Campaign Finance Report

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

| Filer Identification 20170358 Number : | | | | | | port | | CANDI | DATE | | СОМ | 1ITTEE | ✓ | LOB | BYIST | | |
|---|---------------------------------|--------------|-------------------------------|-----------------------------|----------|-------|----------------|--------------|----------|--------|--------------------|--------------------|----------------|----------|-----------|----------|--------------|
| Name of Filing C | Committee, Candid | date or L | obbyist: | | COM | 1МО | NWE | ALTH LEA | DERS | FUNE |) | | | | | | _ |
| Street Address: | 420 N 3RD S | TREET | | | | | | | | | | | | | | | |
| City: | HARRISBURG | i | | | | | | State: | PA | | | Zip Cod | le: 1 | 7101 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRE- 2. PRIMARY | | | | 30 DA PRIMA | | POST- 3. | | | AMENDM REPORT? | | Yes | No | • | |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. X | | | | 30 DA | | POST- 6. | | | TERMINA REPORT? | | Yes | No | • | / | |
| report type) | ANNUAL REPORT | 7. | Year 2022 | FILING METHOD () CHECK ONE | | | | | | PAPER | | / | DISKE | TTE | | | |
| Name of Office S | Sought by Candida | nte: | - | | | | | DATE O | F ELE | CTIO | N | District Number | Office Code | Par | ty Code | Count | ty |
| | | | | | | | | МО | DAY | YE | AR | Number | Code | | | couc | |
| | | | | | | | | 11 | | 8 | 2022 | | (SEE IN | ISTRUCTI | ONS FOR (| CODES) | |
| Summary of Expenditures | Receipts and | МО | DAY | YEAR | L | | | МО | DAY | YI | EAR | FO | R OFFI | CE USE | ONLY | | |
| Expenditures | | | 6 7 | 2 | 022 | Т | 0 | 9 | : | 19 | 2022 | | | | | | |
| A. Amount Bro | ught Forward Fro | m Last R | eport | | | | \$ | | 1, | 499,0 | 21.27 | | | | | | |
| B. Total Monet | ary Contributions | And Rec | eipts (From | Sche | dule | · I) | \$ | | 3, | 531,7 | 788.80 | | | | | | |
| C. Total Funds | Available (Sum O | f Lines A | and B) | | | | \$ | | 5, | 030,8 | 310.07 | | | | | | |
| D. Total Expen | ditures (From Sch | edule II | I) | | | | \$ | | 4, | 757,4 | 45.13 | | | | | | |
| E. Ending Cash | Balance (Subtrac | t Line D | From Line (| C) | | | \$ | | 2 | 273,3 | 65.26 | | | | | | |
| F. Value Of In- | Kind Contribution | s Receiv | ed (From Se | chedu | le II | :) | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | ts And Obligations | (From | Schedule IV |) | | | \$ | | | | 0.00 | | | • | | | |
| | | | | AFF | IDA | \VI | T SE | CTION | | | | | | | | | |
| | s a Committee rep | | _ | | | | | | - | | | | | | | | |
| I swear (or affirm) correct and comple |) that this report, inc ete. | cluding the | e attached scl | nedule | s filed | d on | paper | or by electi | ronic m | edium | , are to t | he best o | f my kno | wledge | and beli | ef , tru | ie, |
| Sworn to and subs | cribed before me thi day of | is | 20 | | | | | | | S | ignature | of Perso | n Submit | ting Re | oort | | - |
| | - Cianata | | | | | | - | | | | | Prin | ted Nam | e | | | - |
| My Commission Ex | Signatı opires | C | | | | | | , | | | | Ema | il | | | | - |
| | МО | D | AY | YR | | | _ | | Are | ea Cod | le | Daytim | e Telepi | none Nu | mber | | - |
| Part II- If this is | a report of a can | didate's | authorized | Comn | nitte | e, C | andid | ate shall : | sign he | ere. | | | | | | | ī |
| I swear (or affirm) No 320) as amende | that to the best of ed. | my knowl | edge and beli | ef this | polit | tical | comm | ittee has n | ot viola | ted an | y provis | ions of the | e act of J | une 3,1 | 937 (P.L | . 1333 | , |
| Sworn to and subsc | ribed before me this | ; | | | | | | | | | S | ignature o | of Candid | ate | | | - |
| | day of | | | | | | _ | | | | | Drinto | d Name | | | | - |
| | Signature | | | | | | - | | | | | Frinte | u Name | | | | |
| My Commission Exp | _ | | | | | | | | | | | Ema | il | | | | ⁻ |
| | МО | D | AY | YR | 1 | | - | | Area | Code | | Da | aytime 1 | elephor | ne Numb | er | |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| · - | | | | |
|--|-----------|----------|--------------|--------------|
| Name of Filing Committee or Candidate | Reporting | y Period | | |
| COMMONWEALTH LEADERS FUND | From: | 6/7/202 | <u>2</u> To: | 9/19/2022 |
| 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) | | | \$ | 550.00 |
| TOTAL for the Reporting |) Period | (2) | \$ | 550.00 |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 3,500,000.00 |
| All Other Contributions (Part D) | | | \$ | 21,000.00 |
| TOTAL for the Reporting | Period | (3) | \$ | 3,521,000.00 |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) | | | | |
| TOTAL for the Reporting |) Period | (4) | \$ | 1,238.80 |
| 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 | | | \$ | 3,522,788.80 |

