

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.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	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			
		10	20	2020		11	23	2020				
A. Amount Brought Forward From Last Report						\$ 363,379.97						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 14,022.73						
C. Total Funds Available (Sum Of Lines A and B)						\$ 377,402.70						
D. Total Expenditures (From Schedule III)						\$ 55,008.77						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 322,373.93						
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 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
COMMONWEALTH LEADERS FUND	From: <u>10/20/2020</u> To: <u>11/23/2020</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)	\$ 500.00
TOTAL for the Reporting Period (2)	\$ 500.00

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)	\$ 13,500.00
TOTAL for the Reporting Period (3)	\$ 13,500.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 22.73

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.)	\$ 14,022.73
---	--------------

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	\$0.00
Mailing Address						
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>10/20/2020</u> To: <u>11/23/2020</u>

DATE	AMOUNT
-------------	---------------

Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
MATT PINCUS						
Mailing Address 627 WESTBOURNE RD						
City WEST CHESTER	State	Zip Code (Plus 4)	11	2	2020	
	PA	19382				

Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
MATT BROUILLETTE						
Mailing Address 5 PLUM STREET						
City ANNVILLE	State	Zip Code (Plus 4)	11	4	2020	
	PA	17003				

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

PAGE TOTAL
\$ 500.00

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	\$ 0.00	
Mailing Address							
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 COMMONWEALTH LEADERS FUND	Reporting Period From: <u>10/20/2020</u> To: <u>11/23/2020</u>
---	--

				DATE	AMOUNT		
Full Name of Contributor JEFF BARTOS				MO	DAY	YEAR	\$ 2,000.00
Mailing Address 239 WINDING WAY				10	21	2020	
City MERION STATION	State PA	Zip Code (Plus 4) 19066					
Employer Name SELF EMPLOYED				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
1100 GRAMPIAN BLVD # 3			WILLIAMSPORT		PA	17701	
Full Name of Contributor DR. FRANCIS M. POWERS, JR.				MO	DAY	YEAR	\$ 500.00
Mailing Address 15 RED ROCK RD				10	22	2020	
City MOUNTAIN TOP	State PA	Zip Code (Plus 4) 18707					
Employer Name WILLIAMSPORT REGIONAL MEDICAL CENTER				Occupation DOCTOR			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
1100 GRAMPIAN BLVD # 3			WILLIAMSPORT		PA	17701	
Full Name of Contributor CHET & SHARON BEILER				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 911 S OAK ST				10	30	2020	
City MANHEIM	State PA	Zip Code (Plus 4) 17545					
Employer Name AMISH COUNTRY GAZEBOS				Occupation CEO			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
340 HOSTETTER ROADSUITE 2			MANHEIM		PA	17545	
Full Name of Contributor PHIL CLEMENS				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 534 MONTGOMERY AVE				10	28	2020	
City SOUDERTON	State PA	Zip Code (Plus 4) 18964					
Employer Name RETIRED				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

Full Name of Contributor THOMAS KING			MO 10	DAY 30	YEAR 2020	\$ 4,000.00
Mailing Address 456 SHELDON RD						
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 STREET		City BUTLER	State PA	Zip Code (Plus 4) 16001		

Full Name of Contributor MARK SITLER			MO 11	DAY 2	YEAR 2020	\$ 1,000.00
Mailing Address 1410 MCKEAG DR						
City WILLIAMSPORT	State PA	Zip Code (Plus 4) 17701				
Employer Name THE HARTMAN AGENCY			Occupation VP			
Employer Mailing Address/Principal Place of Business 420 WILLIAM STREET		City WILLIAMSPORT	State PA	Zip Code (Plus 4) 17701		

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

PAGE TOTAL
\$ 13,500.00

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>10/20/2020</u> To: <u>11/23/2020</u>
---	--

				DATE		AMOUNT	
Full Name				MO	DAY	YEAR	\$ 22.73
FIRST NATIONAL BANK OF PA							
Mailing Address 110 N 2ND STREET							
City HARRISBURG		State PA	Zip Code (Plus 4) 17102				
Receipt Description							

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

PAGE TOTAL
\$ 22.73

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	
COMMONWEALTH LEADERS FUND		From: <u>10/20/2020</u> To: <u>11/23/2020</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	\$ 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

5/9/2025 8:08:00 AM

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
COMMONWEALTH LEADERS FUND	From <u>10/20/2020</u> To: <u>11/23/2020</u>

				DATE			AMOUNT	
To Whom Paid JDK GROUP				MO	DAY	YEAR	\$ 588.41	
Mailing Address 1 BISHOP PLACE				10	20	2020		
City CAMP HILL		State PA	Zip Code (Plus 4) 17011	Description of Expenditure				
To Whom Paid MIGHTY GROUP, LLC				MO	DAY	YEAR	\$ 5,000.00	
Mailing Address 933 ROSE ST FL 2				10	20	2020		
City HARRISBURG		State PA	Zip Code (Plus 4) 17102	Description of Expenditure POLLING				
To Whom Paid BUILD PA PAC				MO	DAY	YEAR	\$ 5,000.00	
Mailing Address 1861 WILLIAM PENN WAY				10	21	2020		
City LANCASTER		State PA	Zip Code (Plus 4) 17605	Description of Expenditure EVENT SPONSORSHIP				
To Whom Paid TIM DEFOOR FOR AUDITOR GENERAL				MO	DAY	YEAR	\$ 10,000.00	
Mailing Address 1300 ELLIS DRIVE				10	29	2020		
City HARRISBURG		State PA	Zip Code (Plus 4) 17110	Description of Expenditure CAMPAIGN CONTRIBUTION				
To Whom Paid DEBEE CLARK				MO	DAY	YEAR	\$ 2,000.00	
Mailing Address PO BOX 54949				11	2	2020		
City OKLAHOMA CITY		State OK	Zip Code (Plus 4) 73154	Description of Expenditure LEGAL FEES				
To Whom Paid TIM DEFOOR FOR AUDITOR GENERAL				MO	DAY	YEAR	\$ 1,500.00	
Mailing Address 1300 ELLIS DRIVE				11	5	2020		
City HARRISBURG		State PA	Zip Code (Plus 4) 17110	Description of Expenditure CAMPAIGN CONTRIBUTION				

To Whom Paid COMMONWEALTH PARTNERS			MO	DAY	YEAR	\$ 22,554.86
Mailing Address 420 N 3RD STREET			11	5	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			11	6	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure RENT			

To Whom Paid JEREMY BAKER			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 433 PARKVIEW CT			11	6	2020	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure CONSULTING			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 55,008.77

