

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. <input checked="" type="checkbox"/>	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2021	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	2	2021				
									(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		1	1	2021		3	29	2021				
A. Amount Brought Forward From Last Report						\$ 264,141.26						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 16,863.88						
C. Total Funds Available (Sum Of Lines A and B)						\$ 281,005.14						
D. Total Expenditures (From Schedule III)						\$ 117,085.19						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 163,919.95						
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>1/1/2021</u> To: <u>3/29/2021</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)	\$ 740.00
TOTAL for the Reporting Period (2)	\$ 740.00

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)	\$ 16,000.00
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)	\$ 123.88

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.)	\$ 16,863.88
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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 COMMONWEALTH LEADERS FUND	Reporting Period From: <u>1/1/2021</u> To: <u>3/29/2021</u>
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DATE	AMOUNT
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Full Name of Contributor				MO	DAY	YEAR	\$ 240.00
MATT PINCUS							
Mailing Address 627 WESTBOURNE RD							
City	WEST CHESTER	State	Zip Code (Plus 4)	3	11	2021	
		PA	19382				

Full Name of Contributor LORI MORROW				MO	DAY	YEAR	\$ 250.00
Mailing Address 2712 MAIN STREET				3	11	2021	
City PORT TREVERTON	State PA	Zip Code (Plus 4) 17864					

Full Name of Contributor						MO	DAY	YEAR	\$ 250.00	
MARTIN MULDER										
Mailing Address 105 SHETLAND WAY										
City COLLEGEVILLE			State PA		Zip Code (Plus 4) 19426		3	11	2021	

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

PAGE TOTAL
\$ 740.00

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>1/1/2021</u> To: <u>3/29/2021</u>
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				DATE	AMOUNT		
Full Name of Contributor PAUL & NANCY SILVIS				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 600 SILTOP LANE				3	16	2021	
City PORT MATILDA	State PA	Zip Code (Plus 4) 16870					
Employer Name SILCOTEK				Occupation CHEMIST			
Employer Mailing Address/Principal Place of Business 225 PENN TECH DR			City BELLEFONTE		State PA	Zip Code (Plus 4) 16823	
Full Name of Contributor FREDERICK & ARALENE CALLAHAN				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 2830 SKY TOP TRAIL				3	16	2021	
City DOVER	State PA	Zip Code (Plus 4) 17315					
Employer Name COLONY PAPERS				Occupation PRESIDENT & CEO			
Employer Mailing Address/Principal Place of Business 1776 COLONY RD			City YORK		State PA	Zip Code (Plus 4) 17408	
Full Name of Contributor JOHN C OLIVER III				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 720 OLIVER BUILDING				3	1	2021	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15222					
Employer Name RETIRED				Occupation RETIRED			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
Full Name of Contributor ANDY SARDONI III				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 71 S FRANKLIN STREET				1	26	2021	
City WILKES-BARRE	State PA	Zip Code (Plus 4) 18701					
Employer Name ANDREW J SORDONI FOUNDATION				Occupation FOUNDER			
Employer Mailing Address/Principal Place of Business 45 OWEN STREET			City FORTY FORT		State PA	Zip Code (Plus 4) 18704	

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

PAGE TOTAL
\$ 16,000.00

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 COMMONWEALTH LEADERS FUND	Reporting Period From: <u>1/1/2021</u> To: <u>3/29/2021</u>
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				DATE		AMOUNT	
Full Name				MO	DAY	YEAR	\$ 70.52
FIRST NATIONAL BANK OF PA							
Mailing Address 110 N 2ND STREET							
City HARRISBURG		State PA	Zip Code (Plus 4) 17102				
Receipt Description INTEREST EARNED							

Full Name				MO	DAY	YEAR	\$ 53.36
FIRST NATIONAL BANK OF PA							
Mailing Address 110 N 2ND STREET							
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
\$ 123.88

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>1/1/2021</u> To: <u>3/29/2021</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:
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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
COMMONWEALTH LEADERS FUND	From <u>1/1/2021</u> To: <u>3/29/2021</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
DEBEE CLARK				
Mailing Address PO BOX 54949	1	12	2021	\$ 2,000.00
City OKLAHOMA CITY	State OK	Zip Code (Plus 4) 73154	Description of Expenditure LEGAL FEES	
To Whom Paid	MO	DAY	YEAR	
COMMONWEALTH ENTREPRENEURS, LLC				
Mailing Address 420 N 3RD STREET	1	19	2021	\$ 3,365.50
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure RENT	
To Whom Paid	MO	DAY	YEAR	
COMMONWEALTH PARTNERS				
Mailing Address 420 N 3RD STREET	1	19	2021	\$ 1,828.24
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure ADMINISTRATION	
To Whom Paid	MO	DAY	YEAR	
DEBEE CLARK				
Mailing Address PO BOX 54949	2	2	2021	\$ 2,000.00
City OKLAHOMA CITY	State OK	Zip Code (Plus 4) 73154	Description of Expenditure LEGAL FEES	
To Whom Paid	MO	DAY	YEAR	
HRCC				
Mailing Address 500 N 3RD STREET	2	5	2021	\$ 5,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CAMPAIGN CONTRIBUTION	
To Whom Paid	MO	DAY	YEAR	
JUDGE BROBSON FOR SUPREME COURT				
Mailing Address P.O. BOX 11683	2	10	2021	\$ 25,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CAMPAIGN CONTRIBUTION	

To Whom Paid DEBEE CLARK			MO	DAY	YEAR	\$ 2,000.00
Mailing Address PO BOX 54949			3	2	2021	
City OKLAHOMA CITY	State OK	Zip Code (Plus 4) 73154	Description of Expenditure LEGAL FEES			

To Whom Paid COMMONWEALTH ENTREPRENEURS, LLC			MO	DAY	YEAR	\$ 3,365.50
Mailing Address 420 N 3RD STREET			3	9	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure RENT			

To Whom Paid POP PAC			MO	DAY	YEAR	\$ 15,000.00
Mailing Address 115 N JACKSON STREET			3	3	2021	
City MEDIA	State PA	Zip Code (Plus 4) 19063	Description of Expenditure CAMPAIGN CONTRIBUTION			

To Whom Paid MCRC			MO	DAY	YEAR	\$ 10,000.00
Mailing Address 860 PENILYN BLUE BELL PIKE STE 240			3	17	2021	
City BLUE BELL	State PA	Zip Code (Plus 4) 19422	Description of Expenditure CAMPAIGN CONTRIBUTION			

To Whom Paid RCAC			MO	DAY	YEAR	\$ 25,000.00
Mailing Address PO BOX 23156			3	17	2021	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15222	Description of Expenditure CAMPAIGN CONTRIBUTION			

To Whom Paid STRIPE			MO	DAY	YEAR	\$ 167.66
Mailing Address 510 TOWNSEND STREET			3	18	2021	
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 94103	Description of Expenditure CREDIT CARD PROCESSING FEES			

To Whom Paid COMMONWEALTH PARTNERS			MO	DAY	YEAR	\$ 3,173.54
Mailing Address 420 N 3RD STREET			3	18	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure ADMINISTRATION			

To Whom Paid FIRST NATIONAL BANK OF PA			MO	DAY	YEAR	\$ 184.75
Mailing Address 110 N 2ND STREET						
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure BANK FEES			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$ 98,085.19

