Campaign Finance Report

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

Filer Identificat Number :	ion 200)6317			Report Filed B		CANDI	DATE	СОМ	MITTEE	✓	LOBI	BYIST	
	Committee, Candi	idate or L	obbyist:			-	SCOTT C		,					
Street Address: 339 KEPP RD.														
City:	PHILIPSBUR	G					State: PA Zip Code:				de: 16	866		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE-		30 DA PRIM		POST-	3.	AMENDI REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					DAY POST- 6. ECTION				TERMINATION Yes REPORT?			\checkmark
report type)	ANNUAL REPOR	T 7. X	Year 2021				NG METHO		PAPER			\checkmark	DISKE	TTE
Name of Office	Name of Office Sought by Candidate:						DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
							мо	DAY	YEAR					
			11		2 2021		(SEE IN	STRUCTI	ONS FOR (CODES)				
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		11 23	8 2	021 T	0	12	3	1 2021					
A. Amount Bro	ought Forward Fro	om Last R	eport			\$			19,119.69					
B. Total Monet	ary Contribution	s And Rec	eipts (Fron	n Sche	dule I)	\$		9,250.00						
C. Total Funds	Available (Sum (Of Lines A	and B)			\$			28,369.69					
D. Total Expen	ditures (From Sc	hedule II	I)			\$			6,112.20					
E. Ending Cash	Balance (Subtra	ict Line D	From Line	C)		\$	•		22,257.49	4				
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	chedu	le II)	\$			0.00	4				
G. Unpaid Deb	ts And Obligation	ns (From S	Schedule I\	/)		\$			0.00					
				AFF	IDAVI	T SE	CTION							
	s a Committee re		-					• •		-				
I swear (or affirm correct and compl) that this report, in ete.	cluding the	e attached so	hedules	s filed on _l	paper	or by elect	ronic me	dium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me th day of	nis	20			_			Signatur	e of Perso	on Submitt	ing Rep	oort	
	Signat	ture				-				Prir	nted Name	1		
My Commission E	xpires					_				Ema	ail			
	МО	D	AY	YR				Area	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a ca	ndidate's	authorized	l Comn	nittee, Ca	andid	ate shall	sign he	re.					
I swear (or affirm) No 320) as amend) that to the best of ed.	f my knowle	edge and bel	ief this	political	comm	iittee has n	ot violate	ed any provis	sions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subse	cribed before me thi day of	is	20						5	Signature	of Candida	ite		
						-				Printe	ed Name			
My Commission Ex	Signature	e				-				Ema	ail			
,						-								
	мо	D	AY	YR				Area C	Code	D	aytime To	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Reporting Period						
FRIENDS OF SCOTT CONKLIN	From:	<u>11/23/20</u>	2 <u>1</u> To:	<u>12/31/2021</u>				
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor								
TOTAL for the Reporting	J 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)			\$	1,750.00				
All Other Contributions (Part B)	\$	0.00						
TOTAL for the Reporting	\$	1,750.00						
3. Contributions Received Over \$250.00 (From Part C and Part D)								
Contributions Received From Political Committees (Part C)			\$	7,500.00				
All Other Contributions (Part D)			\$	0.00				
TOTAL for the Reporting	J Period	(3)	\$	7,500.00				
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)								
TOTAL for the Reporting	J 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			\$	9,250.00				

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 Candida	te		Re	porting I	Period			
FRIENDS OF SCOTT CONKLIN			Fre	om:	<u>11/23/20</u>) <u>21</u> To	:	<u>12/31/2021</u>
					DATE			AMOUNT
Full Name of Contributing Committee HIGHMARK PAC				мо	DAY	YEAR		
Mailing Address 1800 CENTER ST							\$	250.00
City CAMPHILL	State PA	Zip Code (Plus 17089	4)	5	20	2021		
Full Name of Contributing Committee HIGHMARK PAC					DAY	YEAR		
Mailing Address 1800 CENTER ST	State	Zip Code (Plus 17089	4)	12	2	2021	\$	250.00
Full Name of Contributing Committee PA. MERIDIAN WATER				МО	DAY	YEAR		
Mailing Address 852 WESLEY DR.							\$	250.00
City MECHANICSBURG	State PA	Zip Code (Plus 17055	4)	7	22	2021		
Full Name of Contributing Committee PAA-PAC	•	-		МО	DAY	YEAR		
Mailing Address 1925 N. FRONT S	ST. State PA	Zip Code (Plus	4)	5	11	2021	\$	250.00
Full Name of Contributing Committee ANTHONY CRISCI	•	-		мо	DAY	YEAR		
Mailing Address 21 TAVERN HOUS	SE HILL	Zip Code (Plus	4)	6	7	2021	\$	250.00
MECHANICSBURG	РА	17050						

