

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 : 20200146		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: TIM DEFOOR FOR AUDITOR GENERAL								
Street Address: P.O. BOX 64								
City: HARRISBURG				State: PA		Zip Code: 17108		
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.	AMENDMENT REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes <input type="checkbox"/> 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
AUDITOR GENERAL				MO DAY YEAR			AUD	REP
				11 3 2020			22	
							(SEE INSTRUCTIONS FOR CODES)	
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		FOR OFFICE USE ONLY	
		6	23	2020	9 14 2020			
A. Amount Brought Forward From Last Report				\$ 2,673.50				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$ 20,422.00				
C. Total Funds Available (Sum Of Lines A and B)				\$ 23,095.50				
D. Total Expenditures (From Schedule III)				\$ 6,430.79				
E. Ending Cash Balance (Subtract Line D From Line C)				\$ 16,664.71				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$ 0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$ 500.00				

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 of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
TIM DEFOOR FOR AUDITOR GENERAL	From: <u>6/23/2020</u> To: <u>9/14/2020</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 347.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 1,950.00
All Other Contributions (Part B)	\$ 2,125.00
TOTAL for the Reporting Period (2)	\$ 4,075.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 8,000.00
All Other Contributions (Part D)	\$ 8,000.00
TOTAL for the Reporting Period (3)	\$ 16,000.00

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.)	\$ 20,422.00
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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			
TIM DEFOOR FOR AUDITOR GENERAL				From: <u>6/23/2020</u> To: <u>9/14/2020</u>			
				DATE		AMOUNT	

Full Name of Contributing Committee UGI UTILITIES, INC. PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address P.O. BOX 12677			9	1	2020	
City READING	State PA	Zip Code (Plus 4) 19612				

Full Name of Contributing Committee TROOPERS ASSOCIATION PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 3625 VARTAN WAY			8	12	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110				

Full Name of Contributing Committee PA FRATERNAL ORDER OF POLICE PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 2949 N FRONT ST			8	12	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110				

Full Name of Contributing Committee GREENLEE PARTNERS STATE PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 230 STATE ST			8	12	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				

Full Name of Contributing Committee FRIENDS OF TIM HENNESSEY			MO	DAY	YEAR	\$ 250.00
Mailing Address 1178 FOXVIEW RD			8	20	2020	
City POTTSTOWN	State PA	Zip Code (Plus 4) 19465				

Full Name of Contributing Committee FRIENDS OF RAY D AGOSTINO			MO	DAY	YEAR	\$ 100.00
Mailing Address P.O. BOX 2184			9	14	2020	
City LANCASTER	State PA	Zip Code (Plus 4) 17608				

Full Name of Contributing Committee FRIENDS OF JOSH PARSONS			MO	DAY	YEAR	\$ 100.00
Mailing Address P.O. BOX 2487			9	14	2020	
City LANCASTER	State PA	Zip Code (Plus 4) 17608				

Full Name of Contributing Committee CHAMBER PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 417 WALNUT ST			8	20	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				

Full Name of Contributing Committee BLUE PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address P.O. BOX 60710			9	4	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17106				

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

PAGE TOTAL
\$ 1,950.00

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
TIM DEFOOR FOR AUDITOR GENERAL	From: <u>6/23/2020</u> To: <u>9/14/2020</u>

					DATE		AMOUNT
Full Name of Contributor CHRIS ABRUZZO				MO 8	DAY 11	YEAR 2020	\$ 250.00
Mailing Address 12 JACOBS CREEK DR.							
City HERSHEY	State PA	Zip Code (Plus 4) 17033					
Full Name of Contributor LYNDA J BOWMAN				MO 9	DAY 14	YEAR 2020	\$ 100.00
Mailing Address 1349 COUNTRY CLUB DR							
City LANCASTER	State PA	Zip Code (Plus 4) 17601					
Full Name of Contributor SAM BRANCADORA				MO 8	DAY 29	YEAR 2020	\$ 200.00
Mailing Address 1018 VICTORY CIR							
City READING	State PA	Zip Code (Plus 4) 19605					
Full Name of Contributor MICHAEL A GLASER				MO 7	DAY 1	YEAR 2020	\$ 100.00
Mailing Address 3008 HARVARD AVE							
City CAMP HILL	State PA	Zip Code (Plus 4) 17011					
Full Name of Contributor CHRISTINA L HAUSNER				MO 9	DAY 14	YEAR 2020	\$ 250.00
Mailing Address 3299 RANDY RD							
City LANCASTER	State PA	Zip Code (Plus 4) 17601					
Full Name of Contributor JEAN E KING				MO 7	DAY 24	YEAR 2020	\$ 150.00
Mailing Address 6527 WINDMERE RD							
City HARRISBURG	State PA	Zip Code (Plus 4) 17111					

