Campaign Finance Report

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

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Filer Identificati Number :	on 2019	90183			Report Filed E		CANDI	DATE		СОМ	IITTEE	✓	LOBI	BYIST	
Name of Filing C	Committee, Candic	late or Lo	obbyist:		COMMC	NWE	ALTH CHI	LDREN	I'S CH	OICE	FUND				
Street Address:	420 N 3RD S	TREET													
City:	HARRISBURG	ì					State:	PA			Zip Coo	le: 17	101		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 DA PRIMA		POST-	3. X		AMENDM REPORT		Yes	No	 Image: A start of the start of
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	Ξ- 5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	>
report type)	ANNUAL REPORT	7.	Year 2022				NG METHO				PAPER		\checkmark	DISKE	TTE
Name of Office S	Sought by Candida	ite:			-		DATE O	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YE/	AR					
							11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YE	AR	FO	R OFFIC	E USE	ONLY	
Expenditures	from:		5 3	8 2	022 T	0	6		6	2022					
A. Amount Bro	ught Forward Fro	m Last R	eport			\$		5,3	362,40	09.56					
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$		5	502,33	33.97					
C. Total Funds	Available (Sum O	f Lines A	and B)			\$		5,8	364,74	43.53					
D. Total Expen	ditures (From Sch	edule II	I)			\$		1	108,17	75.61					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$		5,7	'56,5 6	57.92	-				
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)	\$				0.00					
G. Unpaid Debt	ts And Obligations	(From S	Schedule I\	/)		\$				0.00					
				AFF	IDAVI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign	here.	If this is	a Car	ndidate re	eport, c	andid	ate sig	gn here.				
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached so	hedule	s filed on	paper	or by elect	ronic me	edium,	are to I	the best o	f my knov	vledge	and beli	ef , true
Sworn to and subs	cribed before me thi day of	S	20						Si	gnature	e of Perso	n Submitt	ing Rep	oort	
	Signatu	ıre				_					Prin	ted Name			
My Commission Ex	cpires										Ema	il			
	мо	D/	AY	YR				Are	ea Code	3	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comn	nittee, C	andid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of i	my knowle	edge and bel	ief this	political	comm	ittee has n	ot violat	ed any	, provis	ions of the	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subso	ribed before me this									s	ignature o	of Candida	ite		
	day of					_									
	Cirt					-					Printe	d Name			
My Commission Exp	Signature vires										Ema	il			
	мо	D/	AY	YR	1	-		Area	Code		Da	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Page	5			
Name of Filing Committee or Candidate	Reporting	Period		
COMMONWEALTH CHILDREN'S CHOICE FUND	From:	<u>5/3/202</u>	<u>2</u> To:	<u>6/6/2022</u>
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)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
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)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	52,333.97
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			\$	52,333.97

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 Candidat	e		Rep	orting I	Period		
			From	m:		То	
		·			DATE		AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plus 4	4)				
							PAGE TOTAL
Enter Grand Total of Part A on Sche	dule I, Detailed Sun	nmary Page, Se	ection	12.			\$ 0.00

Use this Part to it	emize all othe 50.01 to \$250.	1 TO \$250.00 r contribution 00 in the repo	s wi	ith an ng per	aggreg iod.			rom
Name of Filing Committee or Candida	te		-	orting P	eriod			
			Froi	m:		Тс):	
					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	Schedule I, Detail	led 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				
			From:			То:		
				DA	TE		A	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

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			Rep	orting Pe	riod			
			From	n:		Т):	
				D/	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Plu	s 4)					
Employer Name				Occupat	ion			
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Sectio	on 3.			PA \$	GE TOTAL 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.

Name of Filing Committee or Car	ndidate		Report	ing Perio	d			
COMMONWEALTH CHILDREN'S	CHOICE FUND		From:		<u>5/3/202</u>	<u>2</u> To:		<u>6/6/2022</u>
				D	ATE			AMOUNT
Full Name FIRST NATIONAL BANK OF PA				мо	DAY	YEAR	\$	2,333.97
Mailing Address 110 N 2ND ST	TREET			5	30	2022	2	
City HARRISBURG	State	Zip Code (Plu	us 4)					
	PA	17102						
Receipt Description INTERES	T EARNED	•						
Full Name MCSWAIN FOR GOVERNOR				мо	DAY	YEAR	\$	50,000.00
Mailing Address 228				5	13	2022	,	
City ALEXANDRIA	State	Zip Code (Plu	us 4)	5	10	2021		
	VA	22314						
Receipt Description	ł							
Enter Grand Total of Part E on								PAGE TOTAL

