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 :					Report Filed By :		CANDI	DATE COMM		MITTEE		LOBBYIST						
Name of Filing C	Committee, C	andida	ite or Lo	obbyist:		COM	1MO	NWEA	ALTH LEA	DERS	FUND)		•				
Street Address:	420 N 3I	RD ST	REET															
City:	HARRISE	BURG							State: PA			Zip Cod	de: 1	7101				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRIDA' PRIMARY	ND FRIDAY PRE- 2. PRIMARY			30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTIO		4.	2ND FRIDA' ELECTION	y pre	Ē	5. X	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	•	/
report type)	ANNUAL REI	PORT	7.	Year 2022				FILING METHOD () CHECK ONE			PAPER		/	DISKE	TTE			
Name of Office S	Sought by Car	ndidat	e:						DATE O	OF ELECTION			District Number	Office Code	Pai	rty Code	Count	ty
	MO DAY YEAR						Number	Code			code							
									11		8	2022		(SEE IN	ISTRUCTI	ONS FOR	CODES)	
Summary of Expenditures		nd	МО	DAY	YEAR	L		_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
				9 20	2	022	Т	o	10	:	24	2022						
A. Amount Brought Forward From Last Report \$ 273,365.26								865.26										
B. Total Monetary Contributions And Receipts (From Schedule I)						\$			265,2	247.64								
C. Total Funds Available (Sum Of Lines A and B)						\$,	538,6	12.90								
D. Total Expen	ditures (Fron	m Sche	dule II	[)				\$!	513,7	17.70						
E. Ending Cash Balance (Subtract Line D From Line C)					\$			24,8	95.20									
F. Value Of In-Kind Contributions Received (From Schedule II))	\$				0.00									
G. Unpaid Debt	ts And Obliga	ations ((From S	chedule IV)			\$				0.00			•			
					AFF	IDA	VI	ΓSE	CTION									
PART I - If this is		-	-	_						-		_						
I swear (or affirm) correct and comple		ort, inclu	iding the	attached scl	nedule	s filed	d on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , tru	ie.
Sworn to and subs	cribed before r day of	me this		20							s	ignature	of Perso	n Submit	ting Re	port		_
		`: -						-					Prin	ted Nam	e			-
My Commission Ex		Signatur	-										Ema	il				-
	мо		DA	ΛΥ	YR			-		Are	ea Cod	e	Daytim	e Telepi	none Nu	mber		_
Part II- If this is	a report of a	a cand	idate's	authorized	Comn	nitte	e, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende		est of m	y knowle	edge and beli	ef this	polit	ical	commi	ittee has n	ot viola	ted an	y provisi	ions of the	e act of J	une 3,1	937 (P.L	. 1333	,
Sworn to and subsc	ribed before m	ne this										Si	ignature o	of Candid	ate			-
	day of							-					Printa	d Name				-
	Sign	ature						-					Finite	.a maine				
My Commission Exp	_												Ema	il				_
	М	10	DA	λΥ	YR	l		•		Area	Code		Da	aytime T	elephor	ne Numb	er	·

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
COMMONWEALTH LEADERS FUND	From:	9/20/202	<u>2</u> To:	10/24/2022
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)	\$	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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	265,247.64

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-					
Name of Filing Comm	Name of Filing Committee or Candidate			Reporting Period						
			Fre	om:		То	:			
		1			DATE			AMOUNT		
Full Name of Contribution	ng Committee			МО	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4))							
	•	•			•	•		PAGE TOTAL		

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

0.00

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 Candidate Reporting Period

COMMONWEALTH LEADERS FUND

From: 9/20/2022 To:

10/24/2022

				DATE		AMOUNT
Full Name of Contributor BILL HOFFMAN				DAY	YEAR	
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	Reporting Period							
COMMONWEALTH LEADERS FUND	From:	9/20/2022	То:	10/24/2022				

DATE AMOUNT

Full Name of Contributing Committee COMMONWEALTH CHILDREN'S CHOICE FUND				DAY	YEAR	
Mailing Address 420 N 3RD STREET						\$ 200,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	10	19	2022	