Full Name of Contributor JOAN H KOURY				MO	DAY	YEAR	\$ 100.00
Mailing Address 7051 CREEK CROSSING DR				8	20	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17111					
Full Name of Contributor SUSAN LUCOT				MO	DAY	YEAR	\$ 100.00
Mailing Address 10 ROSEMARY LN				9	14	2020	
City SOUTH PARK TOWNSHIP	State PA	Zip Code (Plus 4) 15129					
Full Name of Contributor CHRISTOPHER NICHOLAS				MO	DAY	YEAR	\$ 200.00
Mailing Address 107 N 45TH ST				6	23	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17111					
Full Name of Contributor MARY M QUIGLEY				MO	DAY	YEAR	\$ 75.00
Mailing Address 10 SOUTH RD				8	12	2020	
City DAUPHIN	State PA	Zip Code (Plus 4) 17018					
Full Name of Contributor CHRISTOPHER B REILLEY				MO	DAY	YEAR	\$ 100.00
Mailing Address P.O. BOX 206				9	9	2020	
City YORK	State PA	Zip Code (Plus 4) 17405					
Full Name of Contributor GARY RENAUD				MO	DAY	YEAR	\$ 250.00
Mailing Address P.O. BOX 8247				8	5	2020	
City ERIE	State PA	Zip Code (Plus 4) 16505					
Full Name of Contributor DENNIS P STUCKEY				MO	DAY	YEAR	\$ 150.00
Mailing Address 216 OXFORD DR				9	14	2020	
City LITITZ	State PA	Zip Code (Plus 4) 17543					
Full Name of Contributor RONALD E WERKMEISTER				MO	DAY	YEAR	\$ 100.00
Mailing Address 4750 ROBERT DR				7	2	2020	
City BETHEL PARK	State PA	Zip Code (Plus 4) 15102					

PAGE TOTAL

\$ 2,125.00

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

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
TIM DEFOOR FOR AUDITOR GENERAL	From: <u>6/23/2020</u> To: <u>9/14/2020</u>

				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
DUANE MORRIS, LLP GOVERNMENT COMMITTEE PAC				8	12	2020	
Mailing Address 30 SOUTH 17TH ST							
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
FRIENDS OF BRIAN HURTER				9	14	2020	
Mailing Address 1058 FONDERSMITH DR							
City LANCASTER	State PA	Zip Code (Plus 4) 17601					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
MCNEES PAC				8	12	2020	
Mailing Address P.O. BOX 1166							
City HARRISBURG	State PA	Zip Code (Plus 4) 17108					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 5,000.00
PA FUTURE FUND				7	22	2020	
Mailing Address P.O. BOX 6128							
City HARRISBURG	State PA	Zip Code (Plus 4) 17112					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
RELIGHT AMERICA PAC				7	27	2020	
Mailing Address P.O. BOX 2485							
City SPRINGFIELD	State VA	Zip Code (Plus 4) 22152					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
SUSQUEHANNA COUNTY REPUBLICAN COMMITTEE				8	28	2020	
Mailing Address 171 FOOLISH PLEASURE RD							
City FRIENDSVILLE	State PA	Zip Code (Plus 4) 18818					

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

PAGE TOTAL

\$ 8,000.00

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
TIM DEFOOR FOR AUDITOR GENERAL	From: <u>6/23/2020</u> To: <u>9/14/2020</u>