Full Name of Contributing Committee PA FRATERNAL POLICE			мо	DAY	YEAR	
Mailing Address PO BOX 898						\$ 250.00
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055	6	3	2021	
Full Name of Contributing Commi DUANNE MORRIS LLC	ttee		мо	DAY	YEAR	
Mailing Address 30 SOUTH	14TH STREET					\$ 250.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 16866	12	16	2021	
	•	·	-			

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

PAGE TOTAL 1,750.00

\$

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 Candidat	e		Rep	orting P	eriod			
			From: To:					
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	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			Reporting	Period			
FRIENDS OF SCOTT CONKLIN			From:	<u>11/2</u>	<u>3/2021</u>	То:	<u>12/31/2021</u>
				DA	TE		AMOUNT
Full Name of Contributing Committee APSCUF PAC				мо	DAY	YEAR	
Mailing Address 319 N. FRONT ST.							\$ 500.00
City HARRISBURG	State PA	Zip Code 17101	e (Plus 4)	6	11	2021	
Full Name of Contributing Committee DUANE MORRIS LLP				мо	DAY	YEAR	
Mailing Address 30 SOUTH 17TH STR City PHILADELPHIA	EET State PA	Zip Code 19103	e (Plus 4)	6	22	2021	\$ 500.00
Full Name of Contributing Committee 2999 GROUP				мо	DAY	YEAR	
Mailing Address 2999 STREET RD.	State PA	Zip Code	e (Plus 4)	4	15	2021	\$ 5,000.00
Full Name of Contributing Committee		•		мо	DAY	YEAR	
Mailing Address 212 NORTH THIRD S	TREET SUITE 101 State PA	Zip Code 17101	e (Plus 4)	6	10	2021	\$ 500.00
Full Name of Contributing Committee				мо	DAY	YEAR	
Mailing Address 212 NORTH THIRD S	TREET SUITE 101 State PA	Zip Code	e (Plus 4)	12	15	2021	\$ 500.00

Full Name of Contributing Committee MCNEES PAC				DAY	YEAR		
Mailing Address 100 PINE STREET						\$	500.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	6	3	2021		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							PAGE TOTAL 7,500.00

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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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			Reporting Period						
			From:			To:			
			1	C	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description					1	1			
Entor Crand Tatal of Dart E	on Schodulo I. Dotailed		Continu	4				PAGE TO	AL
Enter Grand Total of Part E	on Schedule I, Detailed	i 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 Perio	od	
FRIENDS OF SCOTT CONKLIN	From:	<u>11/23/2021</u> To:	<u>12/31/2021</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	0.00
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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate			Reporting Period				
				From:				
				DATE		АМС	DUNT	
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	dule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAG	E TOTAL	
Section 2.					4	;	0.00	

PAGE 12

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

Name of Filing Committee or Candidate				Reporting Period							
					Fro	om: To:					
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	ity State Zip Code(Plus 4)										
Employer of Contributor					Occupation						
Employer Mailing Address/Principal Place of City Business				State	Zip Code(Plus 4)			Descri	Description of Contribution		
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In	-Kind	Contributio	ons De	etaile	ed				PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period					
FRIENDS OF SCOTT CONKLIN				<u>11/2</u>	То:	o: <u>12/31/2021</u>			
				DATE			AMOUNT		
To Whom Paid WALMART			мо	DAY	YEAR				
Mailing Address 1665 N. ATHERTON ST.				20	2021	\$	288.32		
City STATE COLLEGE	STATE COLLEGEStateZip Code (Plus 4)PA16803			Description of Expenditure PRIZE DONATION					
To Whom Paid RIVER VIEW			мо	DAY	YEAR				
Mailing Address 2638 WOODGLEN RD.				31	2021	\$	2.00		
City POTTSVILLE	State PA	Descrip SERVIC							
To Whom Paid HOMETOWN SPORTS			мо	DAY	YEAR				
Mailing Address 469 PLUM ST.			8	2	2021	\$	430.00		
City BELLE FONTE	BELLE FONTE State Zip Code (Plus 4) PA 16823				Description of Expenditure ADVERTISING				
To Whom Paid JIM VERBECK (WAGEN WHEEL)			мо	DAY	YEAR				
Mailing Address 491 SLEEPY HOLLON	WRD.		9	8	2021	\$	100.00		
City PHILIPSBURG State Zip Code (Plus 4) PA 16866				Description of Expenditure ADVERTISING					
To Whom Paid RIVERVIEW BANK			мо	DAY	YEAR				
Mailing Address 2638 WOODGLEN R	D		9	30	2021	\$	2.00		
City POTTSVILLE	State PA	Zip Code (Plus 4) 17901		Description of Expenditure SERVICE CHARGE					

