Campaign Finance Report

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

Filer Identificati Number :	on 2020	0146				port ed B		CAND	DATE		СОМ	ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		TIM	1 DEF	ORR	FOR AUI	DITOR	GENE	RAL						
Street Address:																	
City:	HARRISBURG							State:	PA			Zip Cod	de: 17	7108			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	/ PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No		/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	/ PRE	= -	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No		/
report type)	ANNUAL REPORT	7. X	Year 2020					NG METH CHECK O				PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candida	te:						DATE C	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
ALIDITAD CENE	-							МО	DAY	YI	AR		AUD	REP		22	
AUDITOR GENE	:RAL							11		3	2020	 	(SEE IN	STRUCTIO	ONS FOR C	ODES)	1
	Receipts and	МО	DAY	YEAR	!			МО	DAY	ΥI	EAR	FC	R OFFI	CE USE	ONLY		
Expenditures	from:		11 24	2	020	T	0	12		31	2020						
A. Amount Bro	ught Forward Fro	m Last R	leport				\$			13,8	325.00						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$			11,9	956.76						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			25,	781.76						
D. Total Expenditures (From Schedule III) \$ 10,								10,0	39.86								
E. Ending Cash Balance (Subtract Line D From Line C							\$			15,7	41.90]					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sc	hedu	le I	Ί)	\$			ϵ	84.76						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)			\$		_		0.00						_
				AFF	ΊD	AVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	ısurer sign h	nere.	If th	his is	a Can	ndidate r	eport, o	candi	date sig	gn here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sch	edule	s file	ed on	paper (or by elect	tronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , tru	ıe
Sworn to and subs	cribed before me thi day of	5	20							S	Signature	of Perso	n Submit	ting Rep	ort		
	Signatu	ire					-					Prin	ted Name	9			
My Commission Ex	cpires ————						_					Ema	il				
	МО	D.	AY	YR					Are	ea Cod	le	Daytin	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized (Comn	nitte	ee, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of i	ny knowl	edge and belie	ef this	poli	itical	commi	ittee has r	not viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	. 1333	3,
Sworn to and subso	ribed before me this day of		20								s	ignature (of Candid	ate			-
							-					Printe	d Name				-
My Commission Exp	Signature						-					Ema	il				-
rry Commission Exp							_										
	МО	D	AY	YR	1				Area	Code		D	aytime T	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

· -				
Name of Filing Committee or Candidate	Reporting	g Period		
TIM DEFORR FOR AUDITOR GENERAL	From:	11/24/202	<u>20</u> To:	12/31/2020
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)			\$	1,750.00
TOTAL for the Reporting) Period	(2)	\$	1,750.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	5,906.76
All Other Contributions (Part D)			\$	4,300.00
TOTAL for the Reporting) Period	(3)	\$	10,206.76
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	11,956.76

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 Candidat	e		Reporting	Period			
		1	From:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address		_				\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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 Can	didate		Repoi	rting Pe	eriod			
TIM DEFORR FOR AUDITOR GEN	ERAL		From	:	11/24/	2020 T o):	12/31/2020
					DATE			AMOUNT
Full Name of Contributor WILLIAM P EGGLESTON				мо	DAY	YEAR		
Mailing Address							\$	200.00
City FACTORYVILLE	State PA	Zip Code (Plus 4 18419)	12	21	2020		
Full Name of Contributor				мо	DAY	YEAR		
DAVIS C HAIRE Mailing Address								200.00
City MESHOPPEN	State PA	Zip Code (Plus 4)	12	21	2020	\$	200.00
Full Name of Contributor PAUL P PANEPINTO	-			мо	DAY	YEAR		
Mailing Address							\$	250.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19151)	12	7	2020		
Full Name of Contributor	.			мо	DAY	YEAR		
RONALD C PANEPINTO								
Mailing Address							\$	250.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19111)	12	7	2020		
Full Name of Contributor				мо	DAY	YEAR		
ERNEST D PREATE, JR.				1-10	DAI	ILAK		
Mailing Address							\$	100.00
City CLARKS SUMMIT	State PA	Zip Code (Plus 4) 18411)	12	21	2020		
Full Name of Contributor ROBERT P SHEILS, III				мо	DAY	YEAR		
Mailing Address							\$	250.00
City CLARKS SUMMIT	State PA	Zip Code (Plus 4)	12	21	2020	, ₄	250.00
Full Name of Contributor		1		мо	DAY	YEAR		
LANCE J STANGE, JR.					-			
Mailing Address City MADISON TOWNSHIP	State	Zip Code (Plus 4)	12	21	2020	\$	250.00
	PA	18444						

	ame of Contributor			МО	DAY	YEAR		
NOCH	IE ZEMA							
Mailin	g Address						\$ 250.0	o
City	HORSEHEAD	State	Zip Code (Plus 4)	12	14	2020		
		NY	14845					

