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				port ed B		CAN	DID	ATE		СОМ	4ITTEE	✓	LOBE	YIST	
Name of Filing C	Name of Filing Committee, Candidate or Lobbyist: JUDGE BRO							SON F	OR S	SUPRI	EME	COURT					
Street Address:	P.O. BOX 11	683															
City:	HARRISBUR(3						State:	F	PA			Zip Cod	de: 1	7108		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA		PC	ST-	3.		AMENDM REPORT		Yes	No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA		PC	ST-	6.		TERMINA REPORT		Yes	No	
report type)	ANNUAL REPORT	7. X	Year 2021					NG MET CHECK					PAPER		\	DISKE	TTE
Name of Office S	- Sought by Candida	ate:			-			DATE	OF	ELEC	СТІС	N	District Number	Office Code	Par	ty Code	County Code
JUSTICE OF TH	E SUPREME COU	RT						МО		DAY	YI	AR		SPM	REP	·	22
									11		2	2021		(SEE IN	ISTRUCTIO	NS FOR C	ODES)
Summary of Expenditures	Receipts and from:	МО	DAY Y	EAR	021	۱.	0	МО	12	DAY	Y I	2021	FC	R OFFI	CE USE	ONLY	
A. Amount Bro	ught Forward Fro				021	•			12			906.87					
	ary Contributions		-	che	dule	e I)	\$					500.00					
C. Total Funds	Available (Sum C	f Lines A	and B)				\$				80,4	106.87					
D. Total Expend	ditures (From Scl	nedule II	I)				\$				80,4	106.87					
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)				\$					0.00					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edul	le II	I)	\$				4	57.06					
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)				\$					0.00			'		
			P	۱FF	ΊD	AVI	T SE	CTIO	N								
PART I - If this is	s a Committee re	ort, trea	surer sign he	re. I	[f th	his is	a Car	ndidate	rep	ort, c	andi	date sig	ın here.				
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached sched	dules	file	ed on	paper	or by ele	ectro	nic me	edium	, are to t	he best o	f my kno	wledge a	and belie	f , true
Sworn to and subs	cribed before me th day of	is	20						-		5	ignature	of Perso	n Submit	ting Rep	ort	
	Signat	ure					-		-				Prin	ted Nam	e		
My Commission Ex	cpires						_		_				Ema	il			
	мо	D	AY	YR						Are	a Coc	le	Daytin	ie Telepl	none Nui	nber	
Part II- If this is	a report of a car	didate's	authorized Co	omn	nitte	ee, C	andid	ate sha	ıll si	ign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	this	poli	itical	comm	ittee ha	s not	t violat	ed an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this day of	3	20						-			S	ignature (of Candid	ate		
							-		-				Printe	ed Name			
My Commission Exp	Signature ires						-		_				Ema	il			—
	мо	D	AY	YR			-		-	Area	Code		D	aytime 1	elephon	e Numbe	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

Name of Filing Commit	tee or Candidate		Re	eporting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing	g Committee			МО	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.

0.00

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 Candid	ate		Rep	orting P	eriod			
JUDGE BROBSON FOR SUPREME CO	OURT		Fror	m:	11/23/	2021 T o):	12/31/2021
					DATE			AMOUNT
Full Name of Contributor TRAVIS HARRISON				МО	DAY	YEAR		
Mailing Address 1125 LAKEVIEW	DR .						\$	250.00
City CLARE	State MI	Zip Code (Plus 4) 48617		12	21	2021		
Full Name of Contributor RICK KLIMASZEWSKI				МО	DAY	YEAR		
Mailing Address 14000 MIDDLETO	N CIR	Zip Code (Plus 4)		12	21	2021	\$	250.00
FRANKLIN	TN	37064						
Full Name of Contributor BRIAN LIETZKE				МО	DAY	YEAR		
Mailing Address 4446 RED OAK B	_VD			12	21	2021	\$	250.00
City WATERFORD TOWNSHIP	State MI	Zip Code (Plus 4) 48329		12	21	2021		
Full Name of Contributor TOM PARKER				МО	DAY	YEAR		
Mailing Address 356 N CLIFTON R	D			12	24	2024	\$	250.00
City BLOOMFIELD HILLS	State MI	Zip Code (Plus 4) 48301		12	21	2021		
	.		'					BACE TOTAL

