

Commonwealth of Pennsylvania

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 : 20170358		Report Filed By :	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST					
Name of Filing Committee, Candidate or Lobbyist: COMMONWEALTH LEADERS FUND										
Street Address: 420 N 3RD STREET										
City: HARRISBURG			State: PA	Zip Code: 17101						
TYPE OF REPORT (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	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2022	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
				MO	DAY	YEAR				
				11	8	2022	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		9	20	2022	TO	10	24	2022		
A. Amount Brought Forward From Last Report				\$		273,365.26				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		265,247.64				
C. Total Funds Available (Sum Of Lines A and B)				\$		538,612.90				
D. Total Expenditures (From Schedule III)				\$		513,717.70				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		24,895.20				
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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
COMMONWEALTH LEADERS FUND	From: <u>9/20/2022</u> To: <u>10/24/2022</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)	\$ 50.00
TOTAL for the Reporting Period (2)	\$ 50.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 200,000.00
All Other Contributions (Part D)	\$ 65,000.00
TOTAL for the Reporting Period (3)	\$ 265,000.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 197.64

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.)	\$ 265,247.64
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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
	From: _____ To: _____
DATE AMOUNT	

Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

PART B
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 Candidate	Reporting Period
COMMONWEALTH LEADERS FUND	From: <u>9/20/2022</u> To: <u>10/24/2022</u>

				DATE	AMOUNT
Full Name of Contributor			MO	DAY	YEAR
BILL HOFFMAN					
Mailing Address 248 GRAMMAR RD					\$ 50.00
City WILLIAMSPORT	State	Zip Code (Plus 4)	9	29	2022
	PA	17701			

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

PAGE TOTAL
\$ 50.00

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 COMMONWEALTH LEADERS FUND	Reporting Period From: <u>9/20/2022</u> To: <u>10/24/2022</u>
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	DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
COMMONWEALTH CHILDREN'S CHOICE FUND				\$ 200,000.00
Mailing Address 420 N 3RD STREET	10	19	2022	
City HARRISBURG				
State PA				
Zip Code (Plus 4) 17101				

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

PAGE TOTAL
\$ 200,000.00

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 COMMONWEALTH LEADERS FUND	Reporting Period From: <u>9/20/2022</u> To: <u>10/24/2022</u>
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				DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR				
RICHARD & SHARON DANDREA				\$ 12,500.00			
Mailing Address 314 SCENIC COURT	9	20	2022				
City ALLISON PARK							
State PA							
Zip Code (Plus 4) 15101							
Employer Name ECKERT SEAMANS				Occupation	MEMBER		
Employer Mailing Address/Principal Place of Business 600 GRANT ST.44TH FL	City PITTSBURGH		State PA	Zip Code (Plus 4) 15219			
DONALD & AMY SMITH				\$ 50,000.00			
Mailing Address 4062 YORK RD	9	28	2022				
City NEW OXFORD							
State PA							
Zip Code (Plus 4) 17350							
Employer Name CONEWAGO ENTERPRISES				Occupation	PRESIDENT		
Employer Mailing Address/Principal Place of Business 660 EDGE GROVE RD	City HANOVER		State PA	Zip Code (Plus 4) 17331			
LATHROP B. NELSON, JR.				\$ 2,000.00			
Mailing Address 13 COURTNEY CIRCLE	9	30	2022				
City BRYN MAWR							
State PA							
Zip Code (Plus 4) 19010							
Employer Name RETIRED				Occupation			
Employer Mailing Address/Principal Place of Business	City		State	Zip Code (Plus 4)			
JOSEPH WAGMAN				\$ 500.00			
Mailing Address 975 SUMMIT CIRCLE N	10	13	2022				
City YORK							
State PA							
Zip Code (Plus 4) 17403							
Employer Name WAGMAN CONSTRUCTION				Occupation	CHAIRMAN & CEO		
Employer Mailing Address/Principal Place of Business 231 N GEORGE ST	City YORK		State PA	Zip Code (Plus 4) 17401			

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

PAGE TOTAL
\$ 65,000.00

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 Candidate COMMONWEALTH LEADERS FUND	Reporting Period From: <u>9/20/2022</u> To: <u>10/24/2022</u>
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				DATE	AMOUNT		
Full Name				MO	DAY	YEAR	\$
FIRST NATIONAL BANK OF PA				9	30	2022	197.64
Mailing Address 110 N 2ND STREET							
City HARRISBURG	State PA	Zip Code (Plus 4) 17102					
Receipt Description INTEREST EARNED							

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

PAGE TOTAL
\$ 197.64

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 COMMONWEALTH LEADERS FUND	Reporting Period From: <u>9/20/2022</u> To: <u>10/24/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
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
	From: _____ To: _____

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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.				PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period From: _____ To: _____
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Mailing Address				\$	0.00
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	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
COMMONWEALTH LEADERS FUND	From <u>9/20/2022</u> To: <u>10/24/2022</u>

				DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR		
ATLAS & MIGHT LLC	10	10	2022	\$	24,580.00
Mailing Address 1591 STONEY MOUNTAIN WAY					
City DAUPHIN					
State PA					
Zip Code (Plus 4) 17018					
Description of Expenditure SURVEY & VIDEO EDITING					
To Whom Paid	MO	DAY	YEAR		
COMMONWEALTH PARTNERS CHAMBER OF ENTREPRENEURS					
Mailing Address 420 N 3RD STREET	10	13	2022	\$	14,681.62
City HARRISBURG					
State PA					
Zip Code (Plus 4) 17101					
Description of Expenditure ADMINISTRATION					
To Whom Paid	MO	DAY	YEAR		
FIRST NATIONAL BANK OF PA					
Mailing Address 110 N 2ND STREET	10	10	2022	\$	69.29
City HARRISBURG					
State PA					
Zip Code (Plus 4) 17102					
Description of Expenditure BANK FEES					
To Whom Paid	MO	DAY	YEAR		
ATLAS & MIGHT LLC					
Mailing Address 1591 STONEY MOUNTAIN WAY	10	19	2022	\$	345,300.00
City DAUPHIN					
State PA					
Zip Code (Plus 4) 17018					
Description of Expenditure VIDEO EDITS, MAILERS, BROADCAST TV					
To Whom Paid	MO	DAY	YEAR		
COMMONWEALTH ENTREPRENEURS, LLC					
Mailing Address 420 N 3RD STREET	10	11	2022	\$	7,002.84
City HARRISBURG					
State PA					
Zip Code (Plus 4) 17101					
Description of Expenditure RENT SEPT/OCT					
To Whom Paid	MO	DAY	YEAR		
DEBEE CLARK PLLC					
Mailing Address PO BOX 54949	10	11	2022	\$	2,000.00
City OKLAHOMA CITY					
State OK					
Zip Code (Plus 4) 73154					
Description of Expenditure LEGAL FEES					

To Whom Paid PA FAMILY PAC			MO	DAY	YEAR	\$ 60,000.00
Mailing Address 23 N FRONT ST			10	19	2022	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CONTRIBUTION			
To Whom Paid ATLAS & MIGHT LLC			MO	DAY	YEAR	\$ 10,153.70
Mailing Address 1591 STONEY MOUNTAIN WAY			10	24	2022	
City DAUPHIN	State PA	Zip Code (Plus 4) 17018	Description of Expenditure VIDEO EDITING			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 463,787.45

