Campaign Finance Report

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

Filer Identification 20210346 Number :						Repo Filed			CA	CANDIDATE COMM		AITTEE V		LOB	BYIST					
Name of Filing C	ommittee, Ca	andida	te or Lo	bbyis	t:		CLAR:	ICE	FOR	PA						·				
Street Address:	P.O. BO	< 481																		
City:	HARRISE	BURG								State	e:	PA			Zip Cod	le: 17	108			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND F PRIMA	RIDAY	PRE-	2.		30 DA		Р	POST- 3.			AMENDM REPORT?	Yes	N	0	\	
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND F ELECT		PRE-	- 5.		30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	N	0	\
report type)	ANNUAL REF	PORT	7. X	Year 2021						NG METHOD CHECK ONE			PAPER		\checkmark	DISK	ETTE			
Name of Office S	ought by Car	ndidate	e:							DAT	E O	F ELE	CTIC	N	District Number	Office Code	Pai	ty Cod	Code	
LIEUTENIANT C	OVERNOR									МО		DAY	Y	EAR		LTG	REF	1	22	
LIEUTENANT G	OVERNOR								11				2	2021		(SEE INS	TRUCTI	ONS FOR	CODES	5)
Summary of		nd	МО	DA	Y	YEAR				МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	•	
Expenditures	irom:		1	11	23	20	21	T	O		12		31	2021						
A. Amount Bro	ught Forward	l From	Last R	eport					\$					0.00						
B. Total Moneta	ary Contribut	ions A	nd Rec	eipts (From	Sched	lule I	()	\$				254,	315.00						
C. Total Funds	Available (Su	ım Of l	ines A	and B)				\$				254,	315.00						
D. Total Expend	ditures (From	1 Sche	dule II	[)					\$				5,9	902.94						
E. Ending Cash	Balance (Sul	btract	Line D	From I	Line C)			\$			2	248,4	112.06						
F. Value Of In-	Kind Contribu	utions	Receive	ed (Fro	om Sc	hedul	e II)		\$			0.00								
G. Unpaid Debt	s And Obliga	tions (From S	chedu	le IV))			\$					0.00		,				
						AFFI	[DA\	/IT	SE	CTIC	NC									
PART I - If this is	a Committe	e repo	rt, trea	surer	sign h	ere. I	f this	is	a Car	ndidat	e re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple		rt, inclu	ding the	attach	ed sch	edules	filed o	on p	aper	or by e	electr	onic m	edium	, are to t	he best of	f my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before n day of	ne this		20										Signature	of Persoi	1 Submitt	ing Re _l	ort		_
		gnature	.												Print	ted Name				_
My Commission Ex	pires								_		•				Emai	il				
	МО		DA	λY		YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candi	date's	author	rized (Comm	ittee,	, Ca	ndid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		st of my	/ knowle	dge an	d belie	f this p	politic	al d	comm	ittee h	as no	ot viola	ted ar	ny provis	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc		e this		20										s	ignature o	of Candida	ite			_
	day of —— ——														Printe	d Name				-
	Signa	ature							•											_
My Commission Exp	ires											Email								
	м	0	D#	ΑY		YR						Area	Code		Da	ytime Te	elephor	e Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
CLARICE FOR PA	From:	11/23/20	2 <u>1</u> To:	12/31/2021
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	165.00
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)			\$	1,150.00
TOTAL for the Reporting	Period	(2)	\$	1,150.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	253,000.00
TOTAL for the Reporting	Period	(3)	\$	253,000.00
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 Page			\$	254,315.00

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 Candidate			Reporting Period						
		Fi	rom:		То	:			
		•		DATE			AMOUNT		
Full Name of Contributing Comm	Full Name of Contributing Committee				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)