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

PAGE TOTAL
200,000.00

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				Rep	orting Pe	riod				
COMMONWEALTH LEADERS FUND				Fron	n:	9/20/2	<u>022</u> To	o: <u>'</u>	<u>10/24/2022</u>	
					DA	ATE	АМ	AMOUNT		
Full Name of Contributor JOSEPH WAGMAN					мо	DAY	YEAR			
Mailing 975 SUMMIT CIRCLE	N							\$	500.00	
City YORK	State	Zi	p Code (Plus	4)	10	13	2022	2		
•	PA	17	7403							
Employer Name WAGMAN CONSTRUC	TION				Occupat	ion (HAIRM	AN &	CEO	
Employer Mailing Address/Principal Place Business	e of		City		•	State		Zip Code	(Plus 4)	
231 N GEORGE ST YORK			PA			17401				
Full Name of Contributor LATHROP B. NELSON, JR.					МО	DAY	YEAR			
Mailing 13 COURTNEY CIRCL	Ē							\$	2,000.00	
City BRYN MAWR	State	Ziį	p Code (Plus	· 4)	9	30	2022	2		
	PA	19	9010							
Employer Name RETIRED					Occupat	ion				
Employer Mailing Address/Principal Place Business	e of		City		1	State		Zip Code	(Plus 4)	
business										
Full Name of Contributor										
DONALD & AMY SMITH					МО	DAY	YEAR			
Mailing 4062 YORK RD								\$	50,000.00	
City NEW OXFORD	State	Ziį	p Code (Plus	4)	9	28	2022	2		
	PA	17	7350							
Employer Name CONEWAGO ENTERPRISES			Occupation PRESIDENT							
Employer Mailing Address/Principal Place of Business City				•	State		Zip Code (Plus 4)			
660 EDGEGROVE RD HANOVER				PA		17331				

Full Name of Contributor RICHARD & DANDREA	мо	DAY	YEAR				
Mailing 314 SCENIC COURT						\$ 12,500.00	
City ALLISON PARK	State PA	Zip Code (Plus 4) 15101	9	20	2022		
Employer Name ECKERT SEAMANS			Occupation MEMBER				
Employer Mailing Address/Principal Place of City Business			State			Zip Code (Plus 4)	
600 GRANT ST.44TH FL		PITTSBURGH		PA		15219	

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

PAGE TOTAL
\$ 65,000.00

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	Reporting Per		
COMMONWEALTH LEADERS FUND	From:	<u>9/20/2022</u> To:	10/24/2022

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

Name of Filing Committee or Candidate			Reporting Period				
			From:			То:	
				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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate			Reporting Period							
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion			
Employer Mailing Address/Principal Place of Business		City	State		Zip Code(Plus 4)		Descri	Description 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			Paparting Pariod							
Name of Filing Committee or Candidate				Reporting Period						
COMMONWEALTH LEADERS FUND				9/20	0/2022	То:	10/24/2022			
				DATE		AMOUNT				
To Whom Paid			МО	DAY	YEAR					
ATLAS & amp; MIGHT LLC	1.10									
Mailing Address 1591 STON	EY MOUNTAIN WAY		10	10	2022	\$	24,580.00			
City DAUPHIN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1				
BAGITIEN	PA	17018	SURVEY & amp; VIDEO EDITING							
To Whom Paid COMMONWEALTH PARTNERS (мо	DAY	YEAR							
Mailing Address 420 N 3RD	10	13	2022	\$	14,681.62					
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	Description of Expenditure						
PA 17101			ADMINISTRATION							
To Whom Paid FIRST NATIONAL BANK OF PA			МО	DAY	YEAR					
Mailing Address 110 N 2ND STREET				10	2022	\$	69.29			
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>				
	PA	17102	BANK F	EES						
To Whom Paid ATLAS & MIGHT LLC	·		МО	DAY	YEAR					
Mailing Address 1591 STONEY MOUNTAIN WAY				19	2022	\$	345,300.00			
City DAUPHIN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	PA	17018	VIDEO EDITS, MAILERS, BROADCAST TV							
To Whom Paid COMMONWEALTH ENTREPREN	EURS, LLC		МО	DAY	YEAR					
Mailing Address 420 N 3RD	STREET		10	11	2022	\$	7,002.84			
City HARRISBURG	State	Zip Code (Plus 4)	Descrir	tion of Exp	enditure	<u> </u>				
- HANNIGOUNG		1,7404	DEN'T S		, cii ai tui C					

17101

RENT SEPT/OCT

PA

To Whom Paid DEBEE CLARK PLLC			МО	DAY	YEAR		
Mailing Address PO BOX 5494	.9		10	11	2022	\$	2,000.00
City OKLAHOMA CITY	State OK	Zip Code (Plus 4) 73154	Descrip LEGAL	otion of Exp	penditure		
To Whom Paid PA FAMILY PAC			МО	DAY	YEAR		
Mailing Address 23 N FRONT	ST		10	19	2022	\$	60,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CONTRIBUTION				
To Whom Paid ATLAS & MIGHT LLC			МО	DAY	YEAR		
Mailing Address 1591 STONEY MOUNTAIN WAY			10	24	2022	\$	10,153.70
City DAUPHIN	State PA	Zip Code (Plus 4) 17018	Description of Expenditure VIDEO EDITING				
Enter Grand Total of Expendi	tures on Page 1 Re	enort Cover Page Item D					PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	463,787.45	