period  
337.40

Transaction ID : 0012218

Category/Type: 004

**SUBTOTAL** of Disbursements This Page (optional) ..... 3557.40

**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 76		
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Venango Newspapers</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address 1510 West First Street		Amount of Each Disbursement this Period 292.00 <b>Transaction ID : 0012219</b>
City Oil City	State Zip Code PA 16301	
Purpose of Disbursement advertising expenses, public relations	Category/Type 004	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address 54 McAllister Bldg		Amount of Each Disbursement this Period 220.00 <b>Transaction ID : 0012221</b>
City State College	State Zip Code PA 16801	
Purpose of Disbursement office expenses	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Comcast</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2015
Mailing Address 60 Decibel Rd		Amount of Each Disbursement this Period 83.68 <b>Transaction ID : 0012220</b>
City State College	State Zip Code PA 16801	
Purpose of Disbursement telephone	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	595.68
<b>TOTAL</b> 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 76	
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Capital One</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2015
Mailing Address PO Box 30285		Amount of Each Disbursement this Period 115.60 <b>Transaction ID : 0012231</b>
City Salt Lake City	State UT	
Zip Code 84130	Purpose of Disbursement advertising expenses, public relations	Category/ Type 004
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2015
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 217.95 <b>Transaction ID : 0012223</b>
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement equipment and facility rental, catering	Category/ Type 003
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2015
Mailing Address 700 Cranberry Woods Dr		Amount of Each Disbursement this Period 25.60 <b>Transaction ID : 0012222</b>
City Cranberry Twp	State PA	
Zip Code 16066	Purpose of Disbursement telephone	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	359.15
<b>TOTAL</b> 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 76			
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 1593 Spring Hill Road, Suite 400		Amount of Each Disbursement this Period 24.75 <b>Transaction ID : 0012283</b>
City Tysons Corner	State VA Zip Code 22182	
Purpose of Disbursement fees Assoc W/ online donations election	Category/Type 012	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Cormans Mailing Service</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2015
Mailing Address 213 Luse Lane		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : 0012232</b>
City Centre Hall	State PA Zip Code 16828	
Purpose of Disbursement Postage	Category/Type 003	
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Filpac, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2015
Mailing Address 3624 Lieb Street		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : 0012234</b>
City Columbus	State OH Zip Code 43214	
Purpose of Disbursement software (filpac) expenses	Category/Type 001	
Candidate Name		
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1624.75
<b>TOTAL</b> 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 76			
	<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)  
**Friends of Glenn Thompson**

**A. Internal Revenue Service**

Full Name (Last, First, Middle Initial)  
Mailing Address Department of the Treasury

City Ogden State UT Zip Code 84201

Purpose of Disbursement payroll taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 15 / 2015

Amount of Each Disbursement this Period: 3244.94

Transaction ID : 0012431

Category/Type: 001

**B. Pennsylvania Department of Revenue**

Full Name (Last, First, Middle Initial)  
Mailing Address Strawberry Square

City Harrisburg State PA Zip Code 17128

Purpose of Disbursement payroll taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 15 / 2015

Amount of Each Disbursement this Period: 381.60

Transaction ID : 0012434

Category/Type: 001

**c. Cheryl Lynch**

Full Name (Last, First, Middle Initial)  
Mailing Address Po Box 285

City Spring Mills State PA Zip Code 16875

Purpose of Disbursement travel Exp-mileage reimbursement lodging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 15 / 2015

Amount of Each Disbursement this Period: 1042.99

Transaction ID : 0012426

Category/Type: 002

**SUBTOTAL** of Disbursements This Page (optional) ..... 4669.53

**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 76			
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial)  
**A. Highmark**

Mailing Address 120 Fifth Ave

City Pittsburgh State PA Zip Code 15222

Purpose of Disbursement Insurance

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 19 / 2015

Amount of Each Disbursement this Period: 202.92

Transaction ID : 0012235

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**B. CMDI**

Mailing Address 1593 Spring Hill Road, Suite 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement fees Assoc W/ online donations election

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 20 / 2015

Amount of Each Disbursement this Period: 137.95

Transaction ID : 0012284

Category/Type: 012

Full Name (Last, First, Middle Initial)  
**C. CMDI**

Mailing Address 1593 Spring Hill Road, Suite 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement fees Assoc W/ online donations election