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

PAGE TOTAL
\$ 1,750.00

PART C

Contributions Received From Political Committees

OVER \$250.00

Name of Filing Committee or Candidate

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Reporting Period

TIM D	EFORR FOR AUDITOR GENERAL			From:	11/2	<u>24/2020</u>	То:	12/3	<u>1/2020</u>
					DA	TE		АМС	DUNT
	ame of Contributing Committee ERN PA LABORERS' LPL				мо	DAY	YEAR	\$	2,000.00
Mailin	g Address				12	14	2020		_,000.00
City	WILKES-BARRE	State PA	Zip Code 18701	e (Plus 4)					
		PA	16/01				<u> </u>		
	ame of Contributing Committee LOCAL UNION #81				МО	DAY	YEAR	\$	500.00
Mailin	g Address				12	7	2020		
City	SCRANTON	State		e (Plus 4)					
		PA	18503			<u> </u>	<u> </u>		
	Full Name of Contributing Committee LEADERS ONLY UNITE PAC				мо	DAY	YEAR	\$	1,000.00
Mailing Address				12	1	2020	Ť	1,000.00	
City	SPRINGFIELD	State VA	Zip Code 22152	e (Plus 4)	12	_	2020		
E.II N	ame of Contributing Committee								
	FORWARD LC PAC				МО	DAY	YEAR	<u> </u>	006.76
Mailin	g Address				40	24	2020	\$	906.76
City	SYNON	State	Zip Code	e (Plus 4)	12	21	2020		
		PA	18403						
	ame of Contributing Committee HEAST LEADERSHIP FUND				МО	DAY	YEAR	\$	1,000.00
Mailin	g Address				12	7	2020	7	1,000.00
City	WILKES-BARRE	State	Zip Code	e (Plus 4)	12	/	2020		
		PA	18703						
Full N	ame of Contributing Committee				МО	DAY	YEAR		
	g Address							\$	500.00
							1	I	
City	DUNCANSVILLE	State	Zip Code	e (Plus 4)	12	3	2020		

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

PAGE TOTAL \$ 5,906.76

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				Repo	orting Pe	riod				
TIM DEFORR FOR AUDITOR GENERAL				Fron	n:	11/24/2	<u>020</u> T	0:	12,	/31/2020
					D/	ATE			AMOU	INT
Full Name of Contributor					мо	DAY	YEAR			200.00
JAMES K NASSER					МО	DAI	ILAN	4	•	300.00
Mailing Address					12	21	2020	\Box		
City SCRANTON	State	Zip	Code (Plus	4)	12	21	202	´		
	l _{PA}	185	504							
Employer Name NASSER REAL ESTATE					Occupat	ion	REALT)R		
Employer Mailing Address/Principal Place	e of Business		City			State		Zip	Code (P	lus 4)
			SCRANTO	N		PA		18	504	
Full Name of Contributor		-				DAY	VEAD	Ī		
JOSEPH ROBINSON, JR.					МО	DAY	YEAR	٩	5	1,000.00
Mailing Address					12	15	2020	\Box		
City HARRISBURG	State	Zip	Code (Plus	4)	12	13	202	'		
	_{PA}	17:	110							
Employer Name SELF EMPLOYED					Occupat	ion	AUTHO	R		
Employer Mailing Address/Principal Place	e of Business		City			State		Zip	Code (P	lus 4)
			HARRISBU	JRG		PA		17	110	
Full Name of Contributor					MO DAY YEAR					
DONALD L SHERWOOD					МО	DAY	YEAR	٩	5	1,000.00
Mailing Address					12	21	2020	\Box		
City TUNKHANNOCK	State	Zip	Code (Plus	4)	12	21	2021	'		
	_{PA}	186	657							
Employer Name SHERWOOD CHEVROL	 _ET				Occupat	ion (OWNER	₹		
Employer Mailing Address/Principal Place	e of Business		City			State		Zip	Code (P	lus 4)
			TUNKHAN	NOCK		PA		186	657	
Full Name of Contributor										
CHARLES J VOLPE					МО	DAY	YEAR	4	•	2,000.00
Mailing Address					10	_	202	7		
City CLARKS SUMMIT	State	Zip	Code (Plus	4)	12	7	2020	,		
	 PA	184	411							
Employer Name SELF EMPLOYED					Occupat	ion ,	ATTOR	NEY		
Employer Mailing Address/Principal Place	e of Business		City			State		Zip	Code (P	lus 4)
			CLARKS S	UMMIT		PA		184	411	
Enter Grand Total of Part C on Scheo	dule I, Detailed Su	ımm	ary Page,	Section	on 3.				PAGE	TOTAL