To Whom Paid RIVER VIEW	мо	DAY	YEAR					
Mailing Address 2638 WOODGLEN	10	1	2021	\$	2,958.15			
City POTTSVILLE	State	Zip Code (Plus 4)	Descrin	tion of Ex	enditure			
POTISVILLE		NT RECEI						
To Whom Paid CENTRE COUNTY DEM	мо	DAY	YEAR					
Mailing Address 315 S. ALLEN ST.	SUITE 116		10	1	2021	\$	175.73	
City STATE COLLEGE	State	Zip Code (Plus 4)	Descrip	tion of Ex	, Denditure			
	РА	16801		NATION				
To Whom Paid CENTRE COUNTY DEMS	мо	DAY	YEAR					
Mailing Address 315 S. ALLEN ST. SUITE 116				12	2021	\$	10.00	
City STATE COLLEGE	State	Zip Code (Plus 4)	Descrip	escription of Expenditure				
	РА	16801	DONATION					
To Whom Paid FRIENDS OF LAURA SHADLE								
		-	мо	DAY	YEAR			
			мо 2	DAY 18	YEAR 2021	\$	250.00	
FRIENDS OF LAURA SHADLE	State	Zip Code (Plus 4)	2		2021		250.00	
FRIENDS OF LAURA SHADLE Mailing Address PO BOX 1105	State PA	Zip Code (Plus 4) 16804	2	18 ption of Exp	2021		250.00	
FRIENDS OF LAURA SHADLE Mailing Address PO BOX 1105			2 Descrip	18 ption of Exp	2021		250.00	
FRIENDS OF LAURA SHADLE Mailing Address PO BOX 1105 City STATE COLLEGE To Whom Paid			2 Descrip DONAT	18 ption of Exp ION	2021 penditure		250.00	
FRIENDS OF LAURA SHADLE Mailing Address PO BOX 1105 City STATE COLLEGE To Whom Paid KIWANI'S Mailing Address			2 Descrip DONAT MO 2	18 Potion of Exp ION DAY 18	2021 penditure YEAR 2021	\$		
FRIENDS OF LAURA SHADLE Mailing Address PO BOX 1105 City STATE COLLEGE To Whom Paid KIWANI'S Mailing Address	PA	16804	2 Descrip DONAT MO 2	18 Ion of Exp ION DAY 18	2021 penditure YEAR 2021	\$		
FRIENDS OF LAURA SHADLE Mailing Address PO BOX 1105 City STATE COLLEGE To Whom Paid KIWANI'S Mailing Address City City PHILIPSBURG To Whom Paid City	PA	16804 Zip Code (Plus 4)	2 Descrip DONAT MO 2 Descrip	18 Ion of Exp ION DAY 18	2021 penditure YEAR 2021	\$		
FRIENDS OF LAURA SHADLE Mailing Address PO BOX 1105 City STATE COLLEGE To Whom Paid KIWANI'S Mailing Address City PHILIPSBURG To Whom Paid HOMETOWN SPORTS	PA	16804 Zip Code (Plus 4)	2 Descrip DONAT MO 2 Descrip DONAT MO	18 ption of Exp ION DAY 18 ption of Exp ION DAY	2021 penditure YEAR 2021 penditure YEAR	\$		
FRIENDS OF LAURA SHADLE Mailing Address PO BOX 1105 City STATE COLLEGE To Whom Paid KIWANI'S Mailing Address City PHILIPSBURG To Whom Paid HOMETOWN SPORTS Mailing Address 469 PLUM ST.	PA State PA	16804 Zip Code (Plus 4) 16866	2 Descrip DONAT MO 2 Descrip DONAT	18 otion of Exp ION DAY 18 otion of Exp ION	2021 penditure YEAR 2021 penditure	\$		
FRIENDS OF LAURA SHADLE Mailing Address PO BOX 1105 City STATE COLLEGE To Whom Paid KIWANI'S Mailing Address City PHILIPSBURG To Whom Paid HOMETOWN SPORTS	PA	16804 Zip Code (Plus 4)	2 Descrip DONAT MO 2 Descrip DONAT MO 2	18 ption of Exp ION DAY 18 ption of Exp ION DAY 18 ption of Exp 18	2021 Denditure YEAR 2021 Denditure YEAR 2021	\$	100.00	