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

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				
JUDGE BROBSON FOR SUPREME COUR	Г		From:	11/2	3/2021	То:	<u>1</u>	<u>2/31/2021</u>
				DA	TE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
COMMITTEE FOR A BETTER TOMORRO	N							
Mailing Address 123 S BROAD ST S	JITE 2200					2004	\$	30,000.00
City PHILADELPHIA	State	Zip Code	(Plus 4)	12	21	2021		
	PA	19109						
Full Name of Contributing Committee	-	-		мо	DAY	YEAR		
CUMBERLAND COUNTY REPUBLICAN W	OMEN							
Mailing Address 15 MEADOWOOD PL							\$	1,000.00
City BOILING SPRINGS	State	Zip Code	e (Plus 4)	12	21	2021		
BOILING SPRINGS	PA	17007						
Full Name of Contributing Committee					DAY	YEAR		
ORTHOPAC				МО	DAY	YEAR		
Mailing Address 415 MARKET ST SU	ITE 210						\$	2,000.00
City HARRISBURG	State	Zip Code	(Plus 4)	12	22	2021		
	PA	17101						
Full Name of Contributing Committee	•			мо	DAY	YEAR		
PA FUTURE FUND				MO	DAI	ILAK		
Mailing Address P.O. BOX 6128							\$	5,000.00
City HARRISBURG	State	Zip Code	e (Plus 4)	12	13	2021		
	PA	17112						
								PAGE TOTAL
Enter Grand Total of Part C on Sche	dule I, Detailed Sum	nmary Pa	ige, Sectio	n 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.

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

Name of Filing Co	ommittee or Candidate			Rep	orting Pe	riod			
JUDGE BROBSO	N FOR SUPREME COUR	т		Fro	m:	11/23/2	<u>021</u> To	o: <u>1</u>]	2/31/2021
					D	ATE		АМО	UNT
Full Name of Con	tributor					DAY	VEAD		
PATRICK WOOD					МО	DAY	YEAR		
Mailing Address	21 MAIN ST							\$	2,000.00
City RAPID CI	TY	State	Zip Code (P	lus 4)	12	20	2021	-	
		SD	57701						
Employer Name	SUN SURETY INSURA	NCE			Occupat	tion E	XECUT	IVE	
Employer Mailing Business	Address/Principal Plac	e of	City			State		Zip Code (Plus 4)
21 MAIN ST			RAPID	CITY		SD		57701	
Full Name of Con	tributor					DAY	VEAD		
BRANDON MARQ	UETTE				МО	DAY	YEAR		
Mailing Address	2617 VICTORIAN DR							\$	2,000.00
City DOVER		State	Zip Code (F	lus 4)	12	21	2021		
		PA	17315						
Employer Name	SELF EMPLOYED				Occupat	tion	CONSUL	.TANT	
Employer Mailing Business	Address/Principal Plac	e of	City			State		Zip Code (Plus 4)
2617 VICTORIAN	N DR		DOVE	2		PA		17315	
Full Name of Con	tributor						l		
CHARLES KANNE	EBECKER				МО	DAY	YEAR		
Mailing Address	104 W HIGH ST							\$	5,000.00
City MILFORD)	State	Zip Code (F	lus 4)	12	15	2021		
		PA	18337						
Employer Name	SELF EMPLOYED				Occupat	tion A	ATTORN	EY	
Employer Mailing Business	Address/Principal Plac	e of	City			State		Zip Code (Plus 4)
104 W HIGH ST			MILFO	RD		l _{PA}		18337	

