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 2017	70358			Repo Filed			CAND	IDATE		СОМ	4ITTEE	✓	LOB	BYIST			
Name of Filing C	Committee, Candid	late or L	obbyist:		COMN	101	NWE/	ALTH LEI	DERS F	UND								
Street Address:	420 N 3RD S	TREET																
City:	HARRISBURG	i						State:	PA			Zip Cod	le: 1	7101				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY P PRIMARY	RE-	2.		30 DA PRIMA		POST-	3.			AMENDMENT Yes REPORT?					
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE-	- 5.		30 DA ELECT		POST-	6.		TERMINA REPORT		No	~			
report type)	ANNUAL REPORT	7.	Year 2020					NG METH CHECK C				PAPER	DISKE	TTE				
Name of Office S	Sought by Candida	ite:	•					DATE (OF ELE	CTIC	N	District Number	Office Code	Par	ty Code	County Code		
	,							МО	DAY	Y	EAR	Number	code			Couc		
								11		3	2020		(SEE IN	ISTRUCTI	ONS FOR (CODES)		
,	Receipts and	МО	DAY YE	AR				МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY			
Expenditures			3 10	20)20	T	D		5	18	2020							
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			434,	513.71							
B. Total Moneta	ary Contributions	And Rec	eipts (From So	hec	lule I)	\$				0.00							
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			434,	513.71							
D. Total Expend	ditures (From Sch	edule II	I)				\$			275,2	250.16							
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			159,3	863.55							
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	dul	e II)		\$				0.00							
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			'				
			А	FFI	[DA\	/I7	ſ SE	CTION										
PART I - If this is	s a Committee rep	ort, trea	surer sign her	e. I	f this	is	a Can	ndidate r	eport,	candi	date sig	ın here.						
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sched	ules	filed o	on p	oaper (or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , true		
Sworn to and subs	cribed before me thi day of	s	20								Signature	of Perso	n Submit	ting Re _l	oort			
	Signatu	ıre					-					Prin	ted Nam	e				
My Commission Ex	cpires											Ema	il					
	мо	D	AY	YR					Ar	ea Co	le	Daytim	e Telepi	none Nu	mber			
Part II- If this is	a report of a can	didate's	authorized Co	mm	ittee,	, Ca	ndid	ate shall	sign h	ere.								
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowl	edge and belief t	this	politic	al (commi	ittee has i	not viola	ted ar	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,		
Sworn to and subsc	ribed before me this										s	Signature of Candidate						
	day of —— ————											Printe	d Name					
	Signature																	
My Commission Exp	ires											Ema	il					
	мо	D	AY	YR					Area	Code		Da	aytime 1	elephor	ne Numb	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
COMMONWEALTH LEDERS FUND	From:	<u>3/10/202</u>	<u>20</u> To:	5/18/2020
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	0.00
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)			\$	0.00
TOTAL for the Reporting	y Period	(2)	\$	0.00
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)			\$	0.00
TOTAL for the Reporting	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g 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			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value		\$2	250.00) in the			
Nume of Fining Comm	intec of cumulate		Reporting Period From: To:				:	
					DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	!	I	!		<u> </u>			DAGE TOTAL

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

PAGE TOTAL
\$ 0.00

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 Candi	date		Re _l	oorting P m:	eriod	To	o:	
					DATE			AMOUNT
Full Name of Contributor				мо	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 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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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 Ca	indidate			Rep	orting Pe	riod			
				Fron	n:		T	o:	
					D	ATE		AM	10UNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•	•			Occupa	tion	•	•	
Employer Mailing Address/Princ Business	cipal Place of		City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C	on Schedule I, Detai	led Sumr	mary Page,	Section	on 3.			P <i>/</i>	AGE TOTAL 0.00

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	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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 Perio	od	
COMMONWEALTH LEDERS FUND	From:	3/10/2020 To :	<u>5/18/2020</u>
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 Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor			•			Occupa	ation		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	n-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period			
COMMONWEALTH LEDERS F	UND		From	<u>3/10</u>	<u>0/2020</u>	То:	5/18/2020
				DATE			AMOUNT
To Whom Paid REAM PRINTING			МО	DAY	YEAR		
Mailing Address 515 FARM	IBROOK LANE		3	10	2020	\$	31,453.00
City YORK	State PA	Zip Code (Plus 4) 17403		otion of Exp RS - IN-KIN			I CRIS DUSH
To Whom Paid REPUBLICAN PARTY OF PA			МО	DAY	YEAR		
Mailing Address 112 STAT		3	13	2020	\$	6,500.00	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101		otion of Exp			
To Whom Paid POST OFFICE	·	·	мо	DAY	YEAR		
Mailing Address 288 WALN	NUT ST		3	16	2020	\$	2.80
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Descrip POLLIN	otion of Exp	enditure		
To Whom Paid REAM PRINTING	·	·	мо	DAY	YEAR		
Mailing Address 515 FARM	IBROOK LANE		3	17	2020	\$ \$	31,453.00
City YORK	State PA	Zip Code (Plus 4) 17403		I otion of Exp RS - IN-KIN			I CRIS DUSH
To Whom Paid REAM PRINTING			МО	DAY	YEAR		
Mailing Address 515 FARM	IBROOK LANE		3	30	2020	\$	43,500.00