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 | | | | |
|---------------------------------------|-------|-------------------|------|------------------|------|----|--------|--|
| | | F | rom: | | То | : | | |
| | | • | | DATE | | | AMOUNT | |
| Full Name of Contributing Commit | ttee | | мо | DAY | 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 o | or Candidate | | Reporting P | eriod | | |
|---|---------------|-------------------|-------------|-------|-----------------|------------------|
| COMMONWEALTH LEADERS | S FUND | | From: | 6/7/ | 2022 T o | 9/19/2022 |
| | | | | DATE | | AMOUNT |
| Full Name of Contributor | | | МО | DAY | YEAR | |
| BILL HOFFMAN | | | | | | |
| | MMAR RD | | | | | \$ 100.00 |
| City WILLIAMSPORT | State | Zip Code (Plus 4) | 6 | 16 | 2022 | |
| | PA | 17701 | | | | |
| Full Name of Contributor | | | МО | DAY | YEAR | |
| BILL HOFFMAN | | | | | | |
| Mailing Address 248 GRA City WILLIAMSPORT | MMAR RD State | Zip Code (Plus 4) | 6 | 29 | 2022 | \$ 50.00 |
| WILLIAMSFORT | PA | 17701 | | | 2022 | |
| | 170 | 17701 | | | | |
| Full Name of Contributor BILL HOFFMAN | | | МО | DAY | YEAR | |
| | MMAR RD | | | | | \$ 100.00 |
| City WILLIAMSPORT | State | Zip Code (Plus 4) | 7 | 18 | 2022 | 100.00 |
| , | PA | 17701 | | | | |
| Full Name of Contributor | <u> </u> | • | | | | |
| BILL HOFFMAN | | | МО | DAY | YEAR | |
| Mailing Address 248 GRA | MMAR RD | | | | | \$ 50.00 |
| City WILLIAMSPORT | State | Zip Code (Plus 4) | 7 | 29 | 2022 | |
| | PA | 17701 | | | | |
| Full Name of Contributor | - | • | | | | |
| BILL HOFFMAN | | | МО | DAY | YEAR | |
| Mailing Address 248 GRA | MMAR RD | | | | | \$ 100.00 |
| City WILLIAMSPORT | State | Zip Code (Plus 4) | 8 | 18 | 2022 | |
| | PA | 17701 | | | | |
| Full Name of Contributor | | • | | | | |
| BILL HOFFMAN | | | МО | DAY | YEAR | |
| Mailing Address 248 GRA | MMAR RD | | | | | \$ 50.00 |
| City WILLIAMSPORT | State | Zip Code (Plus 4) | 8 | 29 | 2022 | |
| | PA | 17701 | | | | |

| Full Name of Contributor | | | мо | DAY | YEAR | |
|--------------------------|--------|-------------------|----|-----|------|-----------|
| BILL HOFFMAN | | | | | | |
| Mailing Address 248 GRAM | MAR RD | | | | | \$ 100.00 |
| City WILLIAMSPORT | State | Zip Code (Plus 4) | 9 | 16 | 2022 | |
| | PA | 17701 | | | | |

