

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		20190183		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> COMMONWEALTH CHILDREN'S CHOICE FUND												
<b>Street Address:</b> 420 N 3RD STREET												
<b>City:</b> HARRISBURG						<b>State:</b> PA			<b>Zip Code:</b> 17101			
<b>TYPE OF REPORT</b>  (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 2021	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>				
						11	2	2021				
<b>Summary of Receipts and Expenditures from:</b>						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
						10	19	2021				<b>TO</b>
						11	22	2021				
<b>A. Amount Brought Forward From Last Report</b>						\$ 10,136,847.90						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 10,006,160.56						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 20,143,008.46						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 35,442.16						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 20,107,566.30						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
COMMONWEALTH CHILDREN'S CHOICE FUND	From: <u>10/19/2021</u> To: <u>11/22/2021</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 10,000,000.00
<b>All Other Contributions (Part D)</b>	\$ 5,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 10,005,000.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 1,160.56

<b>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.)</b>	\$ 10,006,160.56
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

<b>PAGE TOTAL</b>	
\$	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.

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
COMMONWEALTH CHILDREN'S CHOICE FUND	<b>From:</b> <u>10/19/2021</u> <b>To:</b> <u>11/22/2021</u>

				DATE			AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$	10,000,000.00
STUDENT'S FIRST PAC								
Mailing Address								
PO BOX 416				11	19	2021		
City	WYNNEWOOD	State	PA				Zip Code (Plus 4)	19096

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

<b>PAGE TOTAL</b>
\$ 10,000,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  COMMONWEALTH CHILDREN'S CHOICE FUND	<b>Reporting Period</b>  <b>From:</b> <u>10/19/2021</u> <b>To:</b> <u>11/22/2021</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
BRUCE & BONNIE KERN							
Mailing Address 1091 DUTCH RD				11	1	2021	\$ 5,000.00
City FAIRVIEW	State PA	Zip Code (Plus 4) 16415					
Employer Name CURTZE FOODS				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business 1717 E 12TH ST			City ERIE	State PA	Zip Code (Plus 4) 16511		

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

<b>PAGE TOTAL</b>
\$ 5,000.00

## 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.**

<b>Name of Filing Committee or Candidate</b>  COMMONWEALTH CHILDREN'S CHOICE FUND	<b>Reporting Period</b>  <b>From:</b> <u>10/19/2021</u> <b>To:</b> <u>11/22/2021</u>
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				DATE		AMOUNT	
Full Name				MO	DAY	YEAR	\$ 1,160.56
FIRST NATIONAL BANK OF PA				10	30	2021	
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	
\$	1,160.56

## 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
COMMONWEALTH CHILDREN'S CHOICE FUND		From: <u>10/19/2021</u> To: <u>11/22/2021</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 0.00

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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
COMMONWEALTH CHILDREN'S CHOICE FUND	From <u>10/19/2021</u> To: <u>11/22/2021</u>

DATE				AMOUNT		
To Whom Paid COMMONWEALTH PARTNERS CHAMBER OF ENTREPRENEURS			MO	DAY	YEAR	\$ 7,112.61
Mailing Address 420 N 3RD STREET			11	19	2021	
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	19	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure RENT NOVEMBER			
To Whom Paid DEREK ROCKEY			MO	DAY	YEAR	\$ 2,417.01
Mailing Address 2343 N 2ND STREET			10	20	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure CONSULTING			
To Whom Paid 1360, LLC			MO	DAY	YEAR	\$ 1,500.00
Mailing Address 29374 NETWORK PLACE			10	20	2021	
City CHICAGO	State IL	Zip Code (Plus 4) 60673	Description of Expenditure DATA BASE SUBSCRIPTION			
To Whom Paid DEREK ROCKEY			MO	DAY	YEAR	\$ 2,297.04
Mailing Address 2343 N 2ND STREET			11	3	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure CONSULTING			

<b>To Whom Paid</b> MIKE REGAN FOR SENATE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 10,000.00
<b>Mailing Address</b> 405 SPRING HOUSE RD			10	22	2021	
<b>City</b> CAMP HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17011	<b>Description of Expenditure</b> CONTRIBUTION			

  

<b>To Whom Paid</b> DEBEE CLARK PLLC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,000.00
<b>Mailing Address</b> PO BOX 54949			10	29	2021	
<b>City</b> OKLAHOMA CITY	<b>State</b> OK	<b>Zip Code (Plus 4)</b> 73154	<b>Description of Expenditure</b> LEGAL FEES			

  

<b>To Whom Paid</b> I360, LLC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,500.00
<b>Mailing Address</b> 29374 NETWORK PLACE			11	10	2021	
<b>City</b> CHICAGO	<b>State</b> IL	<b>Zip Code (Plus 4)</b> 60673	<b>Description of Expenditure</b> DATA BASE SUNSCRIPTION			

  

<b>To Whom Paid</b> FRIENDS OF DEVLIN ROBINSON			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 5,000.00
<b>Mailing Address</b> 2757 LOCUST DR			11	15	2021	
<b>City</b> PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15241	<b>Description of Expenditure</b> CONTRIBUTION			

  

<b>To Whom Paid</b> FRIENDS OF PARKER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 7715 CRITTENDEN ST SUITE 390			11	16	2021	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19118	<b>Description of Expenditure</b> CONTRIBUTION			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 35,442.16