Zip Code (Plus 4)

17403

Description of Expenditure

MAILERS-IN-KIND CONTRIBUTION CRIS DUSH

State

PΑ

City

YORK

To Whom Paid DEBEE CLARK				МО	DAY	YEAR				
Mailing Address PO BOX 54949				4	14	2020	\$		2,000.00	
City OKLAHOMA CITY	State)	Zip Code (Plus 4)	Descrip	tion of Exr	enditure				
OKLAHOHA CITT	OK 73154				Description of Expenditure LEGAL RETAINER					
To Whom Paid COMMONWEALTH ENTREPRENEURS, LLC				мо	DAY	YEAR				
Mailing Address 420 N 3RD STREET				4	14	2020	\$		3,365.50	
City HARRISBURG	State		Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
TH WALLS SOME	PA	A	17101	Description of Expenditure RENT						
To Whom Paid OSBORNE LAW, L.A.				МО	DAY	YEAR				
Mailing Address 6501 ARLINGTON EXPRESSWAY B105-#1060			4	15	2020	\$		175.00		
City JACKSONVILLE	State FL		Zip Code (Plus 4) 32211	Description of Expenditure LEGAL FEES						
To Whom Paid REAM PRINTING	<u>'</u>			МО	DAY	YEAR				
REAM PRINTING	ARMBROOK LANE			MO 4	DAY 17	YEAR 2020	\$		16,564.00	
Mailing Address 515 FA	ARMBROOK LANE	1	Zip Code (Plus 4)	4	17	2020			16,564.00	
Mailing Address 515 FA			Zip Code (Plus 4) 17403	4 Descrip		2020 penditure		ON CRI		
Mailing Address 515 FA	State PA			4 Descrip	17	2020 penditure		ON CRI		
REAM PRINTING Mailing Address 515 FA City YORK To Whom Paid HEADLINE CONSULTANTS	State PA	A		4 Descrip MAILER	17 otion of Exp SS - IN-KIN	2020 Denditure		ON CRI		
Mailing Address 515 FA City YORK To Whom Paid HEADLINE CONSULTANTS Mailing Address 342 No.	State PA	ET, REAR		4 Descrip MAILER MO 4	17 Stion of Exp S - IN-KIN DAY 22	2020 Denditure ND CONTE	RIBUTI	ON CRI	S DUSH	
Mailing Address 515 FA City YORK To Whom Paid HEADLINE CONSULTANTS Mailing Address 342 No	State PA ORTH QUEEN STREE	ET, REAR	17403	4 Descrip MAILER MO 4 Descrip	17 S - IN-KIN DAY	2020 penditure ND CONTE	RIBUTI		S DUSH	
Mailing Address 515 FA City YORK To Whom Paid HEADLINE CONSULTANTS Mailing Address 342 No.	State PA ORTH QUEEN STREE	ET, REAR	17403 Zip Code (Plus 4)	4 Descrip MAILER MO 4 Descrip	17 Stion of Exp SS - IN-KIN DAY 22 Stion of Exp	2020 penditure ND CONTE	RIBUTI		S DUSH 1,500.00	
Mailing Address 515 FA City YORK To Whom Paid HEADLINE CONSULTANTS Mailing Address 342 No City LANCASTER To Whom Paid REAM PRINTING	State PA ORTH QUEEN STREE	ET, REAR	17403 Zip Code (Plus 4)	4 Descrip MAILER MO 4 Descrip SOCIAL	DAY 22 Stion of Exp MEDIA M	2020 Penditure ND CONTE	RIBUTI		S DUSH	
Mailing Address 515 FA City YORK To Whom Paid HEADLINE CONSULTANTS Mailing Address 342 No City LANCASTER To Whom Paid REAM PRINTING	State PA ORTH QUEEN STREE State PA	ET, REAR	17403 Zip Code (Plus 4)	4 Descrip MAILER MO 4 Descrip SOCIAL MO	DAY 22 Stion of Exp BEAT DAY	2020 Penditure ND CONTE YEAR 2020 Penditure GMT IN-k YEAR 2020	\$ KIND C		1,500.00 SH	

