Campaign Finance Report

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

Filer Identification 2006317 Number :						Repo Filed	_	:	CAN	DIE	DATE		COM	4ITTEE	✓	LOB	BYIST			
Name of Filing C	ommittee,	Candida	ite or Lo	obbyis	t:	C	CONK	LIN,	SC	OTT F	RIE	NDS (OF							
Street Address:																				
City:	_									State:					Zip Cod					
TYPE OF REPORT	6TH TUESI PRE-PRIMA		1.	2ND F PRIMA	RIDAY ARY	PRE-	2.3		DA RIMA		P	OST-	3.		AMENDM REPORT?		Yes	N	0	\
(place X to the right of	6TH TUESI PRE-ELECT		4.	2ND F ELECT		PRE-	5.		DA ECT	Y ION	P	OST-	6.		TERMINA REPORT?		Yes	N	0	√
report type)	ANNUAL I	REPORT	7.	Year	2022					IG MET		_			PAPER		√	DISK	ETTE	
Name of Office S	ought by	Candidat	e:							DATE	OI	F ELE	CTIC	N	District Number	Office Code	Pai	ty Cod	Cour	
										МО		DAY	Y	EAR		•				
											11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		and	МО	DA	Y	YEAR				МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	from:			3	29	20	22	то			5		2	2022						
A. Amount Bro	ught Forw	ard From	Last R	eport					\$				22,	257.49						
B. Total Moneta	ary Contril	outions A	and Rec	eipts (From	Sched	lule I)	\$				3,	582.70						
C. Total Funds	Available	(Sum Of	Lines A	and B	5)				\$				25,	840.19						
D. Total Expend	ditures (Fr	om Sche	dule II	I)					\$				2,2	235.88						
E. Ending Cash	Balance (Subtract	Line D	From I	Line C)			\$				23,6	504.31						
F. Value Of In-	Kind Contr	ibutions	Receive	ed (Fr	om Sc	hedule	e II)		\$					0.00						
G. Unpaid Debt	s And Obli	gations	(From S	Schedu	ıle IV)	1			\$					0.00		,				
						AFFI	DAV	IT.	SE	CTIO	N									
PART I - If this is		-			_															
I swear (or affirm) correct and comple		eport, incit	laing the	attacn	iea sch	eaules	tilea o	n pap	per c	or by ele	ectr	onic me	eaium	i, are to t	ne best of	т ту кпоч	vieage	and be	lier , tr	ue
Sworn to and subs	cribed before day of	e me this		20							-			Signature	of Persor	n Submitt	ing Re	oort		
		Signatur	e								-				Print	ed Name				_
My Commission Ex	opires –										-				Emai	I				
	M	10	D/	AY		YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		ᆜ
Part II- If this is	a report o	of a cand	idate's	autho	rized (Commi	ittee,	Can	dida	ate sha	all s	ign he	ere.							
I swear (or affirm) No 320) as amende		best of m	y knowle	edge an	d belie	f this p	politica	al co	mmi	ittee ha	s no	t viola	ted ar	ny provis	ions of the	act of Ju	ine 3,1	937 (P	L. 133	3,
Sworn to and subsc	ribed before day of	me this		20										s	ignature o	f Candida	ite			_
				20 -											Printe	d Name				-
	Si	gnature						_			-									_
My Commission Exp	ires														Emai	il				
		мо	D	AY		YR						Area	Code		Da	ytime Te	elephor	ne Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
CONKLIN, SCOTT FRIENDS OF	From:	3/29/202	<u>2</u> To:	5/2/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	467.70
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	250.00
All Other Contributions (Part B)			\$	365.00
TOTAL for the Reporting) Period	(2)	\$	615.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	1,500.00
All Other Contributions (Part D)			\$	1,000.00
TOTAL for the Reporting) Period	(3)	\$	2,500.00
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			\$	3,582.70

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		
CONKLIN, SCOTT FRIENDS OF	From:	3/29/2022	То:	5/2/2022
		DATE		AMOUNT

