

# 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 :   |                          | 2006317 |                         | Report Filed By :           |                      | CANDIDATE        |                     | COMMITTEE |                     | ✓               |            | LOBBYIST    |  |
| Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF SCOTT CONKLIN |                          |         |                         |                             |                      |                  |                     |           |                     |                 |            |             |  |
| Street Address: 339 KEPP RD.  |                          |         |                         |                             |                      |                  |                     |           |                     |                 |            |             |  |
| City: PHILIPSBURG   |                          |         |                         |                             |                      | State: PA        |                     |           |                     | Zip Code: 16866 |            |             |  |
| TYPE OF REPORT<br><br>(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                  | ✓               |            |             |  |
|   | 6TH TUESDAY PRE-ELECTION | 4.      | 2ND FRIDAY PRE-ELECTION | 5.                          | 30 DAY POST-ELECTION | 6.               | TERMINATION REPORT? | Yes       | No                  | ✓               |            |             |  |
|   | ANNUAL REPORT            | 7. X    | Year 2021               | FILING METHOD ( ) CHECK ONE |                      |                  | PAPER               | ✓         | DISKETTE            |                 |            |             |  |
| Name of Office Sought by Candidate:                                       |                          |         |                         |                             |                      | DATE OF ELECTION |                     |           | District Number     | Office Code     | Party Code | County Code |  |
|   |                          |         |                         |                             |                      | MO               | DAY                 | YEAR      |                     |                 |            |             |  |
|   |                          |         |                         |                             |                      | 11               | 2                   | 2021      |                     |                 |            |             |  |
| Summary of Receipts and Expenditures from:                                |                          |         |                         |                             |                      | MO               | DAY                 | YEAR      | FOR OFFICE USE ONLY |                 |            |             |  |
|   |                          |         |                         |                             |                      | 11               | 23                  | 2021      |                     |                 |            |             |  |
|   |                          |         |                         |                             |                      | 12               | 31                  | 2021      |                     |                 |            |             |  |
| A. Amount Brought Forward From Last Report                                |                          |         |                         |                             |                      | \$ 19,119.69     |                     |           |                     |                 |            |             |  |
| B. Total Monetary Contributions And Receipts (From Schedule I)            |                          |         |                         |                             |                      | \$ 9,250.00      |                     |           |                     |                 |            |             |  |
| C. Total Funds Available (Sum Of Lines A and B)                           |                          |         |                         |                             |                      | \$ 28,369.69     |                     |           |                     |                 |            |             |  |
| D. Total Expenditures (From Schedule III)                                 |                          |         |                         |                             |                      | \$ 6,112.20      |                     |           |                     |                 |            |             |  |
| E. Ending Cash Balance (Subtract Line D From Line C)                      |                          |         |                         |                             |                      | \$ 22,257.49     |                     |           |                     |                 |            |             |  |
| 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 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>                       |
| FRIENDS OF SCOTT CONKLIN                     | From: <u>11/23/2021</u> To: <u>12/31/2021</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>                 | \$ 1,750.00 |
| <b>All Other Contributions (Part B)</b>  | \$ 0.00     |
| <b>TOTAL for the Reporting Period (2)</b>  | \$ 1,750.00 |

|   |             |
|---|-------------|
| <b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b> |             |
| <b>Contributions Received From Political Committees (Part C)</b>        | \$ 7,500.00 |
| <b>All Other Contributions (Part D)</b>                                 | \$ 0.00     |
| <b>TOTAL for the Reporting Period (3)</b>                               | \$ 7,500.00 |

|  |         |
|--|---------|
| <b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b> |         |
| <b>TOTAL for the Reporting Period (4)</b>  | \$ 0.00 |

|   |             |
|---|-------------|
| <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> | \$ 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.**

|  |  |  |  |   |  |               |  |
|--|--|--|--|---|--|---------------|--|
| <b>Name of Filing Committee or Candidate</b> |  |  |  | <b>Reporting Period</b>                       |  |               |  |
| FRIENDS OF SCOTT CONKLIN                     |  |  |  | From: <u>11/23/2021</u> To: <u>12/31/2021</u> |  |               |  |
|  |  |  |  | <b>DATE</b>                                   |  | <b>AMOUNT</b> |  |

