

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 LEDERS FUND										
Street Address: 420 N 3RD STREET										
City: HARRISBURG			State: PA	Zip Code: 17101						
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	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 2020	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	3	2020	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		3	10	2020	TO	5	18	2020		
A. Amount Brought Forward From Last Report				\$		434,613.71				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		0.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		434,613.71				
D. Total Expenditures (From Schedule III)				\$		275,250.16				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		159,363.55				
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 LEDERS FUND	From: <u>3/10/2020</u> To: <u>5/18/2020</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting 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 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 Period (3)	\$ 0.00

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.)	\$ 0.00
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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
	From: _____ To: _____

				DATE	AMOUNT		
Full Name of Contributor							
Mailing Address	MO	DAY	YEAR			\$	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 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	Reporting Period
	From: To:

	DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business	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 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 LEDERS FUND	Reporting Period From: <u>3/10/2020</u> To: <u>5/18/2020</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 LEDERS FUND	From <u>3/10/2020</u> To: <u>5/18/2020</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
REAM PRINTING	3	10	2020	\$ 31,453.00
Mailing Address 515 FARBROOK LANE				
City YORK	State PA	Zip Code (Plus 4) 17403		Description of Expenditure MAILERS - IN-KIND CONTRIBUTION CRIS DUSH
To Whom Paid REPUBLICAN PARTY OF PA	3	13	2020	\$ 6,500.00
Mailing Address 112 STATE STREET				
City HARRISBURG	State PA	Zip Code (Plus 4) 17101		Description of Expenditure CAMPAIGN CONTRIBUTION
To Whom Paid POST OFFICE	3	16	2020	\$ 2.80
Mailing Address 288 WALNUT ST				
City HARRISBURG	State PA	Zip Code (Plus 4) 17108		Description of Expenditure POLLING
To Whom Paid REAM PRINTING	3	17	2020	\$ 31,453.00
Mailing Address 515 FARBROOK LANE				
City YORK	State PA	Zip Code (Plus 4) 17403		Description of Expenditure MAILERS - IN-KIND CONTRIBUTION CRIS DUSH
To Whom Paid REAM PRINTING	3	30	2020	\$ 43,500.00
Mailing Address 515 FARBROOK LANE				
City YORK	State PA	Zip Code (Plus 4) 17403		Description of Expenditure MAILERS-IN-KIND CONTRIBUTION CRIS DUSH

To Whom Paid DEBEE CLARK			MO	DAY	YEAR	
Mailing Address PO BOX 54949			4	14	2020	
City OKLAHOMA CITY	State OK	Zip Code (Plus 4) 73154	Description of Expenditure LEGAL RETAINER			
To Whom Paid COMMONWEALTH ENTREPRENEURS, LLC			MO	DAY	YEAR	
Mailing Address 420 N 3RD STREET			4	14	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure RENT			
To Whom Paid OSBORNE LAW, L.A.			MO	DAY	YEAR	
Mailing Address 6501 ARLINGTON EXPRESSWAY B105-#1060			4	15	2020	
City JACKSONVILLE	State FL	Zip Code (Plus 4) 32211	Description of Expenditure LEGAL FEES			
To Whom Paid REAM PRINTING			MO	DAY	YEAR	
Mailing Address 515 FARBROOK LANE			4	17	2020	
City YORK	State PA	Zip Code (Plus 4) 17403	Description of Expenditure MAILERS - IN-KIND CONTRIBUTION CRIS DUSH			
To Whom Paid HEADLINE CONSULTANTS			MO	DAY	YEAR	
Mailing Address 342 NORTH QUEEN STREET, REAR			4	22	2020	
City LANCASTER	State PA	Zip Code (Plus 4) 16803	Description of Expenditure SOCIAL MEDIA MGMT IN-KIND CRIS DUSH			
To Whom Paid REAM PRINTING			MO	DAY	YEAR	
Mailing Address 515 FARBROOK N			4	21	2020	
City YORK	State PA	Zip Code (Plus 4) 17403	Description of Expenditure MAILERS - IN-KIND CONTRIBUTION CRIS DUSH			

To Whom Paid FACEBOOK			MO	DAY	YEAR	
Mailing Address 1 HACKER WAY			4	27	2020	\$ 860.00
City MENLO	State CA	Zip Code (Plus 4) 94025	Description of Expenditure FACEBOOK ADS - IN-KIND CONTRIBUTION CRIS DUSH			
To Whom Paid POST OFFICE			MO	DAY	YEAR	
Mailing Address 228 WALNUT STREET			4	27	2020	\$ 168.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure PO BOX RENEWAL			
To Whom Paid DEBEE CLARK			MO	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			
To Whom Paid COMMONWEALTH ENTREPRENEURS, LLC			MO	DAY	YEAR	
Mailing Address 420 N 3RD STREET			4	29	2020	\$ 3,365.50
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure RENT			
To Whom Paid HEADLINE CONSULTANTS			MO	DAY	YEAR	
Mailing Address 342 NORTH QUEEN STREET, REAR			5	12	2020	\$ 1,500.00
City LANCASTER	State PA	Zip Code (Plus 4) 16803	Description of Expenditure SOCIAL MEDIA MGMT IN-KIND CRIS DUSH			
To Whom Paid REAM PRINTING			MO	DAY	YEAR	
Mailing Address 515 FARBROOK LANE			5	11	2020	\$ 3,100.00
City YORK	State PA	Zip Code (Plus 4) 17403	Description of Expenditure MAILERS - IN-KIND CONTRIBUTION CRIS DUSH			

To Whom Paid STEVE STRICLER DBA MINDMOTION FILMS			MO	DAY	YEAR	
Mailing Address 1472 WATER STREET			5	11	2020	
City COLUMBIA	State PA	Zip Code (Plus 4) 17512	Description of Expenditure VIDEO PRODUCTION IN-KIND CRIS DUSH			
To Whom Paid REAM PRINTING			MO	DAY	YEAR	
Mailing Address 515 FARMBOOK N			5	13	2020	
City YORK	State PA	Zip Code (Plus 4) 17403	Description of Expenditure MAILERS - IN-KIND CONTRIBUTION CRIS DUSH			
To Whom Paid REAM PRINTING			MO	DAY	YEAR	
Mailing Address 515 FARMBROOK LN			5	15	2020	
City YORK	State PA	Zip Code (Plus 4) 17403	Description of Expenditure MAILERS - IN-KIND CONTRIBUTION CRIS DUSH			
To Whom Paid MIGHTY GROUP, LLC			MO	DAY	YEAR	
Mailing Address 933 ROSE STREET 2ND FL			5	18	2020	
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 TOTAL \$ 275,250.16