							AGE 13	
To Whom Paid FACEBOOK				DAY	YEAR			
Mailing Address 1 HACKER WAY				27	2020	\$	860.00	
City MENLO	State Zip Code (Plus 4) CA 94025			Description of Expenditure FACEBOOK ADS - IN-KIND CONTRIBUTION CRIS DUSH				
To Whom Paid POST OFFICE				DAY	YEAR			
Mailing Address 228 WALNUT STREET				27	2020	\$	168.00	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure PO BOX RENEWAL					
To Whom Paid DEBEE CLARK				DAY	YEAR			
Mailing Address PO BOX 54949			4	29	2020	\$	2,000.00	
City OKLAHOMA CITY	State OK	Zip Code (Plus 4) 73154	Description of Expenditure LEGAL RETAINER					
		73131						
To Whom Paid COMMONWEALTH ENTREPREN		13231	мо	DAY	YEAR			
	EURS, LLC	75151				\$	3,365.50	
COMMONWEALTH ENTREPREN	EURS, LLC	Zip Code (Plus 4) 17101	MO 4	DAY	YEAR 2020		3,365.50	
COMMONWEALTH ENTREPREN Mailing Address 420 N 3RD	EURS, LLC STREET State	Zip Code (Plus 4)	MO 4 Descrip	DAY 29	YEAR 2020		3,365.50	
COMMONWEALTH ENTREPREN Mailing Address 420 N 3RD City HARRISBURG To Whom Paid HEADLINE CONSULTANTS	EURS, LLC STREET State	Zip Code (Plus 4) 17101	MO 4 Descrip	DAY 29 otion of Exp	YEAR 2020 penditure		3,365.50 1,500.00	
COMMONWEALTH ENTREPREN Mailing Address 420 N 3RD City HARRISBURG To Whom Paid HEADLINE CONSULTANTS	EURS, LLC STREET State PA	Zip Code (Plus 4) 17101	MO 4 Descript RENT MO 5 Descript	DAY 29 otion of Exp	YEAR 2020 penditure YEAR 2020 penditure	\$	1,500.00	
COMMONWEALTH ENTREPREN Mailing Address 420 N 3RD City HARRISBURG To Whom Paid HEADLINE CONSULTANTS Mailing Address 342 NORTH	EURS, LLC STREET State PA I QUEEN STREET, REAR	Zip Code (Plus 4) 17101 Zip Code (Plus 4)	MO 4 Descript RENT MO 5 Descript	DAY 29 DAY 12 Otion of Exp	YEAR 2020 penditure YEAR 2020 penditure	\$	1,500.00	
COMMONWEALTH ENTREPREN Mailing Address 420 N 3RD City HARRISBURG To Whom Paid HEADLINE CONSULTANTS Mailing Address 342 NORTH City LANCASTER To Whom Paid REAM PRINTING	EURS, LLC STREET State PA I QUEEN STREET, REAR	Zip Code (Plus 4) 17101 Zip Code (Plus 4)	MO 4 Description MO 5 Description SOCIAL	DAY 29 DAY 12 Dation of Exp MEDIA Me	YEAR 2020 Penditure 2020 Penditure GMT IN-k	\$	1,500.00	

							OL 14		
To Whom Paid STEVE STRICLER DBA MINDMOTION FILMS				DAY	YEAR				
Mailing Address 1472 WATER STREET			5	11	2020	\$	3,800.00		
City COLUMBIA	State Zip Code (Plus 4) PA 17512			Description of Expenditure VIDEO PRODUCTION IN-KIND CRIS DUSH					
To Whom Paid REAM PRINTING			МО	DAY	YEAR				
Mailing Address 515 FARMBOOK N			5	13	2020	\$	16,564.00		
City YORK	State PA	Zip Code (Plus 4) 17403	Description of Expenditure MAILERS - IN-KIND CONTRIBUTION CRIS DUSH						
To Whom Paid REAM PRINTING			МО	DAY	YEAR				
Mailing Address 515 FARMBROOK LN			5	15	2020	\$	54,113.36		
City YORK	State PA	Zip Code (Plus 4) 17403	Description of Expenditure MAILERS - IN-KIND CONTRIBUTION CRIS DUSH						
To Whom Paid MIGHTY GROUP, LLC	·		МО	DAY	YEAR				
Mailing Address 933 ROSE 9	STREET 2ND FL		5	18	2020	\$	36,702.00		
City HARRISBURG	State PA	Zip Code (Plus 4) 17102	Description of Expenditure IN-KIND TERNDRUP \$20,210 IN-KIND GAYDOS \$12,288 M						
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TO					