To Whom Paid								
STURGES SPEAKEASY					DAY	YEAR		
Mailing Address 400 FOSTER ST.					8	2021	\$	536.55
City HARRIS	BURG	State	Zip Code (Plus 4)	Descrip	tion of Ex	, Denditure		
PA 17102					AISER			
To Whom Paid GO DADDY					DAY	YEAR		
Mailing Address 2155 E. GODADDY WAY				6	16	2021	\$	19.17
City TEMPE		State	Zip Code (Plus 4)	Descrip	tion of Ex	, penditure		
		AZ	85284		OSTING			
To Whom Paid RIVERVIEW BANK				мо	DAY	YEAR		
Mailing Address 2638 WOODGLEN RD				6	30	2021	\$	2.00
City POTTS\	/ILLE	State	Zip Code (Plus 4)	Descrip	tion of Ex	, Denditure		
		РА	17901	SERVICE CHARGE				
To Whom Paid RIVERVIEW BANK								
	NK	1	1	мо	DAY	YEAR		
		:D	1	мо 7	DAY 30	YEAR 2021	\$	2.00
RIVERVIEW BA	^s 2638 WOODGLEN R	LD State	Zip Code (Plus 4)	7	30	2021		2.00
RIVERVIEW BA	^s 2638 WOODGLEN R	1	Zip Code (Plus 4) 17901	7 Descrip		2021 penditure		2.00
RIVERVIEW BA	^{\$} 2638 WOODGLEN R /ILLE	State		7 Descrip	30 otion of Exp	2021 penditure		2.00
RIVERVIEW BA	⁵ 2638 WOODGLEN R /ILLE TY DEMS	State PA		7 Descrip SERVIC	30 Detion of Exp CE CHARGE	2021 penditure		2.00
RIVERVIEW BA	 2638 WOODGLEN R /ILLE TY DEMS 	State PA		7 Descrip SERVIC MO 8	30 btion of Exp CE CHARGE DAY	2021 penditure YEAR 2021	\$	
RIVERVIEW BA	 2638 WOODGLEN R /ILLE TY DEMS 315 S. ALLEN ST. S 	State PA UITE 116	17901	7 Descrip SERVIC MO 8	30 btion of Exp CE CHARGE DAY 9 ption of Exp	2021 penditure YEAR 2021	\$	
RIVERVIEW BA	 ⁵ 2638 WOODGLEN R /ILLE TY DEMS ⁵ 315 S. ALLEN ST. S COLLEGE 	State PA UITE 116 State	17901 Zip Code (Plus 4)	7 Descrip SERVIC MO 8 Descrip	30 btion of Exp CE CHARGE DAY 9 ption of Exp	2021 penditure YEAR 2021	\$	
RIVERVIEW BA Mailing Address City POTTSV To Whom Paid CENTRE COUNT Mailing Address City STATE	 ⁵ 2638 WOODGLEN R /ILLE TY DEMS ⁵ 315 S. ALLEN ST. S COLLEGE PORTS 	State PA UITE 116 State	17901 Zip Code (Plus 4)	7 Descrip SERVIC MO 8 Descrip DINNE	30 DAY DAY 9 DAY 9 DAY	2021 penditure YEAR 2021 penditure	\$	
RIVERVIEW BA	 ⁵ 2638 WOODGLEN R /ILLE TY DEMS ⁵ 315 S. ALLEN ST. S COLLEGE PORTS ⁵ 469 PLUM ST. 	State PA UITE 116 State	17901 Zip Code (Plus 4)	7 Descrip SERVIC MO 8 Descrip DINNER MO	30 Detion of Exp CE CHARGE DAY 9 Ption of Exp AD DAY	2021 Denditure YEAR 2021 Denditure YEAR 2021	\$	155.08