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 Period		
COMMONWEALTH CHILDREN'S CHOICE FUND	From:	<u>5/3/2022</u> то:	<u>6/6/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
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, 2		\$	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				
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				 \$	0.0)0
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	le,	F	AGE TOTAL	_
						\$	0.0	0

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

Name of Filing Committee or Candidate			Rep	porting F	Period		
			Fro	m:		То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor		•		Occupa	tion		•
Employer Mailing Address/Principal Plac	e of Business C	lity	State	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	Contributions D	etaile	d			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
COMMONWEALTH CHILDREN'S CHOICE	FUND		From	<u>5/3</u>	<u>3/2022</u>	То:	<u>6/6/2022</u>
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
CITIZENS FOR ALEC			MO	2	12/11		
Mailing Address 324 W MAIN ST			5	5	2022	\$	4,000.00
City PLYMOUTH	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
	PA	18651	CONTRI	BUTION			
To Whom Paid DEBEE CLARK, PLLC			мо	DAY	YEAR		
Mailing Address PO BOX 54949			5	31	2022	\$	2,000.00
City OKLAHOMA CITY	State	Zip Code (Plus 4)	Descript	l tion of Exp	enditure		
	ОК	73154	LEGAL F	EES			
To Whom Paid MAY FOR PA			мо	DAY	YEAR		
Mailing Address 2137 NEWTON RANS	SOM BLVD		5	10	2022	\$	4,000.00
City CLARKS SUMMIT	State	Zip Code (Plus 4)	Descript	l tion of Exp	enditure	<u> </u>	
	PA	18411	CONTRI	BUTION			
To Whom Paid OLD TOWN DELI			мо	DAY	YEAR		
Mailing Address 512 N 3RD STREET			5	25	2022	\$	372.70
City HARRISBURG	State	Zip Code (Plus 4)	Descript	l tion of Exp	enditure		
	PA	17101	FOOD F	OR FUNDR	AISER		
To Whom Paid ATLAS & amp; MIGHT LLC			мо	DAY	YEAR		
Mailing Address 1591 STONEY MOUN	ITAIN WAY		5	19	2022	\$	3,000.00
City DAUPHIN	State	Zip Code (Plus 4)	Descript	l tion of Exp	enditure		
	PA	17108	CONSU				
To Whom Paid GOLDSTEIN LAW PARTNERS		·	мо	DAY	YEAR		
Mailing Address 11 CHURCH RD			5	25	2022	\$	275.00
City HATFIELD	State	Zip Code (Plus 4)	Descript	l tion of Exp	enditure	I	
	PA	19440	LEGAL F	EES			

