Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	on 20:	170358			Rep File			CAN	DII	DATE		COMM	1ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, Cand	idate or L	obbyist:		СОМ	МО	NWE	ALTH L	EAI	DERS	FUN)		·				
Street Address:	11 CHURCH	ROAD																
City:	HATFIELD							State:		PA			Zip Cod	le: 19	440			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	Y PRE-	2		30 DA PRIMA		P	OST-	3. X		AMENDMENT REPORT?		Yes	N	0	√
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	Y PRE	- 5		30 DA		P	POST- 6.		TERMINATION REPORT?		Yes	N	0	√	
report type)	ANNUAL REPOR	7.	Year 2019					NG MET		_			PAPER	√	DISK	ETTE		
Name of Office S	ought by Candid	date:			•			DATE	0	F ELE	CTIC	DN N	District Number	Office Code	Pai	ty Cod	Cour	
								МО		DAY	YI	EAR		_			•	
									11		5	2019		(SEE INS	TRUCTI	ONS FOR	CODES	5)
	Receipts and	МО	DAY	YEAR				МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	,	
Expenditures	from:		5 7	20)19	T	0		6	1	LO	2019						
A. Amount Bro	ught Forward Fr	om Last R	Report				\$				88,	059.69						
B. Total Moneta	ary Contribution	s And Red	eipts (From	Sched	dule	I)	\$;	257,	285.00						
C. Total Funds	Available (Sum	Of Lines A	and B)				\$;	345,3	344.69						
D. Total Expenditures (From Schedule III)						\$				31,3	386.91							
E. Ending Cash Balance (Subtract Line D From Line C)				C)			\$			3	313,9	57.78						
F. Value Of In-	Kind Contributio	ns Receiv	ed (From So	chedul	e II))	\$					0.00						
G. Unpaid Debt	s And Obligation	ns (From	Schedule IV)			\$					0.00						
				AFF:	IDA	VI٦	ΓSE	CTIO	N									
PART I - If this is			_									_		5 mary Jeman			:-6	
I swear (or affirm) correct and comple		nciuaing th	e attached scr	iedules	mea	on j	рарег	or by en	ectr	onic me	earum	i, are to t	ne best o	my knov	vieage	anu be	iei, tr	ue
Sworn to and subs	cribed before me t day of	his	20						•		S	Signature	of Perso	n Submitt	ing Re	oort		_
	Signa	ture					-		•				Print	ted Name				
My Commission Ex	cpires						_						Emai	il				
	МО	D	AY	YR						Are	ea Coo	de	Daytim	e Teleph	one Nu	mber		ᆜ
Part II- If this is	a report of a ca	ndidate's	authorized	Comm	ittee	e, Ca	andid	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge and beli	ef this	politi	cal	comm	ittee ha	s no	ot violat	ted ar	ny provisi	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before me th day of	is	20									Si	ignature o	of Candida	ite			_
							-						Printe	d Name				-
My Commission F	Signatur	e					•		-				Emai	il				_
My Commission Exp																		_
	МО	D	AY	YR						Area	Code		Da	ytime Te	lephor	ne Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
COMMONWEALTH LEADERS FUND	From:	5/7/2019	<u>9</u> To:	6/10/2019
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	135.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	650.00
TOTAL for the Reporting) Period	(2)	\$	650.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	256,500.00
TOTAL for the Reporting	Period	(3)	\$	256,500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	257,285.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidat	e	R	eporting	Period			
		F	rom:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee or Ca	ndidate		Rep	orting P	eriod			
COMMONWEALTH LEADERS FU	ND		Fro	m:	<u>5/7/3</u>	2 <u>019</u> To	:	6/10/2019
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
FRANKLIN SHANNHAN								
Mailing Address 206 SHOREL	INE DRIVE						\$	100.00
City BERWYN	State	Zip Code (Plus 4)	5	29	2019		
	PA	19312						
Full Name of Contributor	ull Name of Contributor OHN M BRIGGS			МО	DAY	YEAR		
Mailing Address 435 WILLIAMS ROAD							\$	250.00
City WYNNEWOOD	State	Zip Code (Plus 4	,	5	31	2019	Ψ	250.00
william of	PA	19096						
Full Name of Contributor				мо	DAY	YEAR		
GERALD D EISENHOWER				1-10	DAI	ILAK		
Mailing Address 18 DELPHI R	OAD						\$	100.00
City SCHWENKSVILLE	State	Zip Code (Plus 4)	6	3	2019		
	PA	19473						
Full Name of Contributor				МО	DAY	YEAR		
HENRY E. & JEAN E. HALLER	₹			1-10	אלו	ILAK		
Mailing Address 5615 HOWE	STREET APT 1						\$	200.00
City PITTSBURGH	State	Zip Code (Plus 4)	6	3	2019		
	PA	15232						
								PAGE TOTAL