Full Name of Con	tributor				мо	DAY	YEAR		
VAHAN H GUREC	GHIAN				MO	DAT	IEAR		
Mailing Address	841 MERION SQUARE	RD						\$	2,500.00
City GLADWY	NE	State	Zi _l	p Code (Plus 4)	12	17	2021		
		PA	19	035					
Employer Name	CSMI, LLC				Occupat	ion C	CEO	•	
Employer Mailing Business	Address/Principal Plac	e of		City		State		Zip Code (F	Plus 4)
	THE STATESSUITE 100	0		CHESTER		PA		19013	
Full Name of Con	tributor								
RONALD FRANK					МО	DAY	YEAR		
Mailing Address	24 WOOD CHESTER O	CT						\$	2,000.00
City PIKESVII	 _LE	State	Zi _l	p Code (Plus 4)	12	20	2021		
		MD	21	.208					
Employer Name	LEXINGTON NATIONA	AL INSURANCE			Occupat	ion	CEO	•	
Employer Mailing Business	Address/Principal Plac	e of		City		State		Zip Code (F	Plus 4)
P.O. BOX 6098				LUTHERVILLE		MD		21094	
Full Name of Con	tributor				мо	DAY	YEAR		
Mailing Address	20165 NE 39TH PLAC	E #404						<u> </u> \$	2,000.00
City MIAMI		State	Zi _l	p Code (Plus 4)	12	20	2021		
City MIAMI		FL	33	3180					
Employer Name	LEXINGTON NATIONA	L INSURANCE			Occupat	ion E	XECUTI	VE	
	Address/Principal Plac	e of		City		State	I	Zip Code (F	Plus 4)
P.O. BOX 6098				LUTHERVILLE		MD		21094	
Full Name of Con					МО	DAY	YEAR		
WILLIAM CARMI								4	
Mailing Address	250 E 96TH ST SUIT	E 202						\$	2,000.00
Mailing		E 202 State IN		p Code (Plus 4)	12	20	2021		2,000.00
Mailing Address		State IN			12 Occupat	ion	2021 NSURAN		2,000.00
Mailing Address City INDIANA Employer Name	POLIS	State IN ETY, INC.				ion			

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	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	-	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z</i>	Section				\$	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 Peri	od	
JUDGE BROBSON FOR SUPREME COURT	From:	<u>11/23/2021</u> To:	12/31/2021
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR	1	
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)	\$	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 Candid	ate		Reporting	g Period			
			From:			То:	
				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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL
						\$	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: <u>12/31/2021</u>

					DATE		AMOUNT
Full Name of Contributor CLEARFIELD COUNTY REPUBLI	CAN COMMITTEE			мо	DAY	YEAR	
Mailing Address P.O. BOX 60	06						\$ 457.06
City CLEARFIELD	State		Zip Code(Plus 4)	12	9	2021	
	PA		16830				
Employer of Contributor				Occupat	tion	•	
Employer Mailing Address/Princ Business	ipal Place of	City	State	Zip 4)	Code(Plus	Descri	ption of Contribution
						ADS	
Enter Grand Total of Part G	on Schedule II.	In-Kind	Contributions Detai	led			PAGE TOTAL
Summary Page, Section 3.							457.06

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reportir	Reporting Period						
JUDGE BROBSON FOR SUPREME COURT			From	11/2	12/31/2021					
			DATE				AMOUNT			
To Whom Paid RICH JOHNSON				DAY	YEAR					
Mailing Address 900 FRANK RD			11	23	2021	\$	80.06			
City WEST CHESTER	State Zip Code (Plus 4) PA 19380				Description of Expenditure REIMBURSEMENT					
To Whom Paid TIM CRAINE			МО	DAY	YEAR					
Mailing Address 5 APPIAN DR			11	26	2021	\$	3,544.90			
City CARLISLE	SLE State Zip Code (Plus 4) PA 17015			Description of Expenditure CONSULTING						
To Whom Paid PNC BANK			мо	DAY	YEAR					
Mailing Address 110 S 32ND ST			12	1	2021	\$	309.00			
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Descrip SERVIC	otion of Exp	penditure					
To Whom Paid TIM CRAINE			мо	DAY	YEAR					
Mailing Address 5 APPIAN DR			12	1	2021	\$	3,544.90			
City CARLISLE State Zip Code (Plus 4) PA 17015			Description of Expenditure CONSULTING							