Name of Filing Committee or Candida	te		Rep	Reporting Period					
CLARICE FOR PA			Fro	m:	11/23/2	2021 T o	<u>12/31/2021</u>		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
FRED ZOLLERS									
Mailing Address 225 E MONUMENT	AVE						\$	100.00	
City HATBORO	State	Zip Code (Plus 4)	12	15	2021			
	PA	19040							
Full Name of Contributor HELEN TRACY				МО	DAY	YEAR			
Mailing Address 816 INVERNESS LI	V						\$	100.00	
City PHILADELPHIA	State	Zip Code (Plus 4)	12	15	2021			
	PA	19128							
Full Name of Contributor									
DOUGLAS T RICKARDS				МО	DAY	YEAR			
Mailing Address 210 KELKER ST							\$	100.00	
City HARRISBURG	State	Zip Code (Plus 4)	12	2	2021			
	PA	17102							
Full Name of Contributor	-	-		мо	DAY	YEAR			
RACHEL LANGAN				МО	DAT	TEAR			
Mailing Address 635 N CHURCH ST							\$	100.00	
City WEST CHESTER	State	Zip Code (Plus 4)	12	15	2021			
	PA	19380							
Full Name of Contributor				мо	DAY	YEAR			
KIMBERLY GALIE				МО	DAT	TEAR			
Mailing Address 4 SUMMIT PL							\$	250.00	
City PHILADELPHIA	State	Zip Code (Plus 4)	12	14	2021			
	PA	19128							
Full Name of Contributor				мо	DAY	YEAR			
KIM CLERKIN				МО	DAT	TEAR			
Mailing Address 626 BERWYN BAPT	TST RD						\$	250.00	
City DEVON	State	Zip Code (Plus 4)	12	31	2021			
	PA	19333							

Full N	ull Name of Contributor					DAY	YEAR	
DONN	DONNA BLASZCZYK					אלו	ILAK	
Mailing Address 4401 GULF SHORE BLVD, N UNIT 1703							\$ 250.00	
City	NAPLES		State	Zip Code (Plus 4)	12	31	2021	
			FL	34103				

PAGE TOTAL \$ 1,150.00

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

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	ame of Filing Committee or Candidate		Reporting Period							
			From:			То:				
				DA	TE		P	AMOUNT		
Full Name of Contributing Committee				МО	DAY	YEAR		ſ	0.00	
Mailing Address							+	C).00	
City	State	Zip Code	e (Plus 4)							
								PAGE TOTAL	L	
Enter Grand Total of Part C on Scheo	nter Grand Total of Part C on Schedule I, Detailed Summary Page, Sect						\$	0.	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 Committee or Candidate				porting Period						
CLARICE FOR PA			Fror	n:	11/23/2	<u>021</u> To	<u>12/31/2021</u>			
				D/	ATE		A	MOUNT		
Full Name of Contributor				мо	DAY	YEAR		1 000 00		
DEON SQUARE				МО	DAT	ILAK	\$	1,000.00		
Mailing Address P.O. BOX 5 LEVITTO	OWN PKY & OL	.DS BLVD		12	27	2021				
City FAIRLESS HILLS	State	Zip Code (Plu	s 4)							
	PA	19030								
Employer Name				Occupation						
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Cod	le (Plus 4)		
Full Name of Contributor		<u> </u>		МО	DAY	YEAR		500.00		
CHRIS COVAL				140	DAI	ILAK	_ \$	500.00		
Mailing Address 587 COACH RD				12	15	2021				
City HORSHAM	State Zip Code (Plus 4)									
	PA 19044									
Employer Name FENNINGHAM DEMPS	ΓER COVAL, LLP			Occupat	tion	ATTORN	IEY			
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Cod	le (Plus 4)		
5 NESHAMINY INTERPLEX		FEASTER	VILLE T	REVOSE	PA		19053			
Full Name of Contributor		•								
PAUL J MARTINO				МО	DAY	YEAR	\$	20,000.00		
Mailing Address 5 THEODORE WAY					_		1			
City DOYLESTOWN	State	Zip Code (Plu	s 4)	12	7	2021				
	PA	18901								
Employer Name BULLPEN CAPITAL		10001		Occupat	ion	PARTNE	R			
Employer Mailing Address/Principal Place	e of Business	City			State	7		le (Plus 4)		
215 2ND ST		SAN FRA	NCISCO)	CA		94105			
Full Name of Contributor				мо	DAY	YEAR	\$	220 000 00		
PAUL J MARTINO					27] *	230,000.00		
Mailing Address 5 THEODORE WAY				12	10	2021				
City DOYLESTOWN	State	Zip Code (Plu	s 4)							
PA 18901						1				
Employer Name BULLPEN CAPITAL			Occupation PARTNER							
Employer Mailing Address/Principal Place of Business City			State Zip			Zip Code (Plus 4)				
5 2ND ST SAN FRANCISCO					O CA 9			94105		