				DATE	AMOUNT		
Full Name of Contributor FRANK R SOURBEER				MO	DAY	YEAR	\$ 500.00
Mailing Address 905 KATIE CT				7	12	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17109					
Employer Name WILSBACH DISTRIBUTORS, INC.				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business 905 KATIE CT			City HARRISBURG		State PA		Zip Code (Plus 4) 17109
Full Name of Contributor BRUCE NILSON				MO	DAY	YEAR	\$ 500.00
Mailing Address 2104 N NOTTINGHAM ST				8	11	2020	
City ARLINGTON	State VA	Zip Code (Plus 4) 22205					
Employer Name RED CURVE SOLUTIONS				Occupation CONSULTANT			
Employer Mailing Address/Principal Place of Business 138 CONANT ST			City BEVERLY		State MA		Zip Code (Plus 4) 01915
Full Name of Contributor JIM MCERLANE				MO	DAY	YEAR	\$ 1,000.00
Mailing Address P.O. BOX 565				7	21	2020	
City WEST CHESTER	State PA	Zip Code (Plus 4) 19381					
Employer Name LAMB, WINDLE, AND MCERLANE				Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 24 EAST MARKET ST			City WEST CHESTER		State PA		Zip Code (Plus 4) 19380
Full Name of Contributor DAVID L HOLLINGER				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 755 WHITE OAK RD				9	14	2020	
City DENVER	State PA	Zip Code (Plus 4) 17517					
Employer Name FOUR SEASONS PRODUCE				Occupation CHAIRMAN			
Employer Mailing Address/Principal Place of Business 400 WABASH RD			City EPHRATA		State PA		Zip Code (Plus 4) 17522

Full Name of Contributor DALE HIGH			MO	DAY	YEAR	\$ 1,000.00
Mailing Address P.O. BOX 11087			9	14	2020	
City LANCASTER	State PA	Zip Code (Plus 4) 17605				
Employer Name HIGH COMPANIES			Occupation CHAIRMAN			
Employer Mailing Address/Principal Place of Business P.O. BOX 10008		City LANCASTER	State PA	Zip Code (Plus 4) 17605		

Full Name of Contributor ELMER W HEINEL			MO	DAY	YEAR	\$ 2,000.00
Mailing Address 27 OVERLOOK CIR			7	30	2020	
City BERWYN	State PA	Zip Code (Plus 4) 19312				
Employer Name SELF EMPLOYED			Occupation CONSULTANT			
Employer Mailing Address/Principal Place of Business 27 OVERLOOK CIR		City BERWYN	State PA	Zip Code (Plus 4) 19312		

Full Name of Contributor TIMOTHY L DEFOOR			MO	DAY	YEAR	\$ 500.00
Mailing Address 1300 ELLIS DR APT 206			7	2	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110				
Employer Name DAUPHIN COUNTY			Occupation CONTROLLER			
Employer Mailing Address/Principal Place of Business 101 MARKET ST		City HARRISBURG	State PA	Zip Code (Plus 4) 17101		

Full Name of Contributor ROBERT J BROOKS			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 3465 TREELINE DR			8	25	2020	
City MURRYSVILLE	State PA	Zip Code (Plus 4) 15668				
Employer Name			Occupation RETIRED			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor NOAH W KREIDER & SONS			MO	DAY	YEAR	\$ 500.00
Mailing Address 1461 LANCASTER RD			9	14	2020	
City MANHEIM	State PA	Zip Code (Plus 4) 17545				
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**\$** 8,000.00

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		Reporting Period	
TIM DEFOOR FOR AUDITOR GENERAL		From: <u>6/23/2020</u> To: <u>9/14/2020</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 RECIEVED - 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:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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
TIM DEFOOR FOR AUDITOR GENERAL	From <u>6/23/2020</u> To: <u>9/14/2020</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
PERRY MEDIA GROUP				
Mailing Address 862 FAWN LN	7	24	2020	\$ 1,741.65
City HUMMELSTOWN	State PA	Zip Code (Plus 4) 17036	Description of Expenditure PHOTO SHOOT	
To Whom Paid	MO	DAY	YEAR	
WINRED				
Mailing Address P.O. BOX 9891	7	25	2020	\$ 2.20
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE	
To Whom Paid	MO	DAY	YEAR	
WINRED				
Mailing Address P.O. BOX 9891	7	27	2020	\$ 1.44
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE	
To Whom Paid	MO	DAY	YEAR	
PNC BANK				
Mailing Address 2 NORTH SECOND STREET	7	30	2020	\$ 78.60
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure PRINTING	
To Whom Paid	MO	DAY	YEAR	
CPITECH				
Mailing Address 3212 PIKE ST	7	31	2020	\$ 585.65
City HARRISBURG	State PA	Zip Code (Plus 4) 17111	Description of Expenditure OFFICE SUPPLIES	
To Whom Paid	MO	DAY	YEAR	
POSTMASTER				
Mailing Address FEDERAL SQUARE STATION WALNUT AND 2ND ST. 1ST FLOOR	7	31	2020	\$ 11.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure POSTAGE	