PAGE TOTAL \$ 550.00

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 | | | Reporting Period | | | | | |
|---------------------------------------|-------|---------|------------------|---------------------|-----|-------|------------------------|--|
| COMMONWEALTH LEADERS FUND | | | From: | 6/7/2022 To: | | | 9/19/2022 | |
| | | | | | TE | | AMOUNT | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | |
| COMMONWEALTH CHILDREN'S CHOICE | FUND | | | | | | \$ 2,500,000.00 | |
| Mailing Address 420 N 3RD STREET | | | | 7 | 14 | 2022 | | |
| City HARRISBURG | State | Zip Cod | e (Plus 4) | | | 2022 | | |
| | PA | 17101 | | | | | | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | |
| COMMONWEALTH CHILDREN'S CHOICE | FUND | | | | 57 | 12/11 | \$ 1,000,000.00 | |
| Mailing Address 420 N 3RD STREET | | | | 7 | 21 | 2022 | | |
| City HARRISBURG | State | Zip Cod | e (Plus 4) |] | | | | |
| | PA | 17101 | | | | | | |

 $\label{lem:enter-constraint} \textbf{Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.}$

PAGE TOTAL \$ 3,500,000.00

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 Re | | | | | eporting Period | | | | | |
|--|--------------------------------|------------------------------|-------|---------------------|-----------------|------------------|-------------------------|-----------------------|--|--|
| COMMONWEALTH LEADERS FUND Fro | | | Froi | rom: <u>6/7/202</u> | | | 22 To: 9/19/2022 | | | |
| | | | | DA | ATE | | | AMOUNT | | |
| Full Name of Contributor KIRK LIDDELL | | | | мо | DAY | YEAR | \$ | 20,000.00 | | |
| Mailing Address 175 RIVERHILL RD | | | | 7 | 1 | 2022 | | | | |
| City CONESTOGA | State | Zip Code (Pl | ıs 4) | | _ | | | | | |
| | PA | 17516 | | | | | | | | |
| Employer Name RETIRED | | | | Occupat | tion | | | | | |
| Employer Mailing Address/Principal Plac | e of Business | City | | | State | | Zip C | Code (Plus 4) | | |
| | | | | | | | | | | |
| Full Name of Contributor | | | | мо | DAY | YEAR | \$ | 1,000.00 | | |
| JEFF KENDALL | | | | МО | DAY | YEAR | \$ | 1,000.00 | | |
| JEFF KENDALL Mailing Address 515 EAST DRIVE | State | Zin Code (Pl | ıs 4) | мо | DAY 12 | YEAR 2022 | 1 | 1,000.00 | | |
| JEFF KENDALL | State PA | Zip Code (Pl | ıs 4) | | | | 1 | 1,000.00 | | |
| JEFF KENDALL Mailing Address 515 EAST DRIVE City SEWICKLEY | PA | Zip Code (Pl 15143 | us 4) | | 12 | 2022 | | 1,000.00 IRECTOR | | |
| JEFF KENDALL Mailing Address 515 EAST DRIVE | PA ARTNERS | . , | ıs 4) | - 9 | 12 | 2022 | ING D | , | | |
| JEFF KENDALL Mailing Address 515 EAST DRIVE City SEWICKLEY Employer Name LAUREL MOUNTAIN PA | PA ARTNERS | 15143 | | - 9 | 12 | 2022 | ING D | IRECTOR Code (Plus 4) | | |
| JEFF KENDALL Mailing Address 515 EAST DRIVE City SEWICKLEY Employer Name LAUREL MOUNTAIN PA Employer Mailing Address/Principal Place | PA ARTNERS e of Business | City PITTSBU | RGH | 9 Occupat | 12 | 2022 | NG D. Zip C 1522 | IRECTOR Code (Plus 4) | | |