Full Name of Contributor	Name of Contributor						
BETH ANN ROSICA			МО	DAY	YEAR	\$	500.00
Mailing Address 338 W MINER ST			12	15	2021	7	
City WEST CHESTER	State	Zip Code (Plus 4)	1 12	13	2021	1	
	PA	19382				1	
Employer Name SELF EMPLOYED			Occupat	ion	CONSUL	TANT	
Employer Mailing Address/Principal Plac	e of Business	City		State		Zip Code	(Plus 4)
338 W MINER ST		WEST CHESTER		PA		19382	
Full Name of Contributor							
			l MO I	DAV	VEAD		
MICHAEL SCHILLINGER			МО	DAY	YEAR	\$	1,000.00
MICHAEL SCHILLINGER Mailing Address 9 BAYBERRY CIR						-	1,000.00
	State	Zip Code (Plus 4)	мо - 12	DAY 31	YEAR 2021	-	1,000.00
Mailing Address 9 BAYBERRY CIR	State PA	Zip Code (Plus 4) 19002				-	1,000.00
Mailing Address 9 BAYBERRY CIR				31		-	1,000.00
Mailing Address 9 BAYBERRY CIR City AMBLER	PA		12	31	2021		1,000.00 (Plus 4)

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

PAGE TOTAL \$ 253,000.00

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	Name of Filing Committee or Candidate			Reporting Period					
			From:			To:			
		•		C	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.00	
Mailing Address							7		
City	State	Zip Code (Plu	us 4)						
Receipt Description	•	•			•	•	•		
Futor Curred Total of Bout	Fan Cabadula I. Datailad	Summer Base S	! !	4				PAGE TOTAL	
Enter Grand Total of Part	E ON Schedule 1, Detalled	Summary Page, Se	ection	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 Per	iod								
CLARICE FOR PA	From:	<u>11/23/2021</u> To:	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)	\$	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,		\$	0.00							

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

ame of Filing Committee or Candidate			Reporting Period					
	F					То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate				porting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State	;	Zip Code(Plus 4)							
Employer of Contributor				Occupation						
Employer Mailing Address/Principal Plac	e of Business	City	′	Stat	e Zip	Code(Plus 4)	Desci	ripti	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TOT	Γ AL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting F	Reporting Period				
CLARICE FOR PA	From	11/23/2021	То:	12/31/2021		

				DATE			AMOUNT	
To Whom Paid			МО	DAY	YEAR			
BERKS COUNTY REPUBLICAN COMM:	TTEE		1-10	J	7 = 7 \			
Mailing Address 8468 ALLENTOWN PK SUITE 6			12	13	2021	\$	1,500.00	
City BLANDON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19510	CONTRIBUTION					
To Whom Paid			мо	DAY	YEAR			
LEHIGH VALLEY TEA PARTY			MO	DAI	ILAK			
Mailing Address P.O. BOX 91011			12	14	2021	\$	150.00	
City ALLENTOWN	City ALLENTOWN State Zip Code (Plus 4)			Description of Expenditure				
	PA	18109	CONTR	IBUTION				
To Whom Paid			мо	DAY	YEAR			
WINRED			MO	DAI	ILAK			
Mailing Address P.O. BOX 9891			12	14	2021	\$	10.48	
City ARLINGTON State Zip Code (Plus 4)			Description of Expenditure					
	VA	22219	SERVICE FEE					
To Whom Paid			МО	DAY	YEAR			
WINRED			MO	DAT	TEAR			
Mailing Address P.O. BOX 9891			12	15	2021	\$	54.84	
City ARLINGTON	State	Zip Code (Plus 4)	4) Description of Expenditure SERVICE FEE					
	VA	22219						
To Whom Paid			мо	DAY	YEAR			
FAMILIES BEHIND THE BADGE CHILI	DREN'S FOUNDATION		MO	DAI	ILAK			
Mailing Address 555 NORTH LN S	JITE 6060		12	16	2021	\$	500.00	
City CONSHOHOCKEN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l .		
	PA	19428	CONTRIBUTION					
To Whom Paid			MO	DAY	YEAR			
СРІТЕСН			МО	DAT	TEAR			
Mailing Address 3212 PIKE ST			12	21	2021	\$	585.65	
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure					
PA 17111			OFFICE SUPPLIES					