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 05 / 27 / 2015

Amount of Each Disbursement this Period: 7.60

Transaction ID : 0012285

Category/Type: 012

**SUBTOTAL** of Disbursements This Page (optional) ..... 348.47

**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 76			
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Michael Russell</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 506 Nimitz Ave		Amount of Each Disbursement this Period 1250.00 <b>Transaction ID : 0012237</b>
City State Zip Code State College PA 16801	Purpose of Disbursement advertising expenses, public relations 004 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Clyde Mighells</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 111 Beck Lane		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 0012238</b>
City State Zip Code Howard PA 16841	Purpose of Disbursement advertising expenses, public relations 004 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Tara Sollman</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 101 Beech St.		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : 0012241</b>
City State Zip Code Edinboro PA 16412	Purpose of Disbursement advertising expenses, public relations 004 Category/Type	
Candidate Name	Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3650.00
<b>TOTAL</b> 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 76			
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. The Catalyst Group, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 600 Pennsylvania Ave SE Suite 330			Amount of Each Disbursement this Period 3500.00 <b>Transaction ID : 0012239</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement fundraising event personnel fees		Category/ Type 003	
Candidate Name			
Office Sought: <input 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: District:			

Full Name (Last, First, Middle Initial) <b>B. The Catalyst Group, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 600 Pennsylvania Ave SE Suite 330			Amount of Each Disbursement this Period 444.20 <b>Transaction ID : 0012240</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement fundraising event Exp-signage, printing		Category/ Type 003	
Candidate Name			
Office Sought: <input 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: District:			

Full Name (Last, First, Middle Initial) <b>c. David Brent Pasquinelli</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 3089 Shingletown Road			Amount of Each Disbursement this Period 6719.57 <b>Transaction ID : 0012419</b>
City State College	State PA	Zip Code 16801	
Purpose of Disbursement payroll		Category/ Type 001	
Candidate Name			
Office Sought: <input 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: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10663.77
<b>TOTAL</b> 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 76			
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Cheryl Lynch</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address Po Box 285		Amount of Each Disbursement this Period 2733.34 <b>Transaction ID : 0012427</b>
City Spring Mills	State PA	
Purpose of Disbursement payroll		Category/ Type 001
Candidate Name		
Office Sought: <input 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: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Hold It Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2015
Mailing Address 3012 Enterprise Drive		Amount of Each Disbursement this Period 320.00 <b>Transaction ID : 0012242</b>
City State College	State PA	
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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2015
Mailing Address 1593 Spring Hill Road, Suite 400		Amount of Each Disbursement this Period 12.50 <b>Transaction ID : 0012399</b>
City Tysons Corner	State VA	
Purpose of Disbursement fees Assoc W/ online donations election		Category/ Type 012
Candidate Name		
Office Sought: <input 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: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3065.84
<b>TOTAL</b> 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 76			
	<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)  
**Friends of Glenn Thompson**

**A. Front Porch Strategies**

Full Name (Last, First, Middle Initial)  
Mailing Address 7669 Stagers Loop

City Delaware State OH Zip Code 43015

Purpose of Disbursement advertising expenses, public relations

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 04 / 2015

Amount of Each Disbursement this Period: 2900.00

Transaction ID : 0012247

Category/Type: 004

**B. Capital One**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 30285

City Salt Lake City State UT Zip Code 84130

Purpose of Disbursement advertising expenses, public relations

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 04 / 2015

Amount of Each Disbursement this Period: 509.15

Transaction ID : 0012249

Category/Type: 004

**C. Lock Haven University Foundation**

Full Name (Last, First, Middle Initial)  
Mailing Address 10 Susquehanna Ave

City Lock Haven State PA Zip Code 17745

Purpose of Disbursement donations made toward charitable orgs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement: 06 / 04 / 2015

Amount of Each Disbursement this Period: 400.00

Transaction ID : 0012250

Category/Type: 012

**SUBTOTAL** of Disbursements This Page (optional) ..... 3809.15

**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 64 OF 76			
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. United Healthcare Insurance Company</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2015
Mailing Address PO Box 371337			Amount of Each Disbursement this Period 137.55
City Pittsburgh	State PA	Zip Code 15250	Transaction ID : 0012243
Purpose of Disbursement Insurance		001 Category/ Type	
Candidate Name			
Office Sought: <input 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: District:			

Full Name (Last, First, Middle Initial) <b>B. Cormans Mailing Service</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2015
Mailing Address 213 Luse Lane			Amount of Each Disbursement this Period 335.00
City Centre Hall	State PA	Zip Code 16828	Transaction ID : 0012248
Purpose of Disbursement Mail house fees		006 Category/ Type	
Candidate Name			
Office Sought: <input 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: District:			

