### **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 202	10082			Rep File			CA	NDI	DATE		СОМ	AITTEE	<b>V</b>	LOBI	31131	
Name of Filing C	ommittee, Candi	date or L	obbyist:		JUDO	GE E	BROB	SON	FOR	SUPR	EME	COURT					
Street Address:																	
City:	HARRISBURG	3						State	e:	PA			Zip Co	de: 17	7108		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	- 2	2.	30 DA		P	POST-	3.		AMENDN REPORT		Yes	No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	≣- 5	5.	30 DA		P	POST- 6.			TERMINA REPORT		Yes	No	
report type)	ANNUAL REPOR	7. <b>X</b>	<b>Year</b> 2021	_				FILING METHOD ( ) CHECK ONE			PAPER		$\checkmark$	DISKE	TTE		
Name of Office S	ought by Candid	ate:						DAT	ΈO	F ELE	CTIC	ON	District Number	Office Code	Par	ty Code	County Code
JUSTICE OF TH	E SUPREME COL	IRT						МО		DAY	Y	EAR		SPM	REP		22
									11		2	2021		(SEE IN	STRUCTIO	ONS FOR (	CODES)
Summary of Receipts and Expenditures from:  MO DAY YEAR								МО		DAY	Υ	EAR	FC	OR OFFI	CE USE	ONLY	
Expenditures	trom:		11 23	3 2	021	Т	0		12	:	31	2021					
A. Amount Bro	ught Forward Fro	m Last F	Report				\$				23,	906.87					
B. Total Moneta	ary Contributions	And Red	eipts (Fro	n Sche	dule	I)	\$				56,	500.00					
C. Total Funds	Available (Sum C	of Lines A	A and B)				\$				80,	406.87					
D. Total Expend	ditures (From Sc	hedule I	II)				\$				80,	406.87					
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$					0.00					
F. Value Of In-	Kind Contribution	ns Receiv	ed (From S	Schedu	le II	)	\$				4	457.06					
G. Unpaid Debt	s And Obligation	s (From	Schedule I	V)			\$					0.00			1		
							T SE										
PART I - If this is  I swear (or affirm)  correct and comple	that this report, in		_									_		of my kno	wledge	and beli	ef , true
•	cribed before me th	is										Signatur	of Dorso	n Submit	ting Don	ort	
-	day of		_ 20				-					Signature	or Perso	iii Subiiiii	ung Kep	or c	
	Signat	ure					-						Prin	ited Name	•		
My Commission Ex	·						_		•				Ema	il			
	МО		AY	YR							ea Co	de	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	•					•				_							4000
No 320) as amende		-	eage and be	lier this	i politi	icai	comm	ittee r	ias n	ot viola	ted a	ny provis	ions or th	e act or J	une 3,1:	937 (P.L	. 1333,
Sworn to and subsc	day of	•	20									S	ignature	of Candid	ate		
	<u> </u>	_					-						Printe	ed Name			
My Commission Exp	Signature ires												Ema	nil			—
	МО	D	PAY	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		
JUDGE BROBSON FOR SUPREME COURT	From:	11/23/202	<u>1</u> To:	12/31/2021
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)			\$	1,000.00
TOTAL for the Reporting	) Period	(2)	\$	1,000.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	38,000.00
All Other Contributions (Part D)			\$	17,500.00
TOTAL for the Reporting	Period	(3)	\$	55,500.00
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			\$	56,500.00

#### **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	lame of Filing Committee or Candidate		Reporting Period						
		F	rom:		To	I			
		•		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)

Nan	ne of Filing Committee or Candida	te		Rep	orting P	eriod			
JUD	GE BROBSON FOR SUPREME CO	URT		Fro	m:	11/23/	2021 <b>T</b> o	<u>12/31/2021</u>	
						AMOUNT			
Full N	ame of Contributor				мо	DAY	YEAR		
TOM F	PARKER								
Mailin	g Address							\$	250.00
City	BLOOMFIELD HILLS	State	Zip Code (Plus 4	.)	12	21	2021		
		MI	48301						
Full N	ame of Contributor				мо	DAY	YEAR		
BRIAN	I LIETZKE								
Mailin	g Address							\$	250.00
City	WATERFORD TOWNSHIP	State	Zip Code (Plus 4	-)	12	21	2021		
		MI	48329						
Full N	ame of Contributor				мо	DAY	YEAR		
RICK	KLIMASZEWSKI					571.			
Mailin	g Address							\$	250.00
City	FRANKLIN	State	Zip Code (Plus 4	-)	12	21	2021		
		TN	37064						
Full N	ame of Contributor				мо	DAY	YEAR		
TRAVI	S HARRISON				1.10	DA!	ILAK		
Mailin	g Address							\$	250.00
City	CLARE	State	Zip Code (Plus 4	)	12	21	2021		
		MI	48617						