To 14/1									
lio Mu	nom Paid				мо	DAY	YEAR		
DOUG RICKARDS					MO	DAT	ILAK		
Mailin	niling Address 210 KELKER ST				12	21	2021	\$	213.25
City	HARRISBU	IRG	State	Zip Code (Plus 4)	Description of Expenditure				
			PA	17102	REIMBURSEMENT				
To Wh	nom Paid				МО	DAY	YEAR		
POST	MASTER				МО	DAT	TEAK		
Mailin	g Address	FEDERAL SQUARE S FLOOR	TATION WALNUT ANI	O 2ND ST. 1ST	12	21	2021	\$	11.60
City	HARRISBU	IRG	State	Zip Code (Plus 4)	Description of Expenditure				
			PA	17108	POSTAGE				
To Wh	nom Paid				мо	DAY	YEAR		
PNC B	BANK				MO	DAT	ILAK		
Mailin	g Address	110 S 32ND ST			12	22	2021	\$	369.58
City	CAMP HILL	-	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
			PA	17011	PRINTIN	lG			
To Wh	nom Paid				МО	DAY	YEAR		
REPUI	BLICAN COM	MITTEE OF LANCAST	ER COUNTY		MO		ILAK		
Mailin	g Address	902 COLUMBIA AVE			12	22	2021	\$	1,000.00
City	LANCASTE	R	State	Zip Code (Plus 4)	Description of Expenditure				
			PA	17603	CONTRIBUTION				
To Wh	nom Paid				мо	DAY	YEAR		
WINR	ED				1-10	- / .			
Mailing Address P.O. BOX 9891									
	ng Address	P.O. BOX 9891			12	23	2021	\$	1.25
City	ARLINGTO		State	Zip Code (Plus 4)		23		\$	1.25
			State VA	Zip Code (Plus 4) 22219		tion of Exp		\$	1.25
City					Descript SERVIC	tion of Exp	enditure	\$	1.25
City To Wh	ARLINGTO	N			Descript	tion of Exp		\$	1.25
City To Wh	ARLINGTO	N POST #10		22219	Descript SERVIC	tion of Exp	enditure	\$	250.00
City To Wh	ARLINGTO nom Paid LICAN LEGIO ng Address	N POST #10 ATTN: CARRIE BONI	VA	22219	Descript SERVIC MO	E FEE	YEAR 2021		
To Wh AMER Mailin	ARLINGTO	N POST #10 ATTN: CARRIE BONI	VA NET 493 BETHLEHEM	22219 PK	Descript SERVIC MO	DAY 28 ation of Exp	YEAR 2021		
To Wh AMER Mailin	ARLINGTO nom Paid LICAN LEGIO ng Address	N POST #10 ATTN: CARRIE BONI	VA NET 493 BETHLEHEM State	22219 PK Zip Code (Plus 4)	MO 12 Descript RENTAL	DAY 28 tion of Expr	YEAR 2021 enditure		
To Wh AMER Mailin City	ARLINGTO nom Paid LICAN LEGIO ng Address FORT WAS	N POST #10 ATTN: CARRIE BONI	VA NET 493 BETHLEHEM State PA	22219 PK Zip Code (Plus 4)	Descript SERVIC MO 12 Descript	DAY 28 ation of Exp	YEAR 2021		
To Wh AMER Mailin City To Wh	ARLINGTO nom Paid LICAN LEGIO ng Address FORT WAS	N POST #10 ATTN: CARRIE BONI SHINGTON	VA NET 493 BETHLEHEM State PA TTEE	22219 PK Zip Code (Plus 4)	MO 12 Descript RENTAL	DAY 28 tion of Expr	YEAR 2021 enditure		
To Wh AMER Mailin City To Wh	ARLINGTO nom Paid LICAN LEGIO ng Address FORT WAS nom Paid HIN COUNTY	N POST #10 ATTN: CARRIE BONI SHINGTON (REPUBLICAN COMMIT 2255 PAXTON CHUR	VA NET 493 BETHLEHEM State PA TTEE	22219 PK Zip Code (Plus 4)	MO 12 Descript RENTAL MO 12	DAY 28 tion of Exp	YEAR 2021 enditure YEAR 2021	\$	250.00