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 Reporti | | | | | rting Period | | | | |
|---|-------|------------|---------|----|--------------|--------------|----------|-----------|--|
| COMMONWEALTH LEADERS FUND | | | From: | | 6/7/202 | <u>2</u> To: | <u>.</u> | 9/19/2022 | |
| | | | | D | ATE | | ΙA | MOUNT | |
| Full Name FIRST NATIONAL BANK OF PA | | | | мо | DAY | YEAR | \$ | 622.68 | |
| Mailing Address 110 N 2ND STREET | T | | | 6 | 30 | 2022 | | | |
| City HARRISBURG | State | Zip Code (| Plus 4) | | | | | | |
| | PA | 17102 | | | | | | | |
| Receipt Description INTEREST EARN | ED | • | | | | | | | |
| Full Name | | | | мо | DAY | YEAR | \$ | 408.66 | |
| FIRST NATIONAL BANK OF PA | | | | | 57(1 | . = , | * | 400.00 | |
| Mailing Address 110 N 2ND STREET | T | | | 7 | 31 | 2022 | | | |
| City HARRISBURG | State | Zip Code (| Plus 4) | | | | | | |
| | PA | 17102 | | | | | | | |
| Receipt Description INTEREST EARN | ED | • | | | | | | | |
| Full Name FIRST NATIONAL BANK OF PA | | | | МО | DAY | YEAR | \$ | 207.46 | |
| Mailing Address 110 N 2ND STREET | | _ | | 8 | 31 | 2022 | | | |
| City HARRISBURG | State | Zip Code (| Plus 4) | | | | | | |
| | PA | 17102 | | | | | | | |
| Receipt Description | • | · | | | | | | | |

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

PAGE TOTAL 1,238.80

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 LEADERS FUND | From: | <u>6/7/2022</u> To: | 9/19/2022 |
| 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, | | \$ | 0.00 |

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Ca | Reporting 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 Dart E | on Schodulo II. In Vi | nd Contributions Dotai | ilad Sum | mary Ba | ao [| | DACE TOTAL |
| Enter Grand Total of Part F Section 2. | on Schedule II, In-Ki | na contributions Detai | ileu Sun | шагу Ра | ge, | | PAGE TOTAL |
| | | | | | | \$ | 0.00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | Name of Filing Committee or Candidate | | | | | 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 | | | | | Occup | oation | | | | |
| Employer Mailing Address/Principal Pla | ce of Business | Cit | ty | Stat | e Zij | p Code(Plus 4) | Descr | iptio | n of Contribution | on |
| Enter Grand Total of Part G on Sch | edule II. In-K | ind | Contributions D | etaile | ed | | | | PAGE TOT | ΓAL |
| Summary Page, Section 3. | | | | | - | | | | | 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting Per | riod | | |
|---------------------------------------|---------------|----------|-----|-----------|
| COMMONWEALTH LEADERS FUND | From | 6/7/2022 | То: | 9/19/2022 |

| | | | DATE | | | | AMOUNT | | |
|---|------------------|-------------------|----------------------------|----------------------------|----------|----|--------------|--|--|
| To Whom Paid | | | мо | DAY | YEAR | | | | |
| COMMONWEALTH PARTNERS CHAMI | BER OF ENTREPREN | NEURS | 1-10 | | I Z/IIX | | | | |
| Mailing Address 420 N 3RD STREET | | | 7 | 28 | 2022 | \$ | 31,227.98 | | |
| City HARRISBURG | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | PA | 17101 | ADMINI | STRATOR | APRIL-JU | LY | | | |
| To Whom Paid | | | | DAY | YEAR | | | | |
| DEBEE CLARK, PLLC | | | МО | | I ZAIR | | | | |
| Mailing Address PO BOX 54949 | | | 7 | 5 | 2022 | \$ | 2,000.00 | | |
| City OKLAHOMA CITY | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | LEGAL FEES | | | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | |
| COMMONWEALTH ENTREPRENEURS | , LLC | | М | | IZAK | | | | |
| Mailing Address 420 N 3RD STRE | ET | | 8 | 4 | 2022 | \$ | 10,504.26 | | |
| CityHARRISBURGStateZip Code (Plus 4)PA17101 | | | | Description of Expenditure | | | | | |
| | | | | RENT JUNE-AUGUST | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | |
| ATLAS & MIGHT LLC | | | M | | IZAK | | | | |
| Mailing Address 1591 STONEY MOUNTAIN WAY | | | 7 | 14 | 2022 | \$ | 3,500,000.00 | | |
| City DAUPHIN | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | PA | 17018 | CABLE TV BUY | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | |
| ATLAS & amp; MIGHT LLC | | | М | | ILAK | | | | |
| Mailing Address 1591 STONEY MOUNTAIN WAY | | | 7 | 18 | 2022 | \$ | 21,385.00 | | |
| City DAUPHIN | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | ı | | | |
| | PA | 17018 | SURVEY | , | | | | | |
| To Whom Paid | | | | DAY | YEAR | | | | |
| ATLAS & amp; MIGHT LLC | | | МО | DAT | TEAR | | | | |
| Mailing Address 1591 STONEY MOUNTAIN WAY | | | 7 | 21 | 2022 | \$ | 1,000,000.00 | | |
| City DAUPHIN | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | PA | 17018 | TV BUY | | | | | | |
| | | | 1 | | | | | | |