	PA	17015	CONSULTING				
To Whom Paid DTR CONSULTING			МО	DAY	YEAR		
Mailing Address 210 KELKER ST			12	2	2021	\$	1,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17102	Description of Expenditure PROFESSIONAL SERVICES				

To Whom Paid KOSTUKOVICH FINANCIAL GROUP, LLC	МО	DAY	YEAR			
Mailing Address 3900 TRINDLE RD	12	2	2021	\$		625.00
City CAMP HILL PA Zip Code (Plus 17011	Descri	ption of Exp SSIONAL S				
To Whom Paid KOSTUKOVICH FINANCIAL GROUP, LLC	мо	DAY	YEAR			
Mailing Address 3900 TRINDLE RD	12	8	2021	\$		2,423.30
City CAMP HILL PA Zip Code (Plus 17011	Descri	ption of Exp	penditure			
To Whom Paid PENNSYLVANIA HISTORICAL AND MUSEUM COMMISSION	МО	DAY	YEAR			
Mailing Address 300 NORTH ST	12	8	2021	\$		2,520.00
City HARRISBURG State Zip Code (Plus PA 17120	Descri	Description of Expenditure RENTAL FEE				
To Whom Paid WHAT IF CAFE	мо	DAY	YEAR			
	MO	DAY 8	YEAR 2021	\$		8,000.00
WHAT IF CAFE	12 Descri		2021 penditure			8,000.00
WHAT IF CAFE Mailing Address 845 E CHOCOLATE AVE City HERSHEY State Zip Code (Plus	12 Descri	8 ption of Exp	2021 penditure			8,000.00
WHAT IF CAFE Mailing Address 845 E CHOCOLATE AVE City HERSHEY State PA 17033 To Whom Paid	12 S4) Description FOOD	8 ption of Exp AND BAVE	2021 Denditure RAGE			8,000.00 255.00
Mailing Address 845 E CHOCOLATE AVE City HERSHEY State PA 17033 To Whom Paid KOSTUKOVICH FINANCIAL GROUP, LLC	12 54) Descri FOOD MO 12 54) Descri	8 ption of Exp AND BAVE	2021 cenditure RAGE YEAR 2021	\$		
Mailing Address 845 E CHOCOLATE AVE City HERSHEY State PA 17033 To Whom Paid KOSTUKOVICH FINANCIAL GROUP, LLC Mailing Address 3900 TRINDLE RD City CAMP HILL State Zip Code (Plus	12 54) Descri FOOD MO 12 54) Descri	DAY 10 ption of Exp	2021 cenditure RAGE YEAR 2021	\$		
Mailing Address 845 E CHOCOLATE AVE City HERSHEY To Whom Paid KOSTUKOVICH FINANCIAL GROUP, LLC Mailing Address 3900 TRINDLE RD City CAMP HILL PA To Whom Paid 17011 To Whom Paid	12 S 4) Description MO 12 S 4) Description TAX PA	DAY 10 ption of Expanded and E	2021 cenditure RAGE YEAR 2021 cenditure	\$		