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

**PAGE TOTAL \$** 1,000.00

#### **PART C**

### **Contributions Received From Political Committees**

Name of Filing Committee or Candidate

**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.

**Reporting Period** 

JUDGE	DGE BROBSON FOR SUPREME COURT From:		From:	<u>11/2</u>	23/2021	То:		12/3	<u>1/2021</u>	
					DATE			AMOUNT		
Full N	ame of Contributing Committee				мо	DAY	YEAR			
COMM	ITTEE FOR A BETTER TOMORROW	l							\$	30,000.00
Mailin	g Address				12	21	2021	ł		
City	PHILADELPHIA	State	Zip Cod	e (Plus 4)	1 12	21	2021			
		PA	19109							
Full N	ame of Contributing Committee				МО	DAY	YEAR			
СИМВ	ERLAND COUNTY REPUBLICAN WO	OMEN							\$	1,000.00
Mailin	g Address				12	21	2021			,
City	BOILING SPRINGS	State	Zip Cod	e (Plus 4)						
		PA	17007							
Full N	ame of Contributing Committee				мо	DAY	YEAR			
ORTH	OPAC								\$	2,000.00
Mailin	g Address				12	22	2021			,
City	HARRISBURG	State	Zip Cod	e (Plus 4)	] '-		2021			
		PA	17101							
Full N	ame of Contributing Committee				мо	DAY	YEAR			
PA FU	TURE FUND				""	DAT	ILAK		\$	5,000.00
Mailin	g Address				12	13	2021		•	3,000.00
City	HARRISBURG	State	Zip Cod	e (Plus 4)	12	13	2021			
		PA	17112							
										PAGE TOTAL

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

38,000.00

### 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.

Name of Filing Committee or Candidate

(Exclude contributions from political committees reported in Part C.)

