

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

<b>Filer Identification Number :</b>		20200146		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> TIM DEFOOR FOR AUDITOR GENERAL												
<b>Street Address:</b>												
<b>City:</b> HARRISBURG						<b>State:</b> PA		<b>Zip Code:</b> 17108				
<b>TYPE OF REPORT</b>  (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	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2020	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
AUDITOR GENERAL						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	AUD	REP	22	
						11	3	2020	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		6	23	2020		9	14	2020				
<b>A. Amount Brought Forward From Last Report</b>						\$ 2,673.50						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 20,422.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 23,095.50						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 6,430.79						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 16,664.71						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 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**

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

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

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

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

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</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.**

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

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
BLUE PAC			9	4	2020	
<b>Mailing Address</b>						
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17106				

  

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

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
FRIENDS OF JOSH PARSONS			9	14	2020	
<b>Mailing Address</b>						
<b>City</b> LANCASTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17608				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
FRIENDS OF RAY D AGOSTINO			9	14	2020	
<b>Mailing Address</b>						
<b>City</b> LANCASTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17608				

  

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

  

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

  

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

Full Name of Contributing Committee TROOPERS ASSOCIATION PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address			8	12	2020	
City	HARRISBURG	State PA				

Full Name of Contributing Committee UGI UTILITIES, INC. PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address			9	1	2020	
City	READING	State PA				

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

<b>PAGE TOTAL</b>
\$ 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)**

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

  

<b>Full Name of Contributor</b> CHRIS ABRUZZO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b>			8	11	2020	
<b>City</b> HERSHEY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17033				

  

<b>Full Name of Contributor</b> LYNDA J BOWMAN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>			9	14	2020	
<b>City</b> LANCASTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17601				

  

<b>Full Name of Contributor</b> SAM BRANCADORA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b>			8	29	2020	
<b>City</b> READING	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19605				

  

<b>Full Name of Contributor</b> MICHAEL A GLASER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>			7	1	2020	
<b>City</b> CAMP HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17011				

  

<b>Full Name of Contributor</b> CHRISTINA L HAUSNER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b>			9	14	2020	
<b>City</b> LANCASTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17601				

  

<b>Full Name of Contributor</b> JEAN E KING			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 150.00
<b>Mailing Address</b>			7	24	2020	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17111				

  

<b>Full Name of Contributor</b> JOAN H KOURY			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>			8	20	2020	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17111				

Full Name of Contributor SUSAN LUCOT				MO	DAY	YEAR	\$ 100.00
Mailing Address				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				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				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				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				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				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				7	2	2020	
City	BETHEL PARK	State PA	Zip Code (Plus 4) 15102				

PAGE TOTAL

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

\$ 2,125.00



# 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
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
DUANE MORRIS, LLP GOVERNMENT COMMITTEE PAC						
Mailing Address				8	12	2020
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		19103
						\$ 1,000.00
Full Name of Contributing Committee				MO	DAY	YEAR
FRIENDS OF BRIAN HURTER						
Mailing Address				9	14	2020
City	LANCASTER	State	PA	Zip Code (Plus 4)		17601
						\$ 500.00
Full Name of Contributing Committee				MO	DAY	YEAR
MCNEES PAC						
Mailing Address				8	12	2020
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17108
						\$ 500.00
Full Name of Contributing Committee				MO	DAY	YEAR
PA FUTURE FUND						
Mailing Address				7	22	2020
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17112
						\$ 5,000.00
Full Name of Contributing Committee				MO	DAY	YEAR
RELIGHT AMERICA PAC						
Mailing Address				7	27	2020
City	SPRINGFIELD	State	VA	Zip Code (Plus 4)		22152
						\$ 500.00
Full Name of Contributing Committee				MO	DAY	YEAR
SUSQUEHANNA COUNTY REPUBLICAN COMMITTEE						
Mailing Address				8	28	2020
City	FRIENDSVILLE	State	PA	Zip Code (Plus 4)		18818
						\$ 500.00

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.)**

<b>Name of Filing Committee or Candidate</b>  TIM DEFOOR FOR AUDITOR GENERAL	<b>Reporting Period</b>  <b>From:</b> <u>6/23/2020</u> <b>To:</b> <u>9/14/2020</u>
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				DATE	AMOUNT		
<b>Full Name of Contributor</b> NOAH W KREIDER & SONS				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> City MANHEIM State PA Zip Code (Plus 4) 17545				9	14	2020	
<b>Employer Name</b> 				<b>Occupation</b> 			
<b>Employer Mailing Address/Principal Place of Business</b> 				<b>City</b> 		<b>State</b> 	<b>Zip Code (Plus 4)</b> 
<b>Full Name of Contributor</b> ROBERT J BROOKS				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> City MURRYSVILLE State PA Zip Code (Plus 4) 15668				8	25	2020	
<b>Employer Name</b> 				<b>Occupation</b> RETIRED			
<b>Employer Mailing Address/Principal Place of Business</b> 				<b>City</b> 		<b>State</b> 	<b>Zip Code (Plus 4)</b> 
<b>Full Name of Contributor</b> TIMOTHY L DEFOOR				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> City HARRISBURG State PA Zip Code (Plus 4) 17110				7	2	2020	
<b>Employer Name</b> DAUPHIN COUNTY				<b>Occupation</b> CONTROLLER			
<b>Employer Mailing Address/Principal Place of Business</b> 				<b>City</b> HARRISBURG		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101
<b>Full Name of Contributor</b> ELMER W HEINEL				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,000.00
<b>Mailing Address</b> City BERWYN State PA Zip Code (Plus 4) 19312				7	30	2020	
<b>Employer Name</b> SELF EMPLOYED				<b>Occupation</b> CONSULTANT			
<b>Employer Mailing Address/Principal Place of Business</b> 				<b>City</b> BERWYN		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19312

