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 :	i on 2019	0183			Repo Filed		:	CANDI	DATE		СОМ	MITTEE	✓	LOB	BYIST		
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		COMM	ONV	VEA	LTH CHI	LDREN	I'S C	HOICE	FUND					
Street Address:	420 N 3RD ST	FREET															
City:	HARRISBURG							State:	PA			Zip Co	de: 17	101			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2. X) DA RIMA		POST-	3.		AMENDN REPORT		Yes	Ν	0	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.) da .ect	Y F Ton	POST-	6.		TERMIN REPORT		Yes	N	0	\checkmark
report type)	ANNUAL REPORT	7.	Year 2020					IG METHO				PAPER		\checkmark	DISK	ETTE	
Name of Office S	L Sought by Candida	te:						DATE O	F ELE	CTIC	N	District Number	Office Code	Par	ty Cod	e Cou Cod	
	,							мо	DAY	YI	AR	Itumber	coue			1000	
								11		3	2020		(SEE INS	TRUCTI	ONS FOR	CODES	5)
	Receipts and	мо	DAY	YEAR	2			мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY	,	
Expenditures	s from:		3 10	2	020	го		5	:	18	2020						
A. Amount Bro	ught Forward From	n Last R	eport				\$		3,	921,0	044.20						
B. Total Monetary Contributions And Receipts (From Schedule							\$				0.00						
C. Total Funds Available (Sum Of Lines A and B)							\$		3,	921,(044.20						
D. Total Expenditures (From Schedule III)						\$		-	161,3	305.32							
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$		3,7	759,7	38.88						
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	chedu	le II)		\$				0.00						
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)			\$				0.00						
				AFF	IDAV	IT S	SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign	here. I	If this i	s a (Can	didate re	eport, c	andi	date sig	gn here.					
I swear (or affirm correct and compl) that this report, incl ete.	uding the	e attached sc	hedules	s filed or	ı pap	oer o	or by elect	ronic m	edium	, are to i	the best o	of my knov	vledge	and be	lief , tı	rue
Sworn to and subs	cribed before me this day of	5	20							5	Signature	e of Perso	n Submitt	ing Rep	oort		-
	Signatu	re				_						Prin	ted Name				
My Commission E	xpires											Ema	il				
	МО	DA	AY	YR					Are	ea Coo	le	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a cand	didate's	authorized	Comm	nittee,	Cano	dida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of n ed.	ny knowle	edge and beli	ief this	politica	l cor	mmi	ittee has n	ot viola	ted ar	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subso	ribed before me this day of		20								s	ignature	of Candida	ite			-
												Printe	ed Name				-
	Signature					_											_
My Commission Exp	bires											Ema	11				
	мо	D	۹Y	YR					Area	Code		D	aytime Te	elephor	e Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary	raye			
Name of Filing Committee or Candidate	Reporting	g Period		
COMMONWEALTH CHILDREN'S CHOICE FUND	From:	<u>3/10/202</u>	2 <u>0</u> To:	<u>5/18/2020</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Re	porting 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 Re	porting Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)			1	
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Re	porting Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From	Part E)			
TOTAL for the Re	porting Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report C			\$	0.00
			1	

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		Reporting Period					
			From	m:		То		
					DATE			AMOUNT
Full Name of Contributing Committee		мо	DAY	YEAR				
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	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				мо	DAY	YEAR			
Mailing Address		_					\$	0.00	
City									
PAGE TOTAL									
