

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 LEADERS 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.	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	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	
		6	23	2020	TO	9	14	2020		
A. Amount Brought Forward From Last Report			\$			1,916,832.60				
B. Total Monetary Contributions And Receipts (From Schedule I)			\$			157,231.37				
C. Total Funds Available (Sum Of Lines A and B)			\$			2,074,063.90				
D. Total Expenditures (From Schedule III)			\$			1,916,782.25				
E. Ending Cash Balance (Subtract Line D From Line C)			\$			157,281.65				
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 LEADERS FUND	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)	\$ 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)	\$ 200.00
TOTAL for the Reporting Period (2)	\$ 200.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 125,000.00
All Other Contributions (Part D)	\$ 31,500.00
TOTAL for the Reporting Period (3)	\$ 156,500.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 531.37

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.)	\$ 157,231.37
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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
COMMONWEALTH LEADERS FUND	From: <u>6/23/2020</u> To: <u>9/14/2020</u>

				DATE	AMOUNT	
Full Name of Contributor			MO	DAY	YEAR	\$ 200.00
JAMES CALISTRI						
Mailing Address 168 E CURTAIN STREET			8	15	2020	
City BELEFONTE	State PA	Zip Code (Plus 4) 16823				

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

PAGE TOTAL
\$ 200.00

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 COMMONWEALTH LEADERS FUND	Reporting Period From: <u>6/23/2020</u> To: <u>9/14/2020</u>
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			DATE	AMOUNT		
Full Name of Contributing Committee	Mailing Address	City	MO	DAY	YEAR	
NORTHWEST GOOD GOVERNMENT PAC	100 STATE STREET STE 440	ERIE	7	29	2020	\$ 25,000.00
State PA	Zip Code (Plus 4) 16507					
COMMONWEALTH CHILDREN'S CHOICE FUND	420 N 3RD STREET	HARRISBURG	9	1	2020	\$ 100,000.00
State PA	Zip Code (Plus 4) 17101					

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

PAGE TOTAL
\$ 125,000.00

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 COMMONWEALTH LEADERS FUND	Reporting Period From: <u>6/23/2020</u> To: <u>9/14/2020</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
SCOTT TURER							
Mailing Address 201 ROBB LANE				6	23	2020	\$ 1,000.00
City GREENSBURG	State PA	Zip Code (Plus 4) 15601					
Employer Name THREE RIVERS MARINE & RAIL TERMINALS				Occupation CFO			
Employer Mailing Address/Principal Place of Business 17 ARENTZEN BLVDSUITE 206			City CHARLEROI		State PA	Zip Code (Plus 4) 15022	
WILLIAM HEILIG							
Mailing Address 924 WINDING LANE				6	24	2020	\$ 500.00
City MEDIA	State PA	Zip Code (Plus 4) 19063					
Employer Name RETIRED				Occupation RETIRED			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
PATRICK GALLAGHER							
Mailing Address 19 OAK KNOLL				7	27	2020	\$ 5,000.00
City SEWICKLEY	State PA	Zip Code (Plus 4) 15143					
Employer Name PGT TRUCKING				Occupation FOUNDER			
Employer Mailing Address/Principal Place of Business 4200 INDUSTRIAL BOULEVARD			City ALIQUIPPA		State PA	Zip Code (Plus 4) 15001	

Full Name of Contributor THOMAS KING III				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 456 SHELDON RD				7	29	2020	
City VALENCIA	State PA	Zip Code (Plus 4) 16059					
Employer Name DILLON MCCANDLESS KING COULTER & GRAHAM LLP				Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 128 WEST CUNNINGHAM ST			City BUTLER		State PA	Zip Code (Plus 4) 16001	

Full Name of Contributor NATHANIEL PATTERSON				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 205 BISHOP RD				8	3	2020	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055					
Employer Name PAYTIME PAYROLL				Occupation PRESIDENT & CEO			
Employer Mailing Address/Principal Place of Business 5053 RITTER RDSTE 100			City MECHANICSBURG		State PA	Zip Code (Plus 4) 17055	

Full Name of Contributor ARTHUR AND CATHY CAMPBELL				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 20 CRAIN CIRCLE				8	3	2020	
City LEMOYNE	State PA	Zip Code (Plus 4) 17043					
Employer Name CAMPBELL COMMERCIAL REAL ESTATE				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business 300 CORPORATE CENTER DRIVE #201			City CAMP HILL		State PA	Zip Code (Plus 4) 17011	

Full Name of Contributor JOHN C OLIVER III				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 334 SCAIFE RD				8	4	2020	
City SEWICKLEY	State PA	Zip Code (Plus 4) 15143					
Employer Name ENTREPRENEUR				Occupation			
Employer Mailing Address/Principal Place of Business 720 OLIVER BLDG535 SMITHFIELD STREET			City PITTSBURGH		State PA	Zip Code (Plus 4) 15222	

Full Name of Contributor TODD M & DEBORAH J WITMER			MO	DAY	YEAR	\$ 6,000.00
Mailing Address 4561590 SILVER SPRING RD			8	13	2020	
City MOUNT JOY	State PA	Zip Code (Plus 4) 17552				
Employer Name THE WITMER GROUP			Occupation CEO			
Employer Mailing Address/Principal Place of Business 1003 CORNERSTONE DR		City MOUNT JOY	State PA	Zip Code (Plus 4) 17552		