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

  

<b>Full Name of Contributor</b> DAVID L HOLLINGER				<b>MO</b> 9	<b>DAY</b> 14	<b>YEAR</b> 2020	<b>\$</b> 1,000.00
<b>Mailing Address</b>							
<b>City</b> DENVER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17517					
<b>Employer Name</b> FOUR SEASONS PRODUCE				<b>Occupation</b> CHAIRMAN			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b> EPHRATA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17522		

  

<b>Full Name of Contributor</b> JIM MCERLANE				<b>MO</b> 7	<b>DAY</b> 21	<b>YEAR</b> 2020	<b>\$</b> 1,000.00
<b>Mailing Address</b>							
<b>City</b> WEST CHESTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19381					
<b>Employer Name</b> LAMB, WINDLE, AND MCERLANE				<b>Occupation</b> ATTORNEY			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b> WEST CHESTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19380		

  

<b>Full Name of Contributor</b> BRUCE NILSON				<b>MO</b> 8	<b>DAY</b> 11	<b>YEAR</b> 2020	<b>\$</b> 500.00
<b>Mailing Address</b>							
<b>City</b> ARLINGTON	<b>State</b> VA	<b>Zip Code (Plus 4)</b> 22205					
<b>Employer Name</b> RED CURVE SOLUTIONS				<b>Occupation</b> CONSULTANT			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b> BEVERLY	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 01915		

  

<b>Full Name of Contributor</b> FRANK R SOURBEER				<b>MO</b> 7	<b>DAY</b> 12	<b>YEAR</b> 2020	<b>\$</b> 500.00
<b>Mailing Address</b>							
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17109					
<b>Employer Name</b> WILSBACH DISTRIBUTORS, INC.				<b>Occupation</b> PRESIDENT			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17109		

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
	<div style="display: flex; justify-content: space-between;"> <span>From:</span> <span>To:</span> </div>

			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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
TIM DEFOOR FOR AUDITOR GENERAL		From: <u>6/23/2020</u> To: <u>9/14/2020</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 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

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

				DATE		AMOUNT	
To Whom Paid PERRY MEDIA GROUP				MO	DAY	YEAR	\$ 1,741.65
Mailing Address				7	24	2020	
City	HUMMELSTOWN	State	PA	Zip Code (Plus 4)	17036	Description of Expenditure PHOTO SHOOT	
To Whom Paid WINRED				MO	DAY	YEAR	\$ 2.20
Mailing Address				7	25	2020	
City	ARLINGTON	State	VA	Zip Code (Plus 4)	22219	Description of Expenditure SERVICE FEE	
To Whom Paid WINRED				MO	DAY	YEAR	\$ 1.44
Mailing Address				7	27	2020	
City	ARLINGTON	State	VA	Zip Code (Plus 4)	22219	Description of Expenditure SERVICE FEE	
To Whom Paid PNC BANK				MO	DAY	YEAR	\$ 78.60
Mailing Address				7	30	2020	
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17101	Description of Expenditure PRINTING	
To Whom Paid CPITECH				MO	DAY	YEAR	\$ 585.65
Mailing Address				7	31	2020	
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17111	Description of Expenditure OFFICE SUPPLIES	
To Whom Paid POSTMASTER				MO	DAY	YEAR	\$ 11.00
Mailing Address				7	31	2020	
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17108	Description of Expenditure POSTAGE	

To Whom Paid			MO	DAY	YEAR	\$ 2.20
WINRED						
Mailing Address			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			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			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			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			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			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			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			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			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			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			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			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			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			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			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			8	30	2020	
City ARLINGTON	State VA	Zip Code (Plus 4) 22219	Description of Expenditure SERVICE FEE			

<b>To Whom Paid</b> CTBS, LLC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 1,000.00
<b>Mailing Address</b>			9	8	2020	
<b>City</b> ROARING BROOK	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18444	<b>Description of Expenditure</b> CONSULTING			

  

<b>To Whom Paid</b> WINRED			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 6.98
<b>Mailing Address</b>			9	14	2020	
<b>City</b> ARLINGTON	<b>State</b> VA	<b>Zip Code (Plus 4)</b> 22219	<b>Description of Expenditure</b> SERVICE FEE			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						<b>\$</b> 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**

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