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	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:			То:		
				DA	TE		A	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
				PAGE TOTAL				
inter Grand Total of Part C on Schedule I, Detailed Summary Page, Section							\$	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			Rep	orting Pe	riod			
			Froi	n:		Т	То:	
				D	ATE		АМ	IOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	ıs 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE 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			Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	r
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
								PAGE TO	TAL
ter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 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 Perio	d							
COMMONWEALTH CHILDREN'S CHOICE FUND	From:	<u>3/10/2020</u> то:	<u>5/18/2020</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)								
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, 3		\$	0.00						

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candida	te		Reporting	g Period				
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor				DAY	YEAR			
Mailing Address						 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		-		•			
Enter Grand Total of Part F on Scl Section 2.	led Sum	mary 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 I	Period		
			Fro	om:		То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupa	ation		·
Employer Mailing Address/Principal Place of Business City				e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	ed			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	ne of Filing Committee or Candidate		Reporti	ng Period					
COMMONWEALTH CHILDREN'S CHOICI	E FUND		From		<u>)/2020</u>	То:	<u>5/18/2020</u>		
				DATE			AMOUNT		
To Whom Paid			мо	DAY	YEAR				
FRIENDS OF ROB MERCURI			мо	DAT	TEAR				
Mailing Address 3000 VILLAGE RUN	RD		3	10	2020	\$	10,000.00		
City WEXFORD	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1			
	PA	15090	CAMPAIGN CONTRIBUTION						
To Whom Paid JEREMY BAKER			мо	DAY	YEAR				
Mailing Address 433 PARKVIEW COU	RT		3	12	2020	\$	2,000.00		
City CAMP HILL	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	17011	CONSU	CONSULTING					
To Whom Paid SUE HELM FOR STATE REP			мо	DAY	YEAR				
Mailing Address PO BOX 624			3	17	2020	\$	2,000.00		
City HARRISBURG	State	Zip Code (Plus 4)	Descript	ition of Exp	enditure	1			
	PA	17108	CAMPAIGN CONTRIBUTION						
To Whom Paid I360, LLC			мо	DAY	YEAR				
Mailing Address 29374 NETWORK PL	ACE		3	24	2020	\$	49.32		
City CHICAGO	State	Zip Code (Plus 4)	Descrip	i tion of Exp	enditure				
	IL	606731293	DATA S	UBSCRIPT	ION				
To Whom Paid MIGHT GROUP, LLC			мо	DAY	YEAR				
Mailing Address 933 ROSE STREET 2	ND FL		4	1	2020	\$	3,000.00		
City HARRISBURG	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	1			
	PA	17102	CONSU	LTING					
To Whom Paid I360, LLC			мо	DAY	YEAR				
Aailing Address 29374 NETWORK PLACE		4	14	2020	\$	500.00			
City CHICAGO State Zip Code (Plus 4			4) Description of Expenditure						
	IL	606731293	DATA SUBSCRIPTION						

To Whom Paid	nom Paid			DAY	YEAR				
JEREMY BAKER			мо						
Mailing Address 433 PARKVIEW CO	JRT		4	14	2020	\$	2,000.00		
City CAMP HILL	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	РА	17011	CONSU	LTING					
To Whom Paid			мо	DAY	YEAR				
DEBEE CLARK									
Mailing Address PO BOX 54949			4	14	2020	\$	2,000.00		
City OAKLAHOMA CITY	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	ОК	73154	LEGAL F	RETAINER					
To Whom Paid COMMONWEALTH ENTREPRENEURS, L	_C		мо	DAY	YEAR				