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL \$ 650.00

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting	Period				
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							*	0.00
City	State	Zip Cod	e (Plus 4)					
						<u> </u>		
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
COMMONWEALTH LEADERS FUND			Fron	n:	<u>5/7/2</u>	<u>019</u> To	:	6/10/2019
				D/	ATE		AN	MOUNT
Full Name of Contributor				мо	DAY	YEAR		1 000 00
JOHN C OILIVER III				МО	DAI	ILAK	\$	1,000.00
Mailing Address 334 SCALFE ROAD				6	3	2019		
City SEWICKLEY	State	Zip Code (Plus	s 4)					
	PA	15143						
Employer Name ENTREPRENEUR				Occupat	ion			
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Cod	e (Plus 4)
720 OLIVER BLDG535 SMITHFIELD STR	EET	PITTSBUR	(GH		PA		15222	
Full Name of Contributor				мо	DAY	YEAR		
AUGUSTA LEININGER				МО	DAT	TEAK	\$	500.00
Mailing Address 206 WHITEMARSH A	AVENUE			6	3	2019		
City PHILADELPHIA	State	Zip Code (Plus	5 4)			2013		
	PA	19118						
Employer Name RETIRED				Occupat	ion	RETIRE)	
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Cod	e (Plus 4)
N/A								
Full Name of Contributor				мо	DAY	VEAD		
SAUNDRA SMITH				МО	DAT	YEAR	\$	5,000.00
Mailing Address 200 SMITH FARM LA	ANE			6	3	2019		
City SHELOCTA	State	Zip Code (Plus	s 4)			2013		
	PA	15774						
Employer Name RETIRED				Occupat	ion	RETIRE)	
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Cod	e (Plus 4)
N/A								
Full Name of Contributor								
CLAY HAMLIN				МО	DAY	YEAR	\$	250,000.00
Mailing Address 424 MULBERRY LAN	E			5	23	2019		
City HAVERFORD	State	Zip Code (Plus	s 4)		25	2019		
	PA	19041						
Employer Name LBCW INVESTMENTS				Occupat	ion	CEO		
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Cod	e (Plus 4)
40 MORRIS AVENUESTE 239		BRYN MA	WR		PA		19010	
Enter Grand Total of Part C on School	dula T. Datailed Su	ımmarıı Bago	Soction	n 2			P	AGE TOTAL

256,500.00

OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee	or Candidate		Report	ing Peri	od			
			From:			То:		
		•		C	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Pl	lus 4)					
Receipt Description	'	.			•			
Futor Curred Total of Doub	Fan Cabadula I. Datailad	I Communication of the Communi		4			F	PAGE TOTAL
Enter Grand Total of Part	E ON Schedule 1, Detalled	i Summary Page, S	ection	4.			\$	0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
COMMONWEALTH LEADERS FUND	From:	<u>5/7/2019</u> To:	6/10/2019
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Cand	I Name of Contributor iling Address y State Zip Code (Plus 4)			Reporting Period					
			From:			To:			
				DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						7 \$	0.00		
City	State	Zip Code (Plus 4)							
Description of Contribution:	•		•	•	•				
Enter Grand Total of Part F on	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL		
Section 2.						\$	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zij	p Code(Plus 4)	Descr	iptio	n of Contribution	on
Enter Grand Total of Part G on Sch	edule II. In-K	ind	Contributions D	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.					-					0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	riod		
COMMONWEALTH LEADERS FUND	From	5/7/2019	То:	6/10/2019

				DATE		AMOUNT
To Whom Paid			мо	DAY	YEAR	
JUDICIAL INTEGRITY PAC			М		1 Z/ux	
Mailing Address 112 STATE STREET			5	7	2019	\$ 6,000.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
	PA	17101	PAC CO	NTRIBUTIO	ON	
To Whom Paid			мо	DAY	YEAR	
CHURCHILL STRATEGIES			1-10		1 Z/IIX	
Mailing Address 23 N FRONT STREET	-		5	14	2019	\$ 5,000.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
	PA	17101	CONSU	LTING		
To Whom Paid			мо	DAY	YEAR	
CITIZENS FOR CONNER			PIO		ILAK	
Mailing Address 1464 N WALES ROA	D		5	14	2019	\$ 1,000.00
City BLUE BELL	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
	PA	19422	CAMPAI	GN CONTE	RIBUTION	
To Whom Paid			мо	DAY	YEAR	
LAKE GROUP MEDIA, INC.			1-10		1 Z/IIX	
Mailing Address 1 BRYAM BROOK PL	ACE		5	15	2019	\$ 1,139.80
City ARMONK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
	NY	10504	DIRECT	MAIL		
To Whom Paid			мо	DAY	YEAR	
HIGHER INFORMATION GROUP						
Mailing Address 400 NORTH BLUE RI	BBON AVENUE		5	22	2019	\$ 2,142.67
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
	PA	17112	DIRECT	MAIL POS	TAGE	
To Whom Paid			МО	DAY	YEAR	
JIM JOHNSTON					ILAK	
Mailing Address 4013 DAVID LANE			6	4	2019	\$ 1,000.00
City ALEXANDRIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
	VA	22311	DIRECT			

To Whom Paid			мо	DAY	YEAR		
HIGHER INFORMATION GROUP			110		ILAK		
Mailing Address 400 NORTH BLUE RIBBON AVENUE			6	4	2019	\$	5,634.96
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17112	DIRECT MAIL PRINTING				
To Whom Paid				DAY	YEAR		
OPN SESAME			МО		1 = Alix		
Mailing Address			6	6	2019	\$	8,469.48
City WASHINGTON	State	Zip Code (Plus 4)	Description of Expenditure				
DC TEXT MESSAGING							
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	30,386.91