  

|  |                 |                          |           |            |             |           |
|--|-----------------|--------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributing Committee</b> |                 |                          | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 250.00 |
| HIGHMARK PAC                               |                 |                          | 5         | 20         | 2021        |           |
| <b>Mailing Address</b>                     | 1800 CENTER ST. |                          |           |            |             |           |
| <b>City</b>                                | <b>State</b>    | <b>Zip Code (Plus 4)</b> |           |            |             |           |
| CAMPHILL                                   | PA              | 17089                    |           |            |             |           |

  

|  |              |                          |           |            |             |           |
|--|--------------|--------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributing Committee</b> |              |                          | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 250.00 |
| HIGHMARK PAC                               |              |                          | 12        | 2          | 2021        |           |
| <b>Mailing Address</b>                     |              |                          |           |            |             |           |
| 1800 CENTER ST.                            |              |                          |           |            |             |           |
| <b>City</b>                                | <b>State</b> | <b>Zip Code (Plus 4)</b> |           |            |             |           |
| CAMPHILL                                   | PA           | 17089                    |           |            |             |           |

  

|  |              |                          |           |            |             |           |
|--|--------------|--------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributing Committee</b> |              |                          | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 250.00 |
| PA. MERIDIAN WATER                         |              |                          | 7         | 22         | 2021        |           |
| <b>Mailing Address</b>                     |              |                          |           |            |             |           |
| 852 WESLEY DR.                             |              |                          |           |            |             |           |
| <b>City</b>                                | <b>State</b> | <b>Zip Code (Plus 4)</b> |           |            |             |           |
| MECHANICSBURG                              | PA           | 17055                    |           |            |             |           |

  

|  |              |                          |           |            |             |           |
|--|--------------|--------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributing Committee</b> |              |                          | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 250.00 |
| PAA-PAC                                    |              |                          | 5         | 11         | 2021        |           |
| <b>Mailing Address</b>                     |              |                          |           |            |             |           |
| 1925 N. FRONT ST.                          |              |                          |           |            |             |           |
| <b>City</b>                                | <b>State</b> | <b>Zip Code (Plus 4)</b> |           |            |             |           |
| HARRISBURG                                 | PA           | 17105                    |           |            |             |           |

  

|  |              |                          |           |            |             |           |
|--|--------------|--------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributing Committee</b> |              |                          | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 250.00 |
| ANTHONY CRISCI                             |              |                          | 6         | 7          | 2021        |           |
| <b>Mailing Address</b>                     |              |                          |           |            |             |           |
| 21 TAVERN HOUSE HILL                       |              |                          |           |            |             |           |
| <b>City</b>                                | <b>State</b> | <b>Zip Code (Plus 4)</b> |           |            |             |           |
| MECHANICSBURG                              | PA           | 17050                    |           |            |             |           |

| Full Name of Contributing Committee |       |                   |  | MO | DAY | YEAR | \$ 250.00 |
|-------------------------------------|-------|-------------------|--|----|-----|------|-----------|
| PA FRATERNAL POLICE                 |       |                   |  |    |     |      |           |
| Mailing Address                     |       |                   |  | 6  | 3   | 2021 |           |
| PO BOX 898                          |       |                   |  |    |     |      |           |
| City                                | State | Zip Code (Plus 4) |  |    |     |      |           |
| MECHANICSBURG                       | PA    | 17055             |  |    |     |      |           |

| Full Name of Contributing Committee |              |       |                   | MO | DAY | YEAR | \$ 250.00 |
|-------------------------------------|--------------|-------|-------------------|----|-----|------|-----------|
| DUANNE MORRIS LLC                   |              |       |                   |    |     |      |           |
| Mailing Address                     |              |       |                   | 12 | 16  | 2021 |           |
| 30 SOUTH 14TH STREET                |              |       |                   |    |     |      |           |
| City                                | PHILADELPHIA | State | Zip Code (Plus 4) |    |     |      |           |
|                                     |              | PA    | 16866             |    |     |      |           |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 1,750.00       |



