

Campaign Finance Report

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

Filer Identification Number : 20170358		Report Filed By :	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST						
Name of Filing Committee, Candidate or Lobbyist: COMMONWEALTH LEADERS FUND											
Street Address: 11 CHURCH ROAD											
City: HATFIELD			State: PA	Zip Code: 19440							
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3. <input checked="" type="checkbox"/>	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2019	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE			
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number	Office Code	Party Code	County Code		
				MO	DAY	YEAR					
				11	5	2019	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		5	7	2019		6	10	2019			
A. Amount Brought Forward From Last Report				\$		88,059.69					
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		257,285.00					
C. Total Funds Available (Sum Of Lines A and B)				\$		345,344.69					
D. Total Expenditures (From Schedule III)				\$		31,386.91					
E. Ending Cash Balance (Subtract Line D From Line C)				\$		313,957.78					
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00					
G. Unpaid Debts And Obligations (From Schedule IV)				\$		0.00					

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this _____ day of _____ 20 _____

Signature

My Commission Expires _____

MO DAY YR

Signature of Person Submitting Report

Printed Name

Email

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3,1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this _____ day of _____ 20 _____

Signature

My Commission Expires _____

MO DAY YR

Signature of Candidate

Printed Name

Email

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
COMMONWEALTH LEADERS FUND	From: <u>5/7/2019</u> To: <u>6/10/2019</u>

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 257,285.00
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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 Candidate	Reporting Period
	From: To:
DATE AMOUNT	

Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

PART B
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 Candidate	Reporting Period
COMMONWEALTH LEADERS FUND	From: <u>5/7/2019</u> To: <u>6/10/2019</u>

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
FRANKLIN SHANNHAN							
Mailing Address 206 SHORELINE DRIVE				5	29	2019	\$ 100.00
City BERWYN	State	Zip Code (Plus 4)					
	PA	19312					
Full Name of Contributor				MO	DAY	YEAR	
JOHN M BRIGGS							
Mailing Address 435 WILLIAMS ROAD				5	31	2019	\$ 250.00
City WYNNEWOOD	State	Zip Code (Plus 4)					
	PA	19096					
Full Name of Contributor				MO	DAY	YEAR	
GERALD D EISENHOWER							
Mailing Address 18 DELPHI ROAD				6	3	2019	\$ 100.00
City SCHWENKSVILLE	State	Zip Code (Plus 4)					
	PA	19473					
Full Name of Contributor				MO	DAY	YEAR	
HENRY E. & JEAN E. HALLER							
Mailing Address 5615 HOWE STREET APT 1				6	3	2019	\$ 200.00
City PITTSBURGH	State	Zip Code (Plus 4)					
	PA	15232					

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: To:

	DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 0.00

PART D
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 COMMONWEALTH LEADERS FUND	Reporting Period From: <u>5/7/2019</u> To: <u>6/10/2019</u>
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				DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR				
CLAY HAMLIN	5	23	2019	\$	250,000.00		
Mailing Address 424 MULBERRY LANE							
City HAVERFORD	State PA	Zip Code (Plus 4) 19041					
Employer Name LBCW INVESTMENTS	Occupation CEO						
Employer Mailing Address/Principal Place of Business 40 MORRIS AVENUESTE 239	City BRYN MAWR		State PA	Zip Code (Plus 4) 19010			
SAUNDRA SMITH	6	3	2019	\$	5,000.00		
Mailing Address 200 SMITH FARM LANE							
City SHELOCTA	State PA	Zip Code (Plus 4) 15774					
Employer Name RETIRED	Occupation RETIRED						
Employer Mailing Address/Principal Place of Business N/A	City		State	Zip Code (Plus 4)			
AUGUSTA LEININGER	6	3	2019	\$	500.00		
Mailing Address 206 WHITEMARSH AVENUE							
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19118					
Employer Name RETIRED	Occupation RETIRED						
Employer Mailing Address/Principal Place of Business N/A	City		State	Zip Code (Plus 4)			
JOHN C OILIVER III	6	3	2019	\$	1,000.00		
Mailing Address 334 SCALFE ROAD							
City SEWICKLEY	State PA	Zip Code (Plus 4) 15143					
Employer Name ENTREPRENEUR	Occupation						
Employer Mailing Address/Principal Place of Business 720 OLIVER BLDG535 SMITHFIELD STREET	City PITTSBURGH		State PA	Zip Code (Plus 4) 15222			

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 256,500.00

PART E 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	Reporting Period
	From: _____ To: _____

				DATE	AMOUNT
Full Name	MO	DAY	YEAR		
				\$	0.00
Mailing Address					
City	State	Zip Code (Plus 4)			
Receipt Description					

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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 COMMONWEALTH LEADERS FUND	Reporting Period From: <u>5/7/2019</u> To: <u>6/10/2019</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)	\$ 0.00

**SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period
	From: _____ To: _____

			DATE	AMOUNT		
Full Name of Contributor			MO	DAY	YEAR	
Mailing Address						\$ 0.00
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL
						\$ 0.00

**SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00**

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE	AMOUNT	
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code(Plus 4)				
Employer of Contributor			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
COMMONWEALTH LEADERS FUND	From <u>5/7/2019</u> To: <u>6/10/2019</u>

				DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR		
JUDICIAL INTEGRITY PAC	5	7	2019	\$	6,000.00
Mailing Address 112 STATE STREET					
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure PAC CONTRIBUTION		
To Whom Paid	MO	DAY	YEAR		
CHURCHILL STRATEGIES					
Mailing Address 23 N FRONT STREET	5	14	2019	\$	5,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CONSULTING		
To Whom Paid	MO	DAY	YEAR		
CITIZENS FOR CONNER					
Mailing Address 1464 N WALES ROAD	5	14	2019	\$	1,000.00
City BLUE BELL	State PA	Zip Code (Plus 4) 19422	Description of Expenditure CAMPAIGN CONTRIBUTION		
To Whom Paid	MO	DAY	YEAR		
LAKE GROUP MEDIA, INC.					
Mailing Address 1 BRYAM BROOK PLACE	5	15	2019	\$	1,139.80
City ARMONK	State NY	Zip Code (Plus 4) 10504	Description of Expenditure DIRECT MAIL		
To Whom Paid	MO	DAY	YEAR		
HIGHER INFORMATION GROUP					
Mailing Address 400 NORTH BLUE RIBBON AVENUE	5	22	2019	\$	2,142.67
City HARRISBURG	State PA	Zip Code (Plus 4) 17112	Description of Expenditure DIRECT MAIL POSTAGE		
To Whom Paid	MO	DAY	YEAR		
JIM JOHNSTON					
Mailing Address 4013 DAVID LANE	6	4	2019	\$	1,000.00
City ALEXANDRIA	State VA	Zip Code (Plus 4) 22311	Description of Expenditure DIRECT MAIL		

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