Full Name (Last, First, Middle Initial) <b>C. Comcast</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2015
Mailing Address 60 Decibel Rd			Amount of Each Disbursement this Period 83.68
City State College	State PA	Zip Code 16801	Transaction ID : 0012244
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: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	556.23
<b>TOTAL</b> 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 76			
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. David Brent Pasquinelli</b>			Date of Disbursement MM / DD / YYYY 06 / 06 / 2015		
Mailing Address 3089 Shingletown Road			Amount of Each Disbursement this Period 479.15		
City State College	State PA	Zip Code 16801	Transaction ID : 0012420		
Purpose of Disbursement travel Exp-mileage reimbursement lodging		Category/ Type 002			
Candidate Name					
Office Sought: <input 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: District:					

Full Name (Last, First, Middle Initial) <b>B. Cheryl Lynch</b>			Date of Disbursement MM / DD / YYYY 06 / 06 / 2015		
Mailing Address Po Box 285			Amount of Each Disbursement this Period 1375.15		
City Spring Mills	State PA	Zip Code 16875	Transaction ID : 0012428		
Purpose of Disbursement travel Exp-mileage reimbursement lodging		Category/ Type 002			
Candidate Name					
Office Sought: <input 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: District:					

Full Name (Last, First, Middle Initial) <b>c. Schlesinger Communications, Inc</b>			Date of Disbursement MM / DD / YYYY 06 / 10 / 2015		
Mailing Address 21 East Main St			Amount of Each Disbursement this Period 1750.00		
City Lock Haven	State PA	Zip Code 17745	Transaction ID : 0012254		
Purpose of Disbursement advertising expenses, public relations		Category/ Type 004			
Candidate Name					
Office Sought: <input 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: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3604.30
<b>TOTAL</b> 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 66 OF 76
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. WPSU Fund</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2015
Mailing Address 100 Innovation Blvd		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : 0012257</b>
City University Park	State PA	
Zip Code 16802	Purpose of Disbursement advertising expenses, public relations	Category/ Type 004
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>B. McKean Aviation</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2015
Mailing Address 212 Airport Drive		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : 0012258</b>
City Lewis Run	State PA	
Zip Code 16738	Purpose of Disbursement advertising expenses, public relations	Category/ Type 004
Candidate Name	Office Sought: <input 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: District:	

Full Name (Last, First, Middle Initial) <b>c. Centre County GOP</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2015
Mailing Address 126 Presidents Drive		Amount of Each Disbursement this Period 900.00 <b>Transaction ID : 0012251</b>
City State College	State PA	
Zip Code 16803	Purpose of Disbursement dues for Republican Party	Category/ Type 001
Candidate Name	Office Sought: <input 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: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6400.00
<b>TOTAL</b> 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 67 OF 76	
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Cormans Mailing Service</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2015
Mailing Address 213 Luse Lane		Amount of Each Disbursement this Period 150.00
City Centre Hall	State PA Zip Code 16828	
Purpose of Disbursement Mail house fees	Category/Type 006	<b>Transaction ID : 0012255</b>
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2015
Mailing Address 700 Cranberry Woods Dr		Amount of Each Disbursement this Period 25.60
City Cranberry Twp	State PA Zip Code 16066	
Purpose of Disbursement telephone	Category/Type 001	<b>Transaction ID : 0012252</b>
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>C. Expedia</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2015
Mailing Address 108th Avenue NE		Amount of Each Disbursement this Period 242.02
City Bellevue	State WA Zip Code 98004	
Purpose of Disbursement travel Exp-mileage reimbursement lodging	Category/Type 002	<b>Transaction ID : 0012405</b>
Candidate Name		
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	417.62
<b>TOTAL</b> 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 68 OF 76	
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial)  
**A. US Airway**

Mailing Address 2535 Fox Hill Road

City State Zip Code  
State College PA 16803

Purpose of Disbursement  
travel Exp-mileage reimbursement lodging

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 12 / 2015

Amount of Each Disbursement this Period  
562.70

Transaction ID : 0012406

Category/Type  
002

Full Name (Last, First, Middle Initial)  
**B. Internal Revenue Service**

Mailing Address Department of the Treasury

City State Zip Code  
Ogden UT 84201

Purpose of Disbursement  
payroll taxes

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 15 / 2015

Amount of Each Disbursement this Period  
3244.94

Transaction ID : 0012432

Category/Type  
001

Full Name (Last, First, Middle Initial)  
**c. Pennsylvania Department of Revenue**