To Wh AMER Mailin City To Wh DAUP!	ARLINGTO nom Paid LICAN LEGIO ng Address FORT WAS nom Paid HIN COUNTY ng Address	N POST #10 ATTN: CARRIE BONI SHINGTON (REPUBLICAN COMMIT 2255 PAXTON CHUR	VA NET 493 BETHLEHEM State PA TTEE CH RD	22219 PK Zip Code (Plus 4) 19034	Descript SERVIC MO 12 Descript RENTAL MO 12 Descript	E FEE DAY 28 tion of Expr FEE DAY 29	YEAR 2021 enditure YEAR 2021	\$	250.00
To Wh AMER Mailin City To Wh DAUP Mailin	ARLINGTO nom Paid LICAN LEGIO ng Address FORT WAS nom Paid HIN COUNTY ng Address	N POST #10 ATTN: CARRIE BONI SHINGTON (REPUBLICAN COMMIT 2255 PAXTON CHUR	VA NET 493 BETHLEHEM State PA TTEE CH RD State	22219 PK Zip Code (Plus 4) 19034 Zip Code (Plus 4)	MO 12 Descript RENTAL MO 12 Descript CONTRI	DAY 28 tion of Exp FEE DAY 29 tion of Exp BUTION	YEAR 2021 enditure YEAR 2021 enditure	\$	250.00
To Wh AMER Mailin City To Wh DAUP	ARLINGTO nom Paid LICAN LEGIO ng Address FORT WAS nom Paid HIN COUNTY ng Address HARRISBU	N POST #10 ATTN: CARRIE BONI SHINGTON (REPUBLICAN COMMIT 2255 PAXTON CHUR	VA NET 493 BETHLEHEM State PA TTEE CH RD State	22219 PK Zip Code (Plus 4) 19034 Zip Code (Plus 4)	Descript SERVIC MO 12 Descript RENTAL MO 12 Descript	DAY 28 ction of Exp FEE DAY 29 ction of Exp	YEAR 2021 enditure YEAR 2021	\$	250.00
To Wh AMER Mailin City To Wh DAUP! Mailin City To Wh DOUG	ARLINGTO nom Paid ICAN LEGIO ng Address FORT WAS nom Paid HIN COUNTY ng Address HARRISBU	N POST #10 ATTN: CARRIE BONI SHINGTON (REPUBLICAN COMMIT 2255 PAXTON CHUR	VA NET 493 BETHLEHEM State PA TTEE CH RD State	22219 PK Zip Code (Plus 4) 19034 Zip Code (Plus 4)	MO 12 Descript RENTAL MO 12 Descript CONTRI	DAY 28 tion of Exp FEE DAY 29 tion of Exp BUTION	YEAR 2021 enditure YEAR 2021 enditure	\$	250.00
To Wh AMER Mailin City To Wh DAUP! Mailin City To Wh DOUG	ARLINGTO nom Paid ARCAN LEGIO nom Paid HIN COUNTY ng Address HARRISBU nom Paid G RICKARDS	N POST #10 ATTN: CARRIE BONI SHINGTON (REPUBLICAN COMM) 2255 PAXTON CHUR RG	VA NET 493 BETHLEHEM State PA TTEE CH RD State	22219 PK Zip Code (Plus 4) 19034 Zip Code (Plus 4)	Description SERVICE MO 12 Description RENTAL MO 12 Description RENTAL MO 12 Description RENTAL MO 12	DAY 28 Lion of Exp FEE DAY 29 Lion of Exp BUTION DAY	YEAR 2021 enditure YEAR 2021 enditure YEAR 2021	\$	1,000.00

PAGE 15

		PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	\$	5,902.94	