Full Name of Contributing Committee MALADY & DOTEN	МО	DAY	YEAR			
Mailing Address 604 N. 3RD ST.						\$ 250.00
City HARRISBURG	State	Zip Code (Plus 4)	4	18	2022	
	PA	17101				

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

PAGE TOTAL \$ 250.00

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 Candidat	e		Repo	orting Pe	eriod			
CONKLIN, SCOTT FRIENDS OF			From	n:	3/29/2	<u>2022</u> To):	5/2/2022
					DATE		АМ	OUNT
Full Name of Contributor ELIZABETH WHITMAN				мо	DAY	YEAR		
Mailing Address 133 SANDY RIDGE	RD.						\$	100.00
City STATE COLLEGE	State PA	Zip Code (Plus 4) 16803		4	18	2022		
Full Name of Contributor MARK HIGGINS				мо	DAY	YEAR		
Mailing Address 528 MCCORMICK A	VE State	Zip Code (Plus 4)		4	18	2022	\$	60.00
City STATE COLLEGE	PA	16801						
Full Name of Contributor ROBERT ZEIGLER				мо	DAY	YEAR		
Mailing Address 134 W. MAIN ST.				3	29	2022	\$	105.00
City MILLHEIM	State PA	Zip Code (Plus 4) 16854		3	23	2022		
Full Name of Contributor LAURA BURKA				мо	DAY	YEAR		
Mailing Address 901 WALNUT ST.						2025	\$	100.00
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648		3	26	2022		
			•				P/	GE TOTAL

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

\$ 365.00

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.

City STATE COLLEGE State PA 16803 Full Name of Contributing Committee CONSERVATION VOTERS OF PA Mailing Address 1429 WALNUT ST. \$ 500.00	Name of Filing Committee or Candidate	e of Filing Committee or Candidate Report						
Full Name of Contributing Committee TEAMSTER'S #8 Mailing Address 2225 HIGH TECH RD. City STATE COLLEGE State PA 16803 Full Name of Contributing Committee CONSERVATION VOTERS OF PA Mailing Address 1429 WALNUT ST. MO DAY YEAR \$ 1,000.00 \$ 500.00 \$ 500.00	CONKLIN, SCOTT FRIENDS OF			From:	<u>3/2</u>	9/2022	То:	5/2/2022
TEAMSTER'S #8 Mailing Address 2225 HIGH TECH RD. City STATE COLLEGE State PA 16803 Full Name of Contributing Committee CONSERVATION VOTERS OF PA Mailing Address 1429 WALNUT ST. MO DAY YEAR \$ 1,000.00 \$ 1,000.00 \$ 500.00 \$ 500.00 \$ 500.00					DA	TE		AMOUNT
City STATE COLLEGE State PA 16803 Full Name of Contributing Committee CONSERVATION VOTERS OF PA Mailing Address 1429 WALNUT ST. \$ 1,000.00 \$ 1,000.00 \$ 1,000.00 \$ 500.00	_				МО	DAY	YEAR	
City STATE COLLEGE State PA 16803 Full Name of Contributing Committee CONSERVATION VOTERS OF PA Mailing Address 1429 WALNUT ST. \$ 500.00	Mailing Address 2225 HIGH TECH RD					10	2022	\$ 1,000.00
CONSERVATION VOTERS OF PA Mo DAY YEAR Mailing Address 1429 WALNUT ST. \$ 500.00	City STATE COLLEGE			e (Plus 4)	4	18	2022	
1429 WALNUT ST. \$ 500.00	_				МО	DAY	YEAR	
la	Mailing Address 1429 WALNUT ST.							\$ 500.00
City PHILADELPHIA State Zip Code (Plus 4) 3 29 2022 PA 19102	City PHILADELPHIA	State PA		e (Plus 4)	3	29	2022	