Mailing Address Strawberry Square

City State Zip Code  
Harrisburg PA 17128

Purpose of Disbursement  
payroll taxes

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 15 / 2015

Amount of Each Disbursement this Period  
381.60

Transaction ID : 0012435

Category/Type  
001

**SUBTOTAL** of Disbursements This Page (optional)..... 4189.24

**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 69 OF 76			
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Boal Barn Players, Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2015		
Mailing Address PO Box 556			Amount of Each Disbursement this Period 3250.00		
City Boalsburg	State PA	Zip Code 16827	Transaction ID : 0012259		
Purpose of Disbursement advertising expenses, public relations		Category/ Type 004			
Candidate Name					
Office Sought: <input 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: District:					

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2015		
Mailing Address 1593 Spring Hill Road, Suite 400			Amount of Each Disbursement this Period 17.90		
City Tysons Corner	State VA	Zip Code 22182	Transaction ID : 0012400		
Purpose of Disbursement fees Assoc W/ online donations election		Category/ Type 012			
Candidate Name					
Office Sought: <input 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: District:					

Full Name (Last, First, Middle Initial) <b>c. Sheraton Centre City Philadelphia</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015		
Mailing Address 201 N. 17th Street			Amount of Each Disbursement this Period 488.90		
City Philadelphia	State PA	Zip Code 19103	Transaction ID : 0012403		
Purpose of Disbursement travel Exp-mileage reimbursement lodging		Category/ Type 002			
Candidate Name					
Office Sought: <input 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: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3756.80
<b>TOTAL</b> 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 70 OF 76			
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. DeFriscos</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2015
Mailing Address Chestnut Street		Amount of Each Disbursement this Period 533.34 <b>Transaction ID : 0012404</b>
City Philadelphia	State PA Zip Code 19102	
Purpose of Disbursement travel Exp-mileage reimbursement lodging		Category/ Type 002
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>B. Hometown Sports</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2015
Mailing Address 469 Plum St.		Amount of Each Disbursement this Period 215.00 <b>Transaction ID : 0012264</b>
City Bellefonte	State PA Zip Code 16823	
Purpose of Disbursement advertising expenses, public relations		Category/ Type 004
Candidate Name		
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2015
Mailing Address 300 First Street, SE		Amount of Each Disbursement this Period 384.87 <b>Transaction ID : 0012265</b>
City Washington	State DC Zip Code 20003	
Purpose of Disbursement equipment and facility rental, catering		Category/ Type 003
Candidate Name		
Office Sought: <input 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: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1133.21
<b>TOTAL</b> 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 71 OF 76			
	<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)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Highmark</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2015	
Mailing Address 120 Fifth Ave			Amount of Each Disbursement this Period 202.92	
City Pittsburgh	State PA	Zip Code 15222	Transaction ID : 0012262	
Purpose of Disbursement Insurance		Category/ Type 001		
Candidate Name				
Office Sought:	<input 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:	District:			

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2015	
Mailing Address 1593 Spring Hill Road, Suite 400			Amount of Each Disbursement this Period 49.25	
City Tysons Corner	State VA	Zip Code 22182	Transaction ID : 0012401	
Purpose of Disbursement fees Assoc W/ online donations election		Category/ Type 012		
Candidate Name				
Office Sought:	<input 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:	District:			

Full Name (Last, First, Middle Initial) <b>C.</b>			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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	252.17
<b>TOTAL</b> This Period (last page this line number only).....	107039.84

**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 72 OF 76
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Glenn Thompson**

**A. Dan Newhouse for Congress**

Full Name (Last, First, Middle Initial)  
Dan Newhouse

Mailing Address PO Box 10949

City: Yakima State: WA Zip Code: 98909

Purpose of Disbursement: transfer to other committees  
Category/Type: 008

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: District: 00

Date of Disbursement: 05 / 13 / 2015

Amount of Each Disbursement this Period: 2000.00  
Transaction ID : 0012224

**B. Mike Bost for Congress**

Full Name (Last, First, Middle Initial)  
Mike Bost

Mailing Address PO Box 1212

City: Murphysboro State: IL Zip Code: 62966

Purpose of Disbursement: transfer to other committees  
Category/Type: 008

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: IL District: 00

Date of Disbursement: 05 / 13 / 2015

Amount of Each Disbursement this Period: 2000.00  
Transaction ID : 0012225

**c. Walorski for Congress**

Full Name (Last, First, Middle Initial)  
Jackie Walorski

Mailing Address PO Box 954

City: Mishawaka State: IN Zip Code: 46546

Purpose of Disbursement: transfer to other committees  
Category/Type: 008

Office Sought:  House  Senate  President  
Disbursement For: 2016  Primary  General  Other (specify)