# 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><br><br>FRIENDS OF SCOTT CONKLIN | <b>Reporting Period</b><br><br><b>From:</b> <u>11/23/2021</u> <b>To:</b> <u>12/31/2021</u> |
|--|--|

|   |          |                         |  | DATE |     | AMOUNT |             |
|---|----------|-------------------------|--|------|-----|--------|-------------|
| Full Name of Contributing Committee<br>APSCUF PAC       |          |                         |  | MO   | DAY | YEAR   | \$ 500.00   |
| Mailing Address 319 N. FRONT ST.                        |          |                         |  | 6    | 11  | 2021   |             |
| City HARRISBURG   | State PA | Zip Code (Plus 4) 17101 |  |      |     |        |             |
| Full Name of Contributing Committee<br>DUANE MORRIS LLP |          |                         |  | MO   | DAY | YEAR   | \$ 500.00   |
| Mailing Address 30 SOUTH 17TH STREET                    |          |                         |  | 6    | 22  | 2021   |             |
| City PHILADELPHIA                                       | State PA | Zip Code (Plus 4) 19103 |  |      |     |        |             |
| Full Name of Contributing Committee<br>2999 GROUP       |          |                         |  | MO   | DAY | YEAR   | \$ 5,000.00 |
| Mailing Address 2999 STREET RD.                         |          |                         |  | 4    | 15  | 2021   |             |
| City BENSALEM   | State PA | Zip Code (Plus 4) 19020 |  |      |     |        |             |
| Full Name of Contributing Committee<br>LAW PAC          |          |                         |  | MO   | DAY | YEAR   | \$ 500.00   |
| Mailing Address 212 NORTH THIRD STREET SUITE 101        |          |                         |  | 6    | 10  | 2021   |             |
| City HARRISBURG   | State PA | Zip Code (Plus 4) 17101 |  |      |     |        |             |
| Full Name of Contributing Committee<br>LAW PAC          |          |                         |  | MO   | DAY | YEAR   | \$ 500.00   |
| Mailing Address 212 NORTH THIRD STREET SUITE 101        |          |                         |  | 12   | 15  | 2021   |             |
| City HARRISBURG   | State PA | Zip Code (Plus 4) 17101 |  |      |     |        |             |

| Full Name of Contributing Committee |            |                   | MO | DAY | YEAR | \$500.00 |
|-------------------------------------|------------|-------------------|----|-----|------|----------|
| MCNEES PAC                          |            |                   |    |     |      |          |
| Mailing Address                     |            |                   | 6  | 3   | 2021 |          |
| 100 PINE STREET                     |            |                   |    |     |      |          |
| City                                | HARRISBURG | State             |    |     |      |          |
|                                     |            | PA                |    |     |      |          |
|                                     |            | Zip Code (Plus 4) |    |     |      |          |
|                                     |            | 17108             |    |     |      |          |

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: <span style="float: right;">To:</span> |

|  |       |                   | DATE       |                   |      | AMOUNT  |
|--|-------|-------------------|------------|-------------------|------|---------|
| Full Name of Contributor                             |       |                   | MO         | DAY               | YEAR | \$ 0.00 |
| Mailing Address                                      |       |                   |            |                   |      |         |
| City   | State | Zip Code (Plus 4) |            |                   |      |         |
| Employer Name  |       |                   | Occupation |                   |      |         |
| Employer Mailing Address/Principal Place of Business |       | City              | State      | Zip Code (Plus 4) |      |         |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 0.00           |



## 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> | <b>Reporting Period</b><br><br><b>From:</b> _____ <b>To:</b> _____ |
|--|--|

|                     |       |                   | DATE |     |      | AMOUNT  |  |
|---------------------|-------|-------------------|------|-----|------|---------|--|
| Full Name           |       |                   | MO   | DAY | YEAR | \$ 0.00 |  |
| Mailing Address     |       |                   |      |     |      |         |  |
| City                | State | Zip Code (Plus 4) |      |     |      |         |  |
| Receipt Description |       |                   |      |     |      |         |  |

**Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.**

|                   |      |
|-------------------|------|
| <b>PAGE TOTAL</b> |      |
| \$                | 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**

|  |  |   |      |
|--|--|---|------|
| <b>Name of Filing Committee or Candidate</b>   |  | <b>Reporting Period</b>                       |      |
| FRIENDS OF SCOTT CONKLIN   |  | From: <u>11/23/2021</u> To: <u>12/31/2021</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<br><br>From: <span style="float: right;">To:</span> |
|---------------------------------------|--|

|   |       |                   | 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><br><br>\$ 0.00 |