Mailing Address 420 N 3RD STREET			4	14	2020	\$	3,365.50		
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure						
	РА	17101	RENT						
To Whom Paid OSBORNE LAW, P.A.	DSBORNE LAW, P.A.			DAY	YEAR				
Mailing Address 6501 ARLINGTON E	XPRESSWAY B105-#2	2060	4	15	2020	\$	175.00		
City JACKSONVILLE	State	Zip Code (Plus 4)) Description of Expenditure						
	FL	32211	LEGAL F	EES					
To Whom Paid ROCKWOOD STRATEGIES			мо	DAY	YEAR				
Mailing Address PO BOX 201			4	24	2020	\$	12,950.00		
City CARVERSVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	РА	18913	POLLIN	G					
To Whom Paid DEBEE CLARK			MO DAY YEAR						
Mailing Address PO BOX 54949			4	29	2020	\$	2,000.00		
City OKLAHOMA CITY	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure				
	ок	73154	LEGAL F	RETAINER					
To Whom Paid COMMONWEALTH ENTREPRENEURS, L	_C	·	мо	DAY	YEAR				
Mailing Address 420 N 3RD STREET			4	30	2020	\$	3,365.50		
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure				
PA 17101									
o Whom Paid RIENDS OF ROB MERCURI			мо	DAY	YEAR				
Mailing Address 3000 VILLAGE RUN	iling Address 3000 VILLAGE RUN RD		4	30	2020	\$	2,000.00		
City WEXFORD	ty WEXFORD State Zip Code (Plus 4)		Image: state						
	15090	CAMPAIGN CONTRIBUTION							

To Who											
	om Paid			мо	DAY	YEAR					
MIGHT GROUP, LLC											
Mailing Address 933 ROSE STREET 2ND FL					1	2020	\$	3,000.00			
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		PA	17102	CONSU	TING						
To Whom Paid					DAY	VEAD					
GERRY	WOSEWICK			мо	DAY	YEAR					
Mailing Address 238 TIMBER VIEW DR					1	2020	\$	7,000.00			
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		PA	17110	CONSU	TING						
To Who	om Paid	•	•								
FRIEND	DS OF CRIS DUSH			мо	DAY	YEAR					
Mailing	g Address 314 RHODES LAN	E		5	4	2020	\$	35,000.00			
City	BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		PA 15825				CAMPAIGN CONTRIBUTION					
To Who	om Paid	•									
FRIEND	DS OF ROB MERCURI			мо	DAY	YEAR					
Mailing	g Address 3000 VILLAGE RU	N RD		5	15	2020	\$	10,000.00			
City	WEXFORD	State	Zip Code (Plus 4)	Descrip	ion of Exp	enditure					
		PA	15090	CAMPAI	GN CONTR	RIBUTION					
To Who	om Paid	•	•								
ROCKWOOD STRATEGIES					DAY	VEAD					
ROCKV	WOOD STRATEGIES			мо	DAY	YEAR					
	WOOD STRATEGIES g Address PO BOX 201			мо 5	DAY 15	YEAR 2020	\$	4,400.00			
		State	Zip Code (Plus 4)	5		2020	\$	4,400.00			
Mailing	g Address PO BOX 201	State PA	Zip Code (Plus 4) 18913	5	15 tion of Exp	2020	\$	4,400.00			
Mailing City	g Address PO BOX 201			5 Descript POLLING	15 tion of Exp	2020 enditure	\$	4,400.00			
Mailing City To Who	g Address PO BOX 201 CARVERSVILLE			5 Descript	15 tion of Exp	2020	\$	4,400.00			
Mailing City To Who FRIEND	g Address PO BOX 201 CARVERSVILLE om Paid	РА		5 Descript POLLING	15 tion of Exp	2020 enditure	\$	4,400.00			
Mailing City To Who FRIEND Mailing	g Address PO BOX 201 CARVERSVILLE om Paid DS OF CRIS DUSH g Address 314 RHODES LAN	РА		Descript POLLING MO 5	15 tion of Exp G DAY	2020 enditure YEAR 2020					
Mailing City To Who FRIEND	g Address PO BOX 201 CARVERSVILLE om Paid DS OF CRIS DUSH	PA E	18913	MO Descript	15 tion of Exp G DAY 18	2020 enditure YEAR 2020 enditure	\$				
Mailing City To Who FRIENI Mailing City	g Address PO BOX 201 CARVERSVILLE om Paid DS OF CRIS DUSH g Address 314 RHODES LAN	PA E State	18913 Zip Code (Plus 4)	5 Description POLLING MO 5 Description CAMPAI	15 tion of Exp G DAY 18 tion of Exp GN FINAN	2020 enditure YEAR 2020 enditure CE REPOI	\$				
Mailing City To Who FRIENI Mailing City	g Address PO BOX 201 CARVERSVILLE om Paid DS OF CRIS DUSH g Address 314 RHODES LAN BROOKVILLE	PA E State	18913 Zip Code (Plus 4)	MO Descript	15 tion of Exp G DAY 18 tion of Exp	2020 enditure YEAR 2020 enditure	\$				
