

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.X	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.	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		
		3	30	2021	TO	5	3	2021			
A. Amount Brought Forward From Last Report				\$		163,919.95					
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		251,038.61					
C. Total Funds Available (Sum Of Lines A and B)				\$		414,958.56					
D. Total Expenditures (From Schedule III)				\$		261,434.66					
E. Ending Cash Balance (Subtract Line D From Line C)				\$		153,523.90					
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>3/30/2021</u> To: <u>5/3/2021</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)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 0.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 250,000.00
All Other Contributions (Part D)	\$ 1,000.00
TOTAL for the Reporting Period (3)	\$ 251,000.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 38.61

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.)	\$ 251,038.61
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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
	From: _____ To: _____

				DATE	AMOUNT	
Full Name of Contributor		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 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>3/30/2021</u> To: <u>5/3/2021</u>
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	DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
COMMONWEALTH CHILDREN'S CHOICE FUND				
Mailing Address 420 N 3RD STREET				\$ 250,000.00
City HARRISBURG	4	27	2021	
State PA				
Zip Code (Plus 4) 17101				

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

PAGE TOTAL
\$ 250,000.00

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>3/30/2021</u> To: <u>5/3/2021</u>
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
JOSEPH WAGMAN					
Mailing Address 975 SUMMIT CIRCLE N	4	13	2021	\$ 1,000.00	
City YORK State PA Zip Code (Plus 4) 17043					
Employer Name WAGMAN CONSTRUCTION	Occupation CHAIRMAN AND CEO				
Employer Mailing Address/Principal Place of Business 231 N GEORGE ST	City YORK		State PA	Zip Code (Plus 4) 17401	

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

PAGE TOTAL
\$ 1,000.00

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>3/30/2021</u> To: <u>5/3/2021</u>
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				DATE	AMOUNT		
Full Name	Mailing Address	City	State	MO	DAY	YEAR	
FIRST NATIONAL BANK OF PA	110 N 2ND STREET	HARRISBURG	PA	3	31	2021	\$ 38.61
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
\$ 38.61

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>3/30/2021</u> To: <u>5/3/2021</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: _____

			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>3/30/2021</u> To: <u>5/3/2021</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
REPUBLICAN COMMITTEE OF ALLEGHENY COUNTY				
Mailing Address PO BOX 23156				\$ 1,500.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15222	Description of Expenditure TABLE AT FUNDRAISER	
To Whom Paid POST OFFICE	MO	DAY	YEAR	
Mailing Address 228 WALNUT STREET	4	5	2021	\$ 2.40
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CAMPAIGN CONTRIBUTION	
To Whom Paid DEBEE CLARK	MO	DAY	YEAR	
Mailing Address PO BOX 54949	4	15	2021	\$ 126.00
City OKLAHOMA CLTGY	State OK	Zip Code (Plus 4) 73154	Description of Expenditure TAX PAYMENT	
To Whom Paid USPS	MO	DAY	YEAR	
Mailing Address 228 WALNUT STREET	4	17	2021	\$ 204.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure PO BOX RENEWAL	
To Whom Paid JDK GROUP	MO	DAY	YEAR	
Mailing Address 1 BISHOP PLACE	4	5	2021	\$ 2,102.26
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure IFOOD FOR FUNDRAISER	

To Whom Paid JUDGE BROBSON FOR SUPREME COURT			MO	DAY	YEAR	
Mailing Address PO BOX 11683			4	21	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CAMPAIGN CONTRIBUTION			
To Whom Paid ATLAS & MIGHT LLC			MO	DAY	YEAR	
Mailing Address 1591 STONEY MOUNTAIN			4	26	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure MEDIA			
To Whom Paid CENTRE CO. REPUBLICAN PARTY			MO	DAY	YEAR	
Mailing Address 1315 S ALLEN STREET			4	26	2021	
City STATE COLLEGE	State PA	Zip Code (Plus 4) 16801	Description of Expenditure CONTRIBUTION			
To Whom Paid JUDGE BROBSON FOR SUPREME COURT			MO	DAY	YEAR	
Mailing Address PO BOX 11683			4	27	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CAMPAIGN CONTRIBUTION			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 261,434.66