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

|                                       |                  |
|---------------------------------------|------------------|
| 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) |       |                  |     |                             |         |
| 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<br>0.00          |         |

# SCHEDULE III STATEMENT OF EXPENDITURES

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                      |
| FRIENDS OF SCOTT CONKLIN                     | From <u>11/23/2021</u> To: <u>12/31/2021</u> |

| DATE   |                 |                                |   | AMOUNT    |
|--|-----------------|--------------------------------|---|-----------|
| <b>To Whom Paid</b><br>WALMART                   | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |           |
| <b>Mailing Address</b> 1665 N. ATHERTON ST.      | 8               | 20                             | 2021  | \$ 288.32 |
| <b>City</b> STATE COLLEGE                        | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 16803 | <b>Description of Expenditure</b><br>PRIZE DONATION |           |
| <b>To Whom Paid</b><br>RIVER VIEW                | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |           |
| <b>Mailing Address</b> 2638 WOODGLEN RD.         | 8               | 31                             | 2021  | \$ 2.00   |
| <b>City</b> POTTSVILLE                           | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 17901 | <b>Description of Expenditure</b><br>SERVICE CHARGE |           |
| <b>To Whom Paid</b><br>HOMETOWN SPORTS           | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |           |
| <b>Mailing Address</b> 469 PLUM ST.              | 8               | 2                              | 2021  | \$ 430.00 |
| <b>City</b> BELLE FONTE                          | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 16823 | <b>Description of Expenditure</b><br>ADVERTISING    |           |
| <b>To Whom Paid</b><br>JIM VERBECK (WAGEN WHEEL) | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |           |
| <b>Mailing Address</b> 491 SLEEPY HOLLOW RD.     | 9               | 8                              | 2021  | \$ 100.00 |
| <b>City</b> PHILIPSBURG                          | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 16866 | <b>Description of Expenditure</b><br>ADVERTISING    |           |
| <b>To Whom Paid</b><br>RIVERVIEW BANK            | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |           |
| <b>Mailing Address</b> 2638 WOODGLEN RD          | 9               | 30                             | 2021  | \$ 2.00   |
| <b>City</b> POTTSVILLE                           | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 17901 | <b>Description of Expenditure</b><br>SERVICE CHARGE |           |

|                                  |          |                         |  |     |      |             |
|----------------------------------|----------|-------------------------|--|-----|------|-------------|
| To Whom Paid<br>RIVER VIEW       |          |                         | MO   | DAY | YEAR | \$ 2,958.15 |
| Mailing Address 2638 WOODGLEN RD |          |                         | 10   | 1   | 2021 |             |
| City POTTSVILLE                  | State PA | Zip Code (Plus 4) 17901 | Description of Expenditure<br>ACCOUNT RECEIVABLE |     |      |             |

|  |          |                         |   |     |      |           |
|--|----------|-------------------------|---|-----|------|-----------|
| To Whom Paid<br>CENTRE COUNTY DEM          |          |                         | MO  | DAY | YEAR | \$ 175.73 |
| Mailing Address 315 S. ALLEN ST. SUITE 116 |          |                         | 10  | 1   | 2021 |           |
| City STATE COLLEGE                         | State PA | Zip Code (Plus 4) 16801 | Description of Expenditure<br>AD/DONATION |     |      |           |

|  |          |                         |  |     |      |          |
|--|----------|-------------------------|--|-----|------|----------|
| To Whom Paid<br>CENTRE COUNTY DEMS         |          |                         | MO                                     | DAY | YEAR | \$ 10.00 |
| Mailing Address 315 S. ALLEN ST. SUITE 116 |          |                         | 10                                     | 12  | 2021 |          |
| City STATE COLLEGE                         | State PA | Zip Code (Plus 4) 16801 | Description of Expenditure<br>DONATION |     |      |          |