Mailing City To Who FRIENI Mailing City To Who I360, L	g Address PO BOX 201 CARVERSVILLE om Paid DS OF CRIS DUSH g Address 314 RHODES LAN BROOKVILLE	PA E State PA	18913 Zip Code (Plus 4)	5 Description POLLING MO 5 Description CAMPAI	15 tion of Exp G DAY 18 tion of Exp GN FINAN	2020 enditure YEAR 2020 enditure CE REPOI	\$				
Mailing City To Who FRIENI Mailing City To Who I360, L	g Address PO BOX 201 CARVERSVILLE om Paid DS OF CRIS DUSH g Address 314 RHODES LAN BROOKVILLE om Paid LLC g Address 29374 NETWORK	PA E State PA	18913 Zip Code (Plus 4)	MO Description POLLING MO CAMPAI MO 5	15 tion of Exp 3 DAY 18 tion of Exp GN FINAN	2020 enditure YEAR 2020 enditure CE REPOF YEAR 2020	\$? T	25,000.00			
Mailing City To Who FRIENI Mailing City To Who I360, L Mailing	g Address PO BOX 201 CARVERSVILLE om Paid DS OF CRIS DUSH g Address 314 RHODES LAN BROOKVILLE om Paid	PA E State PA PLACE	18913 Zip Code (Plus 4) 15825	5 Description POLLING MO Description CAMPAI MO 5 Description MO 5 Description MO 5 Description MO 5 Description MO 5 Description	15 tion of Exp G DAY 18 tion of Exp GN FINAN DAY 18	2020 enditure YEAR 2020 enditure CE REPOF YEAR 2020 enditure	\$? T	25,000.00			
Mailing City To Who FRIENE Mailing City To Who I360, L Mailing City	g Address PO BOX 201 CARVERSVILLE om Paid DS OF CRIS DUSH g Address 314 RHODES LAN BROOKVILLE om Paid LLC g Address 29374 NETWORK	PA E State PA PLACE State	18913 Zip Code (Plus 4) 15825 Zip Code (Plus 4)	MO Descript POLLING MO 5 Descript CAMPAI MO 5 Descript DATA S	15 tion of Exp 3 DAY 18 tion of Exp GN FINAN DAY 18 tion of Exp UBSCRIPT	2020 enditure YEAR 2020 enditure CE REPOI YEAR 2020 enditure	\$? T	25,000.00			
Mailing City To Who FRIENE Mailing City City City To Who	g Address PO BOX 201 CARVERSVILLE om Paid DS OF CRIS DUSH g Address 314 RHODES LAN BROOKVILLE om Paid LLC g Address 29374 NETWORK CHICAGO	PA E State PA PLACE State	18913 Zip Code (Plus 4) 15825 Zip Code (Plus 4)	5 Description POLLING MO Description CAMPAI MO 5 Description MO 5 Description MO 5 Description MO 5 Description MO 5 Description	15 tion of Exp G DAY 18 tion of Exp GN FINAN DAY 18 tion of Exp	2020 enditure YEAR 2020 enditure CE REPOF YEAR 2020 enditure	\$? T	25,000.00			
Mailing City FRIENC Mailing City City City City To Who UNIVE	Address PO BOX 201 CARVERSVILLE om Paid DS OF CRIS DUSH g Address 314 RHODES LAN BROOKVILLE om Paid LLC g Address 29374 NETWORK CHICAGO	PA E State PA PLACE State IL	18913 Zip Code (Plus 4) 15825 Zip Code (Plus 4)	MO Descript POLLING MO 5 Descript CAMPAI MO 5 Descript DATA S	15 tion of Exp 3 DAY 18 tion of Exp GN FINAN DAY 18 tion of Exp UBSCRIPT	2020 enditure YEAR 2020 enditure CE REPOI YEAR 2020 enditure	\$? T	25,000.00			
Mailing City FRIENC Mailing City City City City To Who UNIVE	Address PO BOX 201 CARVERSVILLE OM Paid DS OF CRIS DUSH Address 314 RHODES LAN BROOKVILLE OM Paid LLC 9 Address 29374 NETWORK CHICAGO OM Paid RSAL MEDIA INC	PA E State PA PLACE State IL	18913 Zip Code (Plus 4) 15825 Zip Code (Plus 4)	5 Description POLLING MO Description CAMPAI MO 5 Description DATA S MO 5	15 tion of Exp G DAY 18 tion of Exp GN FINAN DAY 18 tion of Exp UBSCRIPT: DAY	2020 enditure 2020 enditure 2020 enditure CE REPOF YEAR 2020 enditure ION YEAR 2020	\$ \$	25,000.00			

To Whom Paid	мо	DAY	YEAR				
FRIENDS OF MATTHEW							
Mailing Address PO B	5	18	2020	\$	1,000.00		
City UNIONTOWN State Zip Code (Plus 4) Description of Expenditur						•	
	PA	15401	CAMPAI	GN CONTE	RIBUTION	J	
		PAGE TOTAL					
Enter Grand Total of I	Expenditures on Page 1,	Report Cover Page, Item D	•			\$	161,305.32