To Whom Paid			мо	DAY	YEAR		
I360 LLC							
Mailing Address 29375 N	ETWORK PLACE		5	17	2022	\$	1,500.00
City CHICAGO	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	IL	60673	DATABA	SE			
To Whom Paid			мо	DAY	YEAR		
FIRST NATIONAL BANK OF	PA		мо		TEAK		
Mailing Address 110 N 2	ND STREET					\$	102.25
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17101	BANK F	EES			
To Whom Paid COMMONWEALTH PARTNER			мо	DAY	YEAR		
Mailing Address 420 N 3			5	26	2022	\$	29,924.24
		Zin Code (Dlug 4)					
City HARRISBURG	State	Zip Code (Plus 4)		tion of Exp			
To Mileone Bald	PA	17101		STRATION			
To Whom Paid COMMONWEALTH ENTREPR	ENEURS, LLC		мо	DAY	YEAR		
Mailing Address 420 N 3	RD STREET		5	26	2022	\$	3,501.42
				1			
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Descript		enditure		
To Whom Paid	PA				enditure YEAR		
To Whom Paid FRIENDS OF TRACY PENNYC	PA		RENT M	AY DAY	YEAR	4	5 000 00
To Whom Paid	PA		RENT M	AY		\$	5,000.00
To Whom Paid FRIENDS OF TRACY PENNYC	PA CUICK 182 State	17101 Zip Code (Plus 4)	RENT M MO 6 Descript	AY DAY 1 tion of Exp	YEAR 2022	\$	5,000.00
To Whom Paid FRIENDS OF TRACY PENNYO Mailing Address PO BOX City LEDERACH	PA CUICK 182	17101	RENT M MO 6 Descript	AY DAY	YEAR 2022	\$	5,000.00
To Whom Paid FRIENDS OF TRACY PENNYC Mailing Address PO BOX	PA CUICK 182 State	17101 Zip Code (Plus 4)	RENT M MO 6 Descript	AY DAY 1 tion of Exp	YEAR 2022	\$	5,000.00
To Whom Paid FRIENDS OF TRACY PENNYC Mailing Address PO BOX City LEDERACH To Whom Paid PMA PAC	PA CUICK 182 State	17101 Zip Code (Plus 4)	RENT M MO 6 Description CONTRI	AY DAY 1 tion of Exp BUTION	YEAR 2022 enditure	\$	
To Whom Paid FRIENDS OF TRACY PENNYO Mailing Address PO BOX City LEDERACH To Whom Paid PMA PAC	PA CUICK 182 State PA	17101 Zip Code (Plus 4)	RENT M MO 6 Descript CONTRI MO 6	AY DAY 1 tion of Exp BUTION DAY	YEAR 2022 enditure YEAR 2022		5,000.00
To Whom Paid FRIENDS OF TRACY PENNYO Mailing Address PO BOX City LEDERACH To Whom Paid PMA PAC Mailing Address 225 STA	PA CUICK 182 State PA TE STREET	17101 Zip Code (Plus 4) 19450	RENT M MO CONTRI MO MO MO Description MO O O O O O O O O O O O O O O O O O O O	AY DAY 1 tion of Exp BUTION DAY 2	YEAR 2022 enditure YEAR 2022		
To Whom Paid FRIENDS OF TRACY PENNYO Mailing Address PO BOX City LEDERACH To Whom Paid PMA PAC Mailing Address 225 STA	PA CUICK 182 State PA TE STREET State	17101 Zip Code (Plus 4) 19450 Zip Code (Plus 4)	RENT M MO Descript CONTRI MO 6 Descript CONTRI	AY DAY 1 1 tion of Exp BUTION DAY 2 tion of Exp BUTION	YEAR 2022 enditure YEAR 2022 enditure		
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To Whom Paid FRIENDS OF TRACY PENNYO Mailing Address PO BOX City LEDERACH To Whom Paid PMA PAC Mailing Address 225 STA City HARRISBURG To Whom Paid ATLAS & MIGHT LLC	PA CUICK 182 State PA TE STREET State	17101 Zip Code (Plus 4) 19450 Zip Code (Plus 4)	RENT M MO Descript CONTRI MO 6 Descript CONTRI	AY DAY 1 1 tion of Exp BUTION DAY 2 tion of Exp BUTION	YEAR 2022 enditure YEAR 2022 enditure		
To Whom Paid FRIENDS OF TRACY PENNYO Mailing Address PO BOX City LEDERACH To Whom Paid PMA PAC Mailing Address 225 STA City HARRISBURG To Whom Paid ATLAS & MIGHT LLC	PA CUICK 182 State PA TE STREET State PA	17101 Zip Code (Plus 4) 19450 Zip Code (Plus 4)	RENT M MO CONTRI MO G MO G MO G MO G	AY DAY 1 tion of Exp BUTION DAY 2 tion of Exp BUTION DAY DAY	YEAR 2022 enditure YEAR 2022 enditure YEAR 2022	\$	50,000.00
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To Whom Paid FRIENDS OF TRACY PENNYO Mailing Address PO BOX City LEDERACH To Whom Paid PMA PAC Mailing Address 225 STA City HARRISBURG To Whom Paid ATLAS & MIGHT LLC Mailing Address 1591 ST	PA CUICK 182 State PA TE STREET State PA ONEY MOUNTAIN WAY State State	17101 Zip Code (Plus 4) 19450 Zip Code (Plus 4) 17101 Zip Code (Plus 4)	RENT M MO CONTRI MO MO MO Oescript CONTRI MO G Descript CONTRI MO G Descript CONTRI MO G Descript CONSUIT	AY DAY 1 tion of Exp BUTION DAY 2 tion of Exp BUTION DAY 1 tion of Exp LTING	YEAR 2022 enditure YEAR 2022 enditure 2022 enditure	\$	50,000.00
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To Whom Paid FRIENDS OF TRACY PENNYO Mailing Address PO BOX City LEDERACH TO Whom Paid PMA PAC Mailing Address 225 STA City HARRISBURG TO Whom Paid ATLAS & MIGHT LLC Mailing Address 1591 ST City DAUPHIN TO Whom Paid C&J CATERING	PA CUICK 182 State PA TE STREET State PA ONEY MOUNTAIN WAY State PA	17101 Zip Code (Plus 4) 19450 Zip Code (Plus 4) 17101 Zip Code (Plus 4)	RENT M MO MO Description CONTRI MO Obscription CONTRI MO Obscription CONTRI MO Obscription CONTRI MO MO MO Obscription CONSULT MO G Obscription CONSULT MO G Obscription CONSULT	AY DAY 1 1 tion of Exp BUTION DAY 2 tion of Exp BUTION DAY 1 tion of Exp LTING DAY	YEAR 2022 enditure 2022 enditure YEAR 2022 enditure	\$	50,000.00

PAGE	13
	10

\$

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.