|   |          |                         |  |     |      |           |
|---|----------|-------------------------|--|-----|------|-----------|
| To Whom Paid<br>FRIENDS OF LAURA SHADLE |          |                         | MO                                     | DAY | YEAR | \$ 250.00 |
| Mailing Address PO BOX 1105             |          |                         | 2                                      | 18  | 2021 |           |
| City STATE COLLEGE                      | State PA | Zip Code (Plus 4) 16804 | Description of Expenditure<br>DONATION |     |      |           |

|                          |          |                         |  |     |      |           |
|--------------------------|----------|-------------------------|--|-----|------|-----------|
| To Whom Paid<br>KIWANI'S |          |                         | MO                                     | DAY | YEAR | \$ 100.00 |
| Mailing Address          |          |                         | 2                                      | 18  | 2021 |           |
| City PHILIPSBURG         | State PA | Zip Code (Plus 4) 16866 | Description of Expenditure<br>DONATION |     |      |           |

|                                 |          |                         |   |     |      |           |
|---------------------------------|----------|-------------------------|---|-----|------|-----------|
| To Whom Paid<br>HOMETOWN SPORTS |          |                         | MO  | DAY | YEAR | \$ 215.00 |
| Mailing Address 469 PLUM ST.    |          |                         | 2   | 18  | 2021 |           |
| City BELLEFONTE                 | State PA | Zip Code (Plus 4) 16823 | Description of Expenditure<br>ADVERTISING |     |      |           |

|  |             |                            |  |     |      |           |
|--|-------------|----------------------------|--|-----|------|-----------|
| To Whom Paid<br>STURGES SPEAKEASY          |             |                            | MO   | DAY | YEAR | \$ 536.55 |
| Mailing Address 400 FOSTER ST.             |             |                            | 6  | 8   | 2021 |           |
| City HARRISBURG                            | State<br>PA | Zip Code (Plus 4)<br>17102 | Description of Expenditure<br>FUNDRAISER     |     |      |           |
| To Whom Paid<br>GO DADDY                   |             |                            | MO   | DAY | YEAR | \$ 19.17  |
| Mailing Address 2155 E. GODADDY WAY        |             |                            | 6  | 16  | 2021 |           |
| City TEMPE                                 | State<br>AZ | Zip Code (Plus 4)<br>85284 | Description of Expenditure<br>WEB HOSTING    |     |      |           |
| To Whom Paid<br>RIVERVIEW BANK             |             |                            | MO   | DAY | YEAR | \$ 2.00   |
| Mailing Address 2638 WOODGLEN RD           |             |                            | 6  | 30  | 2021 |           |
| City POTTSVILLE                            | State<br>PA | Zip Code (Plus 4)<br>17901 | Description of Expenditure<br>SERVICE CHARGE |     |      |           |
| To Whom Paid<br>RIVERVIEW BANK             |             |                            | MO   | DAY | YEAR | \$ 2.00   |
| Mailing Address 2638 WOODGLEN RD           |             |                            | 7  | 30  | 2021 |           |
| City POTTSVILLE                            | State<br>PA | Zip Code (Plus 4)<br>17901 | Description of Expenditure<br>SERVICE CHARGE |     |      |           |
| To Whom Paid<br>CENTRE COUNTY DEMS         |             |                            | MO   | DAY | YEAR | \$ 155.08 |
| Mailing Address 315 S. ALLEN ST. SUITE 116 |             |                            | 8  | 9   | 2021 |           |
| City STATE COLLEGE                         | State<br>PA | Zip Code (Plus 4)<br>16801 | Description of Expenditure<br>DINNER AD      |     |      |           |
| To Whom Paid<br>HOMETOWN SPORTS            |             |                            | MO   | DAY | YEAR | \$ 430.00 |
| Mailing Address 469 PLUM ST.               |             |                            | 12   | 1   | 2021 |           |
| City BELLEFONTE                            | State<br>PA | Zip Code (Plus 4)<br>16823 | Description of Expenditure<br>ADVERTISING    |     |      |           |

|                                  |          |                         |  |     |      |         |
|----------------------------------|----------|-------------------------|--|-----|------|---------|
| To Whom Paid<br>RIVERVIEW BANK   |          |                         | MO   | DAY | YEAR | \$ 2.00 |
| Mailing Address 2638 WOODGLEN RD |          |                         | 10   | 29  | 2021 |         |
| City POTTSVILLE                  | State PA | Zip Code (Plus 4) 17901 | Description of Expenditure<br>SERVICE CHARGE |     |      |         |