Reporting Period

JUDGE BROBSON FOR SUPREME COUR	Т			From	:	11/23/2	<u>021</u> To	):	12/31/2021	<u>L</u>
					DA	TE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR		2.000	
WILLIAM CARMICHAEL					МО	DAI	ILAK	\$	2,000	.00
Mailing Address					12	20	2021			
City INDIANAPOLIS	State	Zip	Code (Plus 4	)		20	2021			
	IN	46	240							
Employer Name UNDERWRITERS SURE	ETY, INC.				Occupation INSURANCE					
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip (	Code (Plus 4)	
			INDIANAPOI	LIS		IN		462	40	
Full Name of Contributor								Т		
JACOB EGERT				- 1	МО	DAY	YEAR	\$	2,000	.00
Mailing Address					12	20	2021	1		
City MIAMI	State	Zip	Code (Plus 4	)	12	20	2021			
	FL	<sub>33</sub>	180							
Employer Name LEXINGTON NATIONA	L INSURANCE				Occupat	ion	EXECUT	IVE		
					1					
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip (	Code (Plus 4)	
Employer Mailing Address/Principal Plac	e of Business		City LUTHERVILL	.E		<b>State</b> MD		<b>Zip</b> (		
Employer Mailing Address/Principal Place Full Name of Contributor	e of Business		-	.E		MD		_		
	e of Business		-	.E	мо		YEAR	_		.00
Full Name of Contributor	e of Business		-	.E		MD		210	94	.00
Full Name of Contributor RONALD FRANK	e of Business  State	Zip	-		<b>MO</b> 12	MD	<b>YEAR</b> 2021	210	94	.00
Full Name of Contributor RONALD FRANK Mailing Address			LUTHERVILL			MD		210	94	0.00
Full Name of Contributor RONALD FRANK Mailing Address	State MD		LUTHERVILL  Code (Plus 4	)		DAY 20		210	94	0.00
Full Name of Contributor RONALD FRANK Mailing Address City PIKESVILLE	State MD L INSURANCE		LUTHERVILL  Code (Plus 4	)	12	DAY 20	2021	\$	94	0.00
Full Name of Contributor RONALD FRANK Mailing Address City PIKESVILLE Employer Name LEXINGTON NATIONA	State MD L INSURANCE		Code (Plus 4	)	12	DAY 20	2021	\$	2,000 Code (Plus 4)	0.00
Full Name of Contributor RONALD FRANK Mailing Address City PIKESVILLE Employer Name LEXINGTON NATIONA	State MD L INSURANCE		Code (Plus 4	)	12 Occupat	DAY  20  ion (	2021 CEO	210 \$ Zip ( 210	2,000 Code (Plus 4)	
Full Name of Contributor RONALD FRANK Mailing Address City PIKESVILLE Employer Name LEXINGTON NATIONA Employer Mailing Address/Principal Place	State MD L INSURANCE		Code (Plus 4	)	12	DAY 20 ion State	2021	210 \$	2,000 Code (Plus 4)	
Full Name of Contributor RONALD FRANK Mailing Address City PIKESVILLE  Employer Name LEXINGTON NATIONA Employer Mailing Address/Principal Place Full Name of Contributor	State MD L INSURANCE		Code (Plus 4	)	12 Occupat	DAY  20  ion State MD  DAY	2021 CEO YEAR	210 \$  Zip ( 210) \$	2,000 Code (Plus 4)	
Full Name of Contributor RONALD FRANK Mailing Address City PIKESVILLE  Employer Name LEXINGTON NATIONA Employer Mailing Address/Principal Place Full Name of Contributor VAHAN H GUREGHIAN	State MD L INSURANCE	21	Code (Plus 4	.E	12 Occupat	DAY  20  ion (	2021 CEO	210 \$  Zip ( 210) \$	2,000 Code (Plus 4)	
Full Name of Contributor RONALD FRANK Mailing Address City PIKESVILLE  Employer Name LEXINGTON NATIONA Employer Mailing Address/Principal Place Full Name of Contributor VAHAN H GUREGHIAN Mailing Address	State  MD  L INSURANCE  e of Business	21	Code (Plus 4 208 City LUTHERVILL	.E	12 Occupat	DAY  20  ion State MD  DAY	2021 CEO YEAR	210 \$  Zip ( 210) \$	2,000 Code (Plus 4)	
Full Name of Contributor RONALD FRANK Mailing Address City PIKESVILLE  Employer Name LEXINGTON NATIONA Employer Mailing Address/Principal Place Full Name of Contributor VAHAN H GUREGHIAN Mailing Address	State MD L INSURANCE e of Business	21	Code (Plus 4 208  City  LUTHERVILL  Code (Plus 4	) .E	12 Occupat	DAY  20  ion State MD  DAY  17	2021 CEO YEAR	210 \$  Zip ( 210) \$	2,000 Code (Plus 4)	
Full Name of Contributor RONALD FRANK Mailing Address City PIKESVILLE  Employer Name LEXINGTON NATIONA Employer Mailing Address/Principal Place Full Name of Contributor VAHAN H GUREGHIAN Mailing Address City GLADWYNE	State MD L INSURANCE e of Business  State PA	21	Code (Plus 4 208  City  LUTHERVILL  Code (Plus 4	) .E	Occupat  MO  12	DAY  20  ion State MD  DAY  17	2021 CEO YEAR 2021	210 \$  Zip v 210	2,000 Code (Plus 4)	

Full Name of Contributor					DAY	VEAD			
CHARLES KANNEBECKER				МО	DAY	YEAR	<b>\$</b>	5,000.00	
Mailing Address				12	15	2021			
City MILFORD	State	Zi	p Code (Plus 4)	] 12	13	2021			
	l <sub>PA</sub>	1 18	3337						
Employer Name SELF EMPLOY	/ED			Occupat	ion ,	ATTORN	EY		
Employer Mailing Address/Prin	cipal Place of Business		City		State		Zip Code	(Plus 4)	
MILFORD					PA		18337		
Full Name of Contributor				мо	DAY	YEAR			
BRANDON MARQUETTE					DAT	ILAK	\$	2,000.00	
Mailing Address				12	21	2021			
City DOVER	State	Zi	p Code (Plus 4)			2021			
	l <sub>PA</sub>	1 <sub>7</sub>	7315						
Employer Name SELF EMPLOY	/ED			Occupation CONSULTANT					
Employer Mailing Address/Prin	cipal Place of Business		City	State Zip Code (F			(Plus 4)		
			DOVER		PA		17315		
Full Name of Contributor				мо	DAY	YEAR			
PATRICK WOOD				MO	DAT	TEAK	\$	2,000.00	
Mailing Address				12	20	2021			
City RAPID CITY	State	Zi	p Code (Plus 4)	12	20	2021			
	l <sub>SD</sub>	57	7701						
Employer Name SUN SURETY	INSURANCE			Occupat	ion	EXECUT	IVE		
Employer Mailing Address/Principal Place of Business City				State		Zip Code	(Plus 4)		
Employer Hunning Address/11111									