| | | | | | | | | FAGE 13 | | |
|---|--------------------------|-----------|----------------------------|----------------------------|-------------|----------|-----------|---------------|--|--|
| To Whom Paid | | | | МО | DAY | YEAR | | | | |
| ATLAS & MIGHT LLC | | | | | | | | | | |
| Mailing A | Address 1591 STONEY MOU | NTAIN WAY | | 8 | 9 | 2022 | \$ | 1,000,000.00 | | |
| City [| DAUPHIN | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| PA 17018 | | | | | DIGITAL | | | | | |
| To Whon | m Paid | | | МО | DAY | YEAR | | | | |
| DEBEE CLARK, PLLC | | | | | | | | | | |
| Mailing Address PO BOX 54949 | | | 8 | 9 | 2022 | \$ | 2,000.00 | | | |
| City (| OKLAHOMA CITY | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | |
| | | ОК | 73154 | LEGAL F | EES | | | | | |
| To Whon | m Paid | | | МО | DAY | YEAR | | | | |
| CHURCH | HILL STRATEGIES | | | | | | | | | |
| Mailing A | Address 23 N FRONT STREE | T | | 8 | 18 | 2022 | \$ | 1,500.00 | | |
| City HARRISBURG State Zip Code (Plus 4) | | | Description of Expenditure | | | | | | | |
| | | PA | 17101 | LOGO B | | | | | | |
| To Whon | m Paid | | | МО | DAY | YEAR | | | | |
| MCRC | | | | | | | | | | |
| Mailing Address 860 PENLLYN BLUE BELL PIKE | | | 9 | 13 | 2022 | \$ | 10,000.00 | | | |
| City E | BLUE BELL | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | | PA | 19422 | CONTRIBUTION | | | | | | |
| To Whom Paid | | | МО | DAY | YEAR | | | | | |
| FIRST NATIONAL BANK OF PA | | | | | | | | | | |
| Mailing Address 110 N 2ND STREET | | | 9 | 10 | 2022 | \$ | 69.29 | | | |
| City | HARRISBURG | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | | PA | 17102 | BANK F | EES | | | | | |
| To Whon | m Paid | | | МО | DAY | YEAR | | | | |
| ATLAS & | kamp; MIGHT LLC | | | | | | | | | |
| Mailing A | Address 1591 STONEY MOU | NTAIN WAY | | 9 | 13 | 2022 | \$ | 6,295,860.00 | | |
| City [| DAUPHIN | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| PA 17018 | | | | PRODUCTION OF ADS | | | | | | |
| To Whom Paid | | | | МО | DAY | YEAR | | | | |
| ATLAS & amp; MIGHT LLC | | | | | | | | | | |
| Mailing Address 1591 STONEY MOUNTAIN WAY | | | | 8 | 9 | 2022 | \$ | 13,800.00 | | |
| City [| DAUPHIN | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | PA 17018 SURVEY | | | | | | | | | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | | | PAGE TOTAL | | |
| Lines Stand Total of Experiences of rage 1, Report Cover rage, Item D. | | | | | | | \$ | 11,888,346.53 | | |