

Commonwealth of Pennsylvania

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

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					
Mailing Address 424 MULBERRY LANE				5	23
City HAVERFORD	State PA	Zip Code (Plus 4) 19041			
Employer Name LBCW INVESTMENTS				Occupation CEO	
Employer Mailing Address/Principal Place of Business 40 MORRIS AVENUE STE 239		City BRYN MAWR		State PA	Zip Code (Plus 4) 19010
SAUNDRA SMITH					
Mailing Address 200 SMITH FARM LANE				6	3
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					
Mailing Address 206 WHITEMARSH AVENUE				6	3
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)

Full Name of Contributor JOHN C OILIVER III			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 334 SCALFE ROAD			6	3	2019	
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		
Mailing Address				\$	0.00
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		
Mailing Address				\$	0.00
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 CHURCHILL STRATEGIES	5	14	2019	\$ 5,000.00
Mailing Address 23 N FRONT STREET				
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CONSULTING	
To Whom Paid CITIZENS FOR CONNER	5	14	2019	\$ 1,000.00
Mailing Address 1464 N WALES ROAD				
City BLUE BELL	State PA	Zip Code (Plus 4) 19422	Description of Expenditure CAMPAIGN CONTRIBUTION	
To Whom Paid LAKE GROUP MEDIA, INC.	5	15	2019	\$ 1,139.80
Mailing Address 1 BRYAM BROOK PLACE				
City ARMONK	State NY	Zip Code (Plus 4) 10504	Description of Expenditure DIRECT MAIL	
To Whom Paid HIGHER INFORMATION GROUP	5	22	2019	\$ 2,142.67
Mailing Address 400 NORTH BLUE RIBBON AVENUE				
City HARRISBURG	State PA	Zip Code (Plus 4) 17112	Description of Expenditure DIRECT MAIL POSTAGE	

To Whom Paid JIM JOHNSTON			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 4013 DAVID LANE			6	4	2019	
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