|                                      |          |                         |  |     |      |           |
|--------------------------------------|----------|-------------------------|--|-----|------|-----------|
| To Whom Paid<br>WALMART              |          |                         | MO   | DAY | YEAR | \$ 168.54 |
| Mailing Address 1665 N. ATHERTON ST. |          |                         | 10   | 25  | 2021 |           |
| City STATE COLLEGE                   | State PA | Zip Code (Plus 4) 16803 | Description of Expenditure<br>PRIZE/DONATION |     |      |           |

|                                  |          |                         |  |     |      |         |
|----------------------------------|----------|-------------------------|--|-----|------|---------|
| To Whom Paid<br>RIVERVIEW BANK   |          |                         | MO   | DAY | YEAR | \$ 2.00 |
| Mailing Address 2638 WOODGLEN RD |          |                         | 11   | 30  | 2021 |         |
| City POTTSVILLE                  | State PA | Zip Code (Plus 4) 17901 | Description of Expenditure<br>SERVICE CHARGE |     |      |         |

|  |          |                         |  |     |      |         |
|--|----------|-------------------------|--|-----|------|---------|
| To Whom Paid<br>CENTRE COUNTY DEMS         |          |                         | MO   | DAY | YEAR | \$ 2.16 |
| Mailing Address 315 S. ALLEN ST. SUITE 116 |          |                         | 11   | 9   | 2021 |         |
| City STATE COLLEGE                         | State PA | Zip Code (Plus 4) 16801 | Description of Expenditure<br>SERVICE CHARGE |     |      |         |

|                                    |          |                         |  |     |      |         |
|------------------------------------|----------|-------------------------|--|-----|------|---------|
| To Whom Paid<br>CENTRE COUNTY DEMS |          |                         | MO   | DAY | YEAR | \$ 0.50 |
| Mailing Address 315 S. ALLEN ST.   |          |                         | 12   | 9   | 2021 |         |
| City STATE COLLEGE                 | State PA | Zip Code (Plus 4) 16801 | Description of Expenditure<br>SERVICE CHARGE |     |      |         |

|                                    |          |                         |  |     |      |          |
|------------------------------------|----------|-------------------------|--|-----|------|----------|
| To Whom Paid<br>CENTRE COUNTY DEMS |          |                         | MO                                     | DAY | YEAR | \$ 50.00 |
| Mailing Address 315 S. ALLEN ST.   |          |                         | 12                                     | 31  | 2021 |          |
| City STATE COLLEGE                 | State PA | Zip Code (Plus 4) 16801 | Description of Expenditure<br>DONATION |     |      |          |



|   |                    |                                   |   |            |             |  |
|---|--------------------|-----------------------------------|---|------------|-------------|--|
| <b>To Whom Paid</b><br>DECO GRAB & GO           |                    |                                   | <b>MO</b>                                       | <b>DAY</b> | <b>YEAR</b> |  |
| <b>Mailing Address</b> 240 N. 3RD ST. SUITE 102 |                    |                                   | 12  | 16         | 2021        |  |
| <b>City</b> HARRISBURG                          | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17101 | <b>Description of Expenditure</b><br>FUNDRAISER |            |             |  |

  

|   |                    |                                   |                                   |            |             |  |
|---|--------------------|-----------------------------------|-----------------------------------|------------|-------------|--|
| <b>To Whom Paid</b><br>RIVERVIEW BANK   |                    |                                   | <b>MO</b>                         | <b>DAY</b> | <b>YEAR</b> |  |
| <b>Mailing Address</b> 2638 WOODGLEN RD |                    |                                   | 12                                | 31         | 2021        |  |
| <b>City</b> POTTSVILLE                  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17901 | <b>Description of Expenditure</b> |            |             |  |

  

|  |  |  |  |  |  |                   |
|--|--|--|--|--|--|-------------------|
| <b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b> |  |  |  |  |  | <b>PAGE TOTAL</b> |
|  |  |  |  |  |  | \$ 6,112.20       |