To Whom Paid			MO	DAY	YEAR	\$ 2.20
WINRED						
Mailing Address P.O. BOX 9891			8	4	2020	
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE			

To Whom Paid			MO	DAY	YEAR	\$ 9.80
WINRED						
Mailing Address P.O. BOX 9891			8	5	2020	
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE			

To Whom Paid			MO	DAY	YEAR	\$ 29.10
WINRED						
Mailing Address P.O. BOX 9891			8	11	2020	
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE			

To Whom Paid			MO	DAY	YEAR	\$ 7.90
WINRED						
Mailing Address P.O. BOX 9891			6	23	2020	
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE			

To Whom Paid			MO	DAY	YEAR	\$ 4.10
WINRED						
Mailing Address P.O. BOX 9891			7	1	2020	
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE			

To Whom Paid			MO	DAY	YEAR	\$ 218.00
DOUG RICKARDS						
Mailing Address 210 KELKER ST			7	6	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17102	Description of Expenditure REIMBURSEMENT			

To Whom Paid			MO	DAY	YEAR	\$ 19.30
WINRED						
Mailing Address P.O. BOX 9891			7	12	2020	
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE			

To Whom Paid			MO	DAY	YEAR	\$ 1.25
WINRED						
Mailing Address P.O. BOX 9891			7	14	2020	
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE			

To Whom Paid			MO	DAY	YEAR	\$0.34
WINRED						
Mailing Address P.O. BOX 9891			7	16	2020	
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE			
To Whom Paid			MO	DAY	YEAR	\$2,000.00
PERRY MEDIA GROUP						
Mailing Address 862 FAWN LN			7	20	2020	
City HUMMELSTOWN	State PA	Zip Code (Plus 4) 17036	Description of Expenditure WEBSITE			
To Whom Paid			MO	DAY	YEAR	\$38.30
WINRED						
Mailing Address P.O. BOX 9891			7	21	2020	
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE			
To Whom Paid			MO	DAY	YEAR	\$625.00
MAJORITY STRATEGIES, LLC						
Mailing Address P.O. BOX 679219			7	24	2020	
City DALLAS	State TX	Zip Code (Plus 4) 75267	Description of Expenditure DESIGN			
To Whom Paid			MO	DAY	YEAR	\$1.25
WINRED						
Mailing Address P.O. BOX 9891			8	12	2020	
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE			
To Whom Paid			MO	DAY	YEAR	\$38.30
WINRED						
Mailing Address P.O. BOX 9891			8	25	2020	
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE			
To Whom Paid			MO	DAY	YEAR	\$7.90
WINRED						
Mailing Address P.O. BOX 9891			8	29	2020	
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE			
To Whom Paid			MO	DAY	YEAR	\$0.53
WINRED						
Mailing Address P.O. BOX 9891			8	30	2020	
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE			

To Whom Paid CTBS, LLC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 427 ST. MARY'S VILLA RD.			9	8	2020	
City ROARING BROOK	State PA	Zip Code (Plus 4) 18444	Description of Expenditure CONSULTING			

To Whom Paid WINRED			MO	DAY	YEAR	\$ 6.98
Mailing Address P.O. BOX 9891			9	14	2020	
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 6,430.79

SCHEDULE IV
STATEMENT OF UNPAID DEBTS
 Use this Section to itemize all unpaid debts and obligations
 which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate TIM DEFOOR FOR AUDITOR GENERAL	Reporting Period From: <u>6/23/2020</u> To: <u>9/14/2020</u>
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				DATE		Outstanding Balance of Debt	
Name of Creditor				MO	DAY	YEAR	
TIM DEFOOR							
Mailing Address				7	2	2020	\$ 500.00
City		HARRISBURG	State	PA	Zip Code (Plus 4)	17110	Description of Debt
							LOAN
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL
							\$ 500.00