State: IN District: 02

Date of Disbursement: 05 / 13 / 2015

Amount of Each Disbursement this Period: 2000.00  
Transaction ID : 0012226

**SUBTOTAL** of Disbursements This Page (optional) ..... 6000.00

**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 73 OF 76
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. David Rouzer for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2015
Mailing Address PO Box 2267		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 0012227</b>
City Smithfield	State NC	
Zip Code 27577	Purpose of Disbursement transfer to other committees	Category/ Type 008
Candidate Name <b>David Rouzer</b>	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: NC District: 07	

Full Name (Last, First, Middle Initial) <b>B. Ralph Abraham for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2015
Mailing Address PO Box 270		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 0012228</b>
City Archibald	State LA	
Zip Code 71218	Purpose of Disbursement transfer to other committees	Category/ Type 008
Candidate Name <b>Ralph Abraham</b>	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: LA District: 00	

Full Name (Last, First, Middle Initial) <b>c. Rick W. Allen for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2015
Mailing Address PO Box 338		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 0012229</b>
City Augusta	State GA	
Zip Code 30903	Purpose of Disbursement transfer to other committees	Category/ Type 008
Candidate Name <b>Rick W. Allen</b>	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: GA District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> 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 74 OF 76
	<input type="checkbox"/> 17 20a <input checked="" type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Friends of Glenn Thompson**

Full Name (Last, First, Middle Initial) <b>A. Moolenaar for Congress</b>		Date of Disbursement MM / DD / YYYY 05 / 13 / 2015
Mailing Address 5915 Eastman Ave, Suite 100		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 0012230</b>
City Midland State MI Zip Code 48640	Purpose of Disbursement transfer to other committees 008 Category/Type	
Candidate Name <b>John Moolenaar</b>	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: MI District: 04		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
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>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	14000.00

**FEC FORM 3Z (File with Form 3)**  
**CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS**  
 (To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full) <b>Friends of Glenn Thompson</b>		Report Covering Period: From: <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>M</td><td>M</td></tr><tr><td>04</td><td></td></tr></table> / <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>D</td><td>D</td></tr><tr><td>01</td><td></td></tr></table> / <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2015</td><td></td><td></td><td></td><td></td><td></td></tr></table> To: <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>M</td><td>M</td></tr><tr><td>06</td><td></td></tr></table> / <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>D</td><td>D</td></tr><tr><td>30</td><td></td></tr></table> / <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2015</td><td></td><td></td><td></td><td></td><td></td></tr></table>					M	M	04		D	D	01		Y	Y	Y	Y	Y	Y	2015						M	M	06		D	D	30		Y	Y	Y	Y	Y	Y	2015					
M	M																																													
04																																														
D	D																																													
01																																														
Y	Y	Y	Y	Y	Y																																									
2015																																														
M	M																																													
06																																														
D	D																																													
30																																														
Y	Y	Y	Y	Y	Y																																									
2015																																														
Committee Name		(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees																																											
A	<b>Friends of Glenn Thompson</b>	65305.20	0.00																																											
B	<b>Kelly-Thompson Victory Fund</b> Column Total Last Page Only.....	0.00	0.00																																											
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans																																								
A	44587.94	0.00	109893.14	0.00	0.00	0.00																																								
B	0.00	0.00	0.00	0.00	0.00	0.00																																								
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees																																								
A	0.00	0.00	8.39	109901.53	108531.84	14000.00																																								
B	0.00	0.00	0.00	0.00	0.00	0.00																																								
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees																																								
A	0.00	0.00	0.00	0.00	0.00	0.00																																								
B	0.00	0.00	0.00	0.00	0.00	0.00																																								
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee																																								
A	0.00	0.00	122531.84	302765.86	290135.55	0.00																																								
B	0.00	0.00	0.00	0.00	0.00	0.00																																								
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures																																											
A	0.00	109893.14	108531.84																																											
B	0.00	0.00	0.00																																											

**FEC FORM 3Z (File with Form 3)**  
**CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS**  
 (To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full) <b>Friends of Glenn Thompson</b>		Report Covering Period: From: <input type="text" value="04"/> / <input type="text" value="01"/> / <input type="text" value="2015"/> To: <input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>				
Committee Name				(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees	
A	<b>Friends of Glenn Thompson</b>					
B	Column Total Last Page Only.....				65305.20	0.00
	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A						
B	44587.94	0.00	109893.14	0.00	0.00	0.00
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A						
B	0.00	0.00	8.39	109901.53	108531.84	14000.00
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A						
B	0.00	0.00	0.00	0.00	0.00	0.00
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A						
B	0.00	0.00	122531.84	302765.86	290135.55	0.00
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A						
B	0.00	109893.14	108531.84			