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

**PAGE TOTAL**\$ 17,500.00

### 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:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (I	Plus 4)				
Receipt Description	•	•			•		
Futor Count Total of Boot	Fan Cabadula I Batailad	Commence Dance	Castian	4			PAGE TOTAL
Enter Grand Total of Part	c on schedule 1, Detailed	Summary Page,	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 Period	d						
JUDGE BROBSON FOR SUPREME COURT	From:	<u>11/23/2021</u> <b>To:</b>	12/31/2021					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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)	\$	457.06					
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,		\$	457.06					

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Can	didate		Reporting Period					
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•	•	•	•		·		
					-			
	nter Grand Total of Part F on Schedule II, In-Kind Contributions Det				ge,	PAGE TOTAL		
Section 2.						\$		0.00

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

Name of Filing Committee or Candidate	Reporting Period	
JUDGE BROBSON FOR SUPREME COURT	From: <u>11/23/2021</u> To:	12/31/2021

						DATE		AMOUNT
Full Name of Contributor CLEARFIELD COUNTY REPUBLICA	N COMMITTEE				мо	DAY	YEAR	
Mailing Address			12	9	2021	<b>\$</b> 457.06		
City CLEARFIELD	State		Zip Code(Plus 4)					
	PA		16830					
Employer of Contributor	•				Occupa	tion		
Employer Mailing Address/Principa	l Place of Business	Cit	ty	State	zip (	Code(Plus 4)	<b>Descri</b> ADS	ption of Contribution
nter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed ummary Page, Section 3.								<b>PAGE TOTAL</b> 457.06

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting I	Period				
JUDGE BROBSON FOR SUPREME COURT	From	11/23/2021	То:	12/31/2021		

				DATE				AMOUNT		
To Wh	om Paid			МО	DAY	YEAR				
RICH .	JOHNSON			1-10						
Mailing Address				11	23	2021	\$	80.06		
City WEST CHESTER State Zip Code (Plus 4)				Descrip	tion of Exp	enditure				
		PA	19380	REIMBURSEMENT						
To Wh	om Paid			мо	DAY	YEAR				
TIM C	RAINE			140	DAI	ILAK				
Mailin	g Address			11	26	2021	\$	3,544.90		
City	CARLISLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	17015	CONSU	LTING					
To Wh	om Paid			МО	DAY	YEAR				
PNC B	ANK			140		ILAK				
Mailin	g Address			12	1	2021	\$	309.00		
City CAMP HILL State Zip Code (Plus 4)				Description of Expenditure						
		PA	17011	SERVICE FEE						
To Wh	om Paid			МО	DAY	YEAR				
TIM C	RAINE			МО	DAT	TEAR				
Mailin	g Address			12	1	2021	\$	3,544.90		
City	CARLISLE	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	17015	CONSULTING						
To Wh	om Paid			МО	DAY	YEAR				
DTR C	ONSULTING			МО	DAT	TEAR				
Mailin	g Address			12	2	2021	\$	1,000.00		
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l			
		PA	17102	PROFESSIONAL SERVICES						
To Whom Paid			МО	DAY	YEAR					
KOSTUKOVICH FINANCIAL GROUP, LLC			MO	DAT	TEAR					
Mailing Address			12	2	2021	\$	625.00			
City CAMP HILL State Zip Code (Plus 4)				Descrip	tion of Exp	enditure	l .			
		PA	17011	PROFESSIONAL SERVICES						
,	GWH THEE									