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

PAGE TOTAL 1,500.00

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			Rep	orting Pe	riod		
CONKLIN, SCOTT FRIENDS OF			Fror	m:	<u>3/29/2</u>	<u>022</u> To	: <u>5/2/2022</u>
				D	ATE		AMOUNT
Full Name of Contributor MARIA SWEEF				МО	DAY	YEAR	
Mailing 1812 RED LION DR.							\$ 1,000.00
City STATE COLLEGE	State	Zip Code (Plus	s 4)	4	18	2022	
	PA	16801					
Employer Name	•			Occupat	tion		•
Employer Mailing Address/Principal Plac Business	ce of	City			State		Zip Code (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page,	Section	on 3.		\$	PAGE TOTAL 1,000.00

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 or	Candidate		Report	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
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			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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	
CONKLIN, SCOTT FRIENDS OF	From:	3/29/2022 To:	5/2/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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)	\$	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

Name of Filing Committee or Candid	ate		Reporting	g Period			
			From:			To:	
				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	е				Re	porting	Period			
					Fro	om:		То:		
					•		DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor	1		•			Occupa	ation			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting P	Period		
CONKLIN, SCOTT FRIENDS OF	From	3/29/2022	То:	5/2/2022

				DATE	AMOUNT		
To Whom Paid KATIE BLUME			мо	DAY	YEAR		
Mailing Address P.O. BOX 674			2	17	2022	\$	150.00
City MILLHEIM	State PA	Zip Code (Plus 4) 16854	Description of Expenditure FAIR REIMBURSEMENT				
To Whom Paid WAGON WHEEL			МО	DAY	YEAR		
Mailing Address 109 VERBECK LANE			2	17	2022	\$	100.00
City PHILIPSBURG	State PA	Zip Code (Plus 4) 16866	Description of Expenditure AD				
To Whom Paid HOMETOWN SPORTS			МО	DAY	YEAR		
Mailing Address 469 PLUM ST.			2	17	2022	\$	215.00
City BELLEFONTE	State PA	Zip Code (Plus 4) 16823	Description of Expenditure AD				
To Whom Paid THE PROGRESS	•	·	МО	DAY	YEAR		
Mailing Address 236 E. MARKET ST.			2	17	2022	\$	150.00
City CLEARFIELD	State PA	Zip Code (Plus 4) 16830	Descrip AD	tion of Exp	penditure		
To Whom Paid PNILIPSBURG KIWANIS			МО	DAY	YEAR		
Mailing Address 140 LAUREL HILL DR.			2	17	2022	\$	150.00
City PHILIPSBURG	State PA	Zip Code (Plus 4) 16866	Description of Expenditure AD				
		<u> </u>	1				

\$	4.24		
\$	250.00		
Description of Expenditure PRIDE 2022 AD			
	675.00		
\$	075.00		
\$	073.00		
\$	073.00		
\$	215.00		
\$	215.00		
\$	215.00		
\$	215.00		

To Whom Paid MID PENN BANK				DAY	YEAR		
Mailing Address 19 IRWIN DR.			2	28	2022	\$	2.00
City PHILIPSBURG	State PA	Zip Code (Plus 4) 16866	Description of Expenditure FEE				
To Whom Paid CENTRE COUNTY DEMS			МО	DAY	YEAR		
Mailing Address 315 ALLEN	ST.		3	21	2022	\$	280.00
City STATE COLLEGE	State PA	Zip Code (Plus 4) 16801	Description of Expenditure DONATION				
To Whom Paid ACT BLUE			МО	DAY	YEAR		
Mailing Address 366 SUMMER ST.			4	4	2022	\$	17.24
City SOMERVILLE	State MA	Zip Code (Plus 4) 02144	Description of Expenditure FEE				
To Whom Paid ACT BLUE	·	·	МО	DAY	YEAR		
Mailing Address 366 SUMMER ST.			4	11	2022	\$	24.90
City SOMERVILLE	State MA	Zip Code (Plus 4) 02144	Description of Expenditure FEE				
Enter Grand Total of Every	ditures on Page 1. Pe	nort Cover Bage Item D					PAGE TOTAL
Enter Grand Total of Expen	uitures on Page 1, Re	port cover Page, Item D	-			\$	2,235.88