To Whom Paid RIVERVIEW BANK	мо	DAY	YEAR			
Mailing Address 2638 WOODGLEN RD	10	29	2021	\$		2.0
		tion of Exp E CHARGE		1		
To Whom Paid WALMART	мо	DAY	YEAR			
Mailing Address 1665 N. ATHERTON ST.	10	25	2021	\$		168.5
	Description of Expenditure PRIZE/DONATION					
To Whom Paid RIVERVIEW BANK	мо	DAY	YEAR			
	11 30 2021					2.0
Mailing Address 2638 WOODGLEN RD	11	30	2021	\$		2.0
City POTTSVILLE State Zip Code (Plus 4)	Descrip	30 tion of Exp E CHARGE	oenditure			
City POTTSVILLE State Zip Code (Plus 4) PA 17901 S	Descrip	tion of Exp	oenditure			
City POTTSVILLE State Zip Code (Plus 4) PA 17901 5	Descrip SERVIC	tion of Exp E CHARGE	penditure			2.1
City POTTSVILLE State Zip Code (Plus 4) PA 17901 S To Whom Paid CENTRE COUNTY DEMS Image: Comparison of the state Mailing Address 315 S. ALLEN ST. SUITE 116 City STATE COLLEGE	Descrip SERVIC MO 11 Descrip	tion of Exp E CHARGE DAY	YEAR 2021	\$		
City POTTSVILLE State Zip Code (Plus 4) PA 17901 17901 To Whom Paid CENTRE COUNTY DEMS Image: Centre County demonstrates of the centre cent	Descrip SERVIC MO 11 Descrip SERVIC	tion of Exp E CHARGE DAY 9 tion of Exp	YEAR 2021	\$		
City POTTSVILLE State Zip Code (Plus 4) PA 17901 5 To Whom Paid CENTRE COUNTY DEMS Image: Centre County demonstrates of the centre c	Descrip SERVIC MO 11 Descrip SERVIC	tion of Exp E CHARGE DAY 9 tion of Exp E CHARGE	YEAR 2021 20enditure	\$		
City POTTSVILLE State Zip Code (Plus 4) PA PA 17901 State	MO Descrip SERVIC 11 Descrip SERVIC MO 12 Descrip	tion of Exp E CHARGE DAY 9 tion of Exp E CHARGE DAY	YEAR 2021 Denditure YEAR 2021 YEAR 2021	\$		2.1
City POTTSVILLE State Zip Code (Plus 4) I PA 17901 17901 17901 17901 17901 17901 17901 11000 To Whom Paid CENTRE COUNTY DEMS Image: County dems 1000 Image: County	MO Descrip SERVIC 11 Descrip SERVIC MO 12 Descrip	tion of Exp E CHARGE DAY 9 tion of Exp E CHARGE DAY 9 tion of Exp	YEAR 2021 Denditure YEAR 2021 YEAR 2021	\$		2.1
City POTTSVILLE State Zip Code (Plus 4) PA	Descrip SERVIC MO 11 Descrip SERVIC 12 Descrip SERVIC	tion of Exp E CHARGE DAY 9 tion of Exp E CHARGE DAY 9 tion of Exp E CHARGE	YEAR 2021 Denditure YEAR 2021 YEAR 2021 Denditure	\$		2.1
City POTTSVILLE State Zip Code (Plus 4) 17901 1790	Descrip SERVIC MO 11 Descrip SERVIC MO 12 Descrip SERVIC	tion of Exp E CHARGE DAY 9 tion of Exp E CHARGE DAY 9 tion of Exp E CHARGE DAY 31 tion of Exp	YEAR 2021 Denditure 2021 YEAR 2021 Denditure YEAR 2021	\$		0.5

To Whom Paid DECO GRAB & GO			мо	DAY	YEAR		
Mailing Address 240 N. 3RD ST. SL	12	16	2021	\$	209.00		
City HARRISBURG	Description of Expenditure FUNDRAISER						
To Whom Paid RIVERVIEW BANK			мо	DAY	YEAR		
Mailing Address 2638 WOODGLEN RD				31	2021	\$	2.00
City POTTSVILLE	State PA	Zip Code (Plus 4) 17901	Descrip	tion of Exp	penditure	1	
Enter Grand Total of Expenditures	on Page 1 Pe						PAGE TOTAL
	on Fage 1, Re	sport cover Page, Item D	•			\$	6,112.20