To Whom Paid GK VISUAL, LLC	МО	DAY	YEAR			
Mailing Address 933 ROSE ST	12	20	2021	\$		1,500.00
City HARRISBURG State Zip Code (Plus 4) PA 17102	Descrip	otion of Exp	penditure			
To Whom Paid ANEDOT	МО	DAY	YEAR			
Mailing Address 1340 POYDRAS STREET SUITE 1770	12	21	2021	\$		121.50
City NEW ORLEANS State LA Zip Code (Plus 4) 70112	Descrip SERVIO	otion of Exp CE FEE	penditure			
To Whom Paid KOSTUKOVICH FINANCIAL GROUP, LLC	МО	DAY	YEAR			
Mailing Address 3900 TRINDLE RD	12	21	2021	\$		125.00
City CAMP HILL State Zip Code (Plus 4) PA 17011	Descrip	Description of Expenditure PROFESSIONAL SERVICES				
PA 17011	PROFES	SSIONAL S	ERVICES			
To Whom Paid MARIE CONLEY CONSULTING, LLC	MO	DAY	YEAR			
To Whom Paid				\$		2,801.34
To Whom Paid MARIE CONLEY CONSULTING, LLC	MO 12 Descrip	DAY	YEAR 2021 penditure	\$		2,801.34
To Whom Paid MARIE CONLEY CONSULTING, LLC Mailing Address P.O. BOX 766 City HUMMELSTOWN State Zip Code (Plus 4)	MO 12 Descrip	DAY 21 ption of Exp	YEAR 2021 penditure	\$		2,801.34
To Whom Paid MARIE CONLEY CONSULTING, LLC Mailing Address P.O. BOX 766 City HUMMELSTOWN State Zip Code (Plus 4) PA 17036 To Whom Paid	MO 12 Descrip	DAY 21 Dition of Exp	YEAR 2021 penditure	\$		2,801.34
To Whom Paid MARIE CONLEY CONSULTING, LLC Mailing Address P.O. BOX 766 City HUMMELSTOWN State Zip Code (Plus 4) PA 17036 To Whom Paid MJM STRATEGIES, LLC	MO 12 Description REIMBU MO 12	DAY 21 DAY DAY 21 Dation of Exp	YEAR 2021 Penditure YEAR 2021			
To Whom Paid MARIE CONLEY CONSULTING, LLC Mailing Address P.O. BOX 766 City HUMMELSTOWN State PA 17036 To Whom Paid MJM STRATEGIES, LLC Mailing Address P.O. BOX 624 City HARRISBURG State Zip Code (Plus 4)	MO 12 Descrip REIMBU MO 12 Descrip	DAY 21 DAY DAY 21 Dation of Exp	YEAR 2021 Penditure YEAR 2021			
To Whom Paid MARIE CONLEY CONSULTING, LLC Mailing Address P.O. BOX 766 City HUMMELSTOWN State PA 17036 To Whom Paid MJM STRATEGIES, LLC Mailing Address P.O. BOX 624 City HARRISBURG State PA 17108 To Whom Paid	MO 12 Description MO 12 Description CONSU	DAY 21 DAY DAY 21 DITION OF EXPENDENT	YEAR 2021 Penditure 2021 Penditure			

							PAGE 16		
To Whom Paid DAUPHIN COUNTY REPUBLICA	мо	DAY	YEAR						
Mailing Address 2255 PAXTON CHURCH RD			12	22	2021	\$	2,000.00		
City HARRISBURG	1				escription of Expenditure				
PA 17110				IBUTION					
To Whom Paid DTR CONSULTING	мо	DAY	YEAR						
Mailing Address 210 KELKER ST				22	2021	\$	1,000.00		
City HARRISBURG State Zip Code (Plus 4)				tion of Exp	ı Denditure	l			
	PA	17102	PROFES	SSIONAL S	ERVICES				
To Whom Paid RGB POLITICS			МО	DAY	YEAR				
Mailing Address 3031 LOGAN ST			12	22	2021	\$	30,000.00		
City CAMP HILL State PA Zip Code (Plus 4) 17011			Description of Expenditure CONSULTING						
To Whom Paid RGB POLITICS	·	·	МО	DAY	YEAR				
Mailing Address 3031 LOGAN ST			12	22	2021	\$	5,914.67		
City CAMP HILL	State	Zip Code (Plus 4)	Description of Expenditure						
PA 17011				REIMBURSEMENT					
To Whom Paid SAVANNAH DAMON	·		МО	DAY	YEAR				
Mailing Address 25 FERN DI	R		12	22	2021	\$	500.00		
City MANCHESTER State Zip Code (Plus 4)			Description of Expenditure						
	PA	17345	CONSULTING						
Enter Grand Total of Expend	ditures en Dage 1 Da	mort Cover Page There P					PAGE TOTAL		
Linter Grand Total Of Expend	uitures on Page 1, Re	port cover Page, Item D	•			\$	80,406.87		