4,300.00

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		Report	ing Peri	od			
			From:			To:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	lus 4)					
Receipt Description	'	.					<u> </u>	
				_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	Section	4.			\$	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 Per	od	
TIM DEFORR FOR AUDITOR GENERAL	From:	<u>11/24/2020</u> To:	12/31/2020
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	684.76
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	684.76

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate				g Period				
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				 		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:		•	•			•		
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate

TIM DEFORR FOR AUDITOR GENERAL

Reporting Period

From: 11/24/2020 To: 12/31/2020

						DATE		AMOUNT
Full Name of Contributor					мо	DAY	YEAR	
CLEARFIELD COUNTY REPUBL	ICAN COMMITTEE			-		2		
Mailing Address					12	7	2020	\$ 684.76
City CLEARFIELD	State		Code(Plus 4)					
	PA		830					
Employer of Contributor				C	Occupa	tion		
Employer Mailing Address/Prin	cipal Place of Business	Cit	!	State	Zip (Code(Plus 4)	Descri	ption of Contribution
							ADS	
Enter Grand Total of Part G	on Schedule II. In-Ki	ind (ntributions Det	tailed				PAGE TOTAL
Summary Page, Section 3.	on Schedule 11, 111 Ki	u \	ici ibaciona bec	tanca				684.76

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
TIM DEFORR FOR AUDITOR GENERAL	From	11/24/2020	То:	<u>12/31/2020</u>

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
ANNA SWENY			МО	DAT	TEAR		
Mailing Address			11	30	2020	\$	3,000.00
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16505	CONSULTING				
To Whom Paid			МО	DAY	YEAR		
IGNITE STRATEGIES			МО	DAT	TEAR		
Mailing Address			12	2	2020	\$	119.72
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17108	REIMBURSEMENT				
To Whom Paid			МО	DAY	YEAR		
DTR CONSULTING			1-10		IZAK		
Mailing Address			12	3	2020	\$	1,000.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	Description of Expenditure			
	PA	17102	PROFESSIONAL SERVICES				
To Whom Paid			МО	DAY	YEAR		
TIM HENNESSEY			1-10		IZAK		
Mailing Address			12	4	2020	\$	200.00
City POTTSTOWN	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	19465	REIMBURSEMENT				
To Whom Paid			МО	DAY	YEAR		
MJM STRATEGIES, LLC			1-10		1 Z / LIK		
Mailing Address			12	7	2020	\$	870.68
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17108	COMMISSION				
To Whom Paid			МО	DAY	YEAR		
POSTMASTER		NO	DAI	ILAK			
Mailing Address			12	10	2020	\$	11.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17108	POSTAGE				

To Whom Paid			мо	DAY	YEAR		
TIM DEFOOR			MO	DAT	ILAK		
Mailing Address			12	21	2020	\$	1,323.36
City HARRSIBURG	ty HARRSIBURG State Zip Code (Plus 4) Description of Expenditu				enditure		
	PA	17110	REIMBURSEMENT				
To Whom Paid			мо	DAY	YEAR		
BARSZ GOWIE AMON &ar	mp; FULTZ		140		ILAK		
Mailing Address			12	28	2020	\$	2,565.00
City MEDIA	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	19063	CONSULTING				
To Whom Paid			мо	DAY	YEAR		
TODD KRICK GRAPHIC DESIGN			140		ILAK		
Mailing Address			12	30	2020	\$	950.10
City PALMYRA	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17078	PRINTING AND POSTAGE				
							PAGE TOTAL
Enter Grand Total of Ex	penditures on Page 1, Rep	oort Cover Page, Item D	•			\$	10,039.86