Full Name of Contributor JOSEPH WAGMAN			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 975 SUMMIT CIRCLE N			8	13	2020	
City YORK	State PA	Zip Code (Plus 4) 17403				
Employer Name WAGMAN CONSTRUCTION, INC.			Occupation CHAIRMAN			
Employer Mailing Address/Principal Place of Business 231 N GEORGE ST		City YORK	State PA	Zip Code (Plus 4) 17401		

Full Name of Contributor GREGORY WEBSTER			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 8128 SAINT MARTINS LANE			8	20	2020	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19118				
Employer Name PMC PROPERTY GROUP			Occupation COO			
Employer Mailing Address/Principal Place of Business 1608 WALNUT STSTE. 1400		City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103		

Full Name of Contributor GREGG SUTLIFF			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 700 CREEK RD			9	2	2020	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011				
Employer Name RETIRED			Occupation RETIRED			
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	
\$	31,500.00

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 COMMONWEALTH LEADERS FUND	Reporting Period From: <u>6/23/2020</u> To: <u>9/14/2020</u>
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				DATE	AMOUNT	
Full Name FIRST NATIONAL BANK OF PA			MO	DAY	YEAR	\$ 303.88
Mailing Address 101 N 2ND STREET			7	31	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17102				
Receipt Description INTEREST EARNED						

Full Name FIRST NATIONAL BANK OF PA			MO	DAY	YEAR	\$ 227.49
Mailing Address 101 N 2ND STREET			8	31	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17102				
Receipt Description INTEREST EARNED						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 531.37

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 LEADERS FUND	Reporting Period 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 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: _____
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
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 LEADERS FUND	From <u>6/23/2020</u> To: <u>9/14/2020</u>

				DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR		
COMMONWEALTH ENTREPRENEURS, LLC	7	1	2020	\$	3,365.50
Mailing Address 420 N 3RD STREET					
City HARRISBURG					
State PA					
Zip Code (Plus 4) 17101					
Description of Expenditure RENT					
To Whom Paid MIGHTY GROUP, LLC	7	9	2020	\$	413,245.00
Mailing Address 933 ROSE STREET FLOOR 2					
City HARRISBURG					
State PA					
Zip Code (Plus 4) 17102					
Description of Expenditure IN-KIND CONTRIBUTIONS FOR (SEE BACK OF THIS PAGE ADVERTISING					
To Whom Paid FIRST NATIONAL BANK OF PA	7	9	2020	\$	27.00
Mailing Address 101 N 2ND STREET					
City HARRISBURG					
State PA					
Zip Code (Plus 4) 17102					
Description of Expenditure BANK FEES					
To Whom Paid DEBEE CLARK	7	9	2020	\$	2,000.00
Mailing Address PO BOX 54949					
City OKLAHOMA CITY					
State OK					
Zip Code (Plus 4) 73154					
Description of Expenditure LEGAL FEES					
To Whom Paid GOLDSTEIN LAW PARTNERS	7	8	2020	\$	270.00
Mailing Address 11 CHURCH ROAD					
City HATFIELD					
State PA					
Zip Code (Plus 4) 19440					
Description of Expenditure LEGAL FEES					

To Whom Paid HEIDELBAUGH FOR ATTORNEY GENERAL			MO	DAY	YEAR	\$ 250,000.00
Mailing Address 141 WOODHAVEN DRIVE			7	17	2020	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15228	Description of Expenditure CAMPAIGN CONTRIBUTION			
To Whom Paid COMMONWEALTH PARTNERS CHAMBER OF ENTREPRENEURS			MO	DAY	YEAR	\$ 12,050.73
Mailing Address 420 N 3RD STREET			7	20	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure ADMINISTRATION			
To Whom Paid COMMONWEALTH ENTREPRENEURS, LLC			MO	DAY	YEAR	\$ 3,365.50
Mailing Address 420 N 3RD STREET			8	5	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure RENT			
To Whom Paid COMMONWEALTH PARTNERS CHAMBER OF ENTREPRENEURS			MO	DAY	YEAR	\$ 7,245.40
Mailing Address 420 N 3RD STREET			8	5	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure ADMINISTRATION			
To Whom Paid MIGHTY GROUP, LLC			MO	DAY	YEAR	\$ 1,014,778.49
Mailing Address 933 ROSE STREET FLOOR 2			8	5	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17102	Description of Expenditure IN-KIND CONTRIBUTIONS FOR (SEE BACK OF THIS PAGE) ADVERTISING			
To Whom Paid FIRST NATIONAL BANK OF PA			MO	DAY	YEAR	\$ 27.00
Mailing Address 101 N 2ND STREET			8	5	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17102	Description of Expenditure BANK FEES			

To Whom Paid DEBEE CLARK			MO	DAY	YEAR	
Mailing Address PO BOX 54949			8	5	2020	
City OKLAHOMA CITY	State OK	Zip Code (Plus 4) 73154	Description of Expenditure LEGAL FEES			
To Whom Paid GOLDSTEIN LAW PARTNERS			MO	DAY	YEAR	
Mailing Address 11 CHURCH ROAD			8	21	2020	
City HATFIELD	State PA	Zip Code (Plus 4) 19440	Description of Expenditure LEGAL FEES			
To Whom Paid MIGHTY GROUP, LLC			MO	DAY	YEAR	
Mailing Address 933 ROSE STREET FLOOR 2			9	1	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17102	Description of Expenditure IN-KIND CONTRIBUTIONS FOR (SEE BAC OF THIS PAGE) ADVERTISING			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 1,916,782.25