To Wi	nom Paid			МО	DAY	YEAR		
KOSTUKOVICH FINANCIAL GROUP, LLC						ILAK		
Mailing Address				12	8	2021	\$	2,423.30
City	CAMP HILL	State	Zip Code (Plus 4)	Descrip	tion of Exp			
		PA	17011	TAX PAYMENT				
To W	nom Paid				L	VEAD		
PENN	SYLVANIA HISTORICAL AND MUS	EUM COMMISSION		МО	DAY	YEAR		
Mailin	g Address			12	8	2021	\$	2,520.00
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	17120	RENTAL FEE				
To W	nom Paid	•	•					
   WHAT	IF CAFE			МО	DAY	YEAR		
Mailin	g Address			12	8	2021	\$	8,000.00
City	HERSHEY	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	17033	FOOD A	ND BAVER	AGE		
To Wi	nom Paid		<u>'</u>					
   KOST	UKOVICH FINANCIAL GROUP, LL			МО	DAY	YEAR		
	g Address	-		12	10	2021	\$	255.00
City	CAMP HILL	State	Zip Code (Plus 4)	Descript	l tion of Evn	onditure.		
City	CAMP HILL	PA	17011	Description of Expenditure  TAX PAYMENT				
To W					I			
To Whom Paid ANEDOT				МО	DAY	YEAR		
	g Address			12	20	2021	\$	321.20
- Indiiii	y Address	Т		<u> </u>				
City	NEW ORLEANS	State	Zip Code (Plus 4)	Description of Expenditure				
		LA	70112	SERVIC	E FEE			
To Wi	nom Paid			мо	DAY	YEAR		
GK VI	SUAL, LLC							
Mailin	g Address			12	20	2021	\$	1,500.00
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	17102	рнотос	GRAPHY			
To Wi	nom Paid			мо	DAY	YEAR		
ANED	ОТ			MO	DAT	TEAR		
Mailing Address			12	21	2021	\$	121.50	
City	NEW ORLEANS	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		LA	70112	SERVICE FEE				
To Whom Paid				мо	DAY	VEAD		
коѕт	KOSTUKOVICH FINANCIAL GROUP, LLC				DAY	YEAR		
Mailin	Mailing Address				21	2021	\$	125.00
City	City CAMP HILL State Zip Code (Plus 4)				tion of Exp	enditure	<u> </u>	
		PA	17011	PROFESSIONAL SERVICES				
1								

To Whom Paid					DAY	YEAR			
MARIE CONLEY CONSULTING, LLC							_	2 001 24	
Mailing Address				12	21	2021	\$	2,801.34	
City HUMMELSTOWN State Zip Code (Plus 4)				Description of Expenditure					
PA 17036				REIMBU	IRSEMENT				
	nom Paid			мо	DAY	YEAR			
	STRATEGIES, LLC						_	4 000 00	
Mailin	ng Address			12	21	2021	\$	1,000.00	
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp				
		PA	17108	CONSULTING					
To Wi	nom Paid			мо	DAY	YEAR			
WHAT	T IF CAFE								
Mailin	g Address			12	21	2021	\$	12,821.00	
City	HERSHEY	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	17033	FOOD A	ND BEVER	AGE			
To Wi	nom Paid			мо	DAY	YEAR			
DAUP	HIN COUNTY REPUBLICAN	COMMITTEE							
Mailin	g Address			12	22	2021	\$	2,000.00	
City	HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure					
		PA	17110	CONTRIBUTION					
To W	nom Paid			мо	DAY	YEAR			
DTR (	CONSULTING			HO		TEAR			
Mailin	g Address			12	22	2021	\$	1,000.00	
City	HARRISBURG	State	Zip Code (Plus 4)	) Description of Expenditure					
		PA	17102	PROFESSIONAL SERVICES					
To Wi	nom Paid			мо	DAY	YEAR			
RGB F	POLITICS			МО		ILAK			
Mailin	g Address			12	22	2021	\$	30,000.00	
City	CAMP HILL	State	Zip Code (Plus 4)	4) Description of Expenditure					
		PA	17011	CONSULTING					
To Wi	nom Paid			мо	DAY	YEAR			
RGB F	POLITICS			140	DAT	ILAK			
Mailin	g Address			12	22	2021	\$	5,914.67	
City	City CAMP HILL State Zip Code (Plus 4)				l tion of Exp	enditure	<u> </u>		
PA 17011					IRSEMENT				
To Whom Paid				140	DAY	VEAD			
SAVANNAH DAMON				МО	DAY	YEAR			
Mailing Address				12	22	2021	\$	500.00	
City	MANCHESTER	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure			
		PA	17345	CONSULTING					
		•		1					

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Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.		PAGE TOTAL	
		80,406.87	