### **Campaign Finance Report**

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

Filer Identification 20220295 Number :						Repor Filed I		CA	NDI	DATE		СОМИ	4ITTEE	<b>✓</b>	LOB	BYIST			
Name of Filing Committee, Candidate or Lobbyist: PA						A ECC	)NOM	IC GR	CWO.	ГН РАС	2			·					
Street Address:																			
City:	YORK								Stat	e:	PA			Zip Cod	le: 17	403			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1						30 D PRIM		Р				AMENDM REPORT?	Yes	<b>√</b> N	0		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4	ł.	2ND F ELECT	RIDAY TION	PRE-	5.	30 D	AY TION	Р				TERMINA REPORT?	Yes	N	0	<b>\</b>	
report type)	ANNUAL REPO	ORT 7	<b>'</b> .	Year	2022					METHOD I			PAPER	<b>√</b>	DISK	ETTE			
Name of Office S	ought by Cand	didate	:				•		DAT	ΈO	F ELE	CTI	ON	District Number	Office Code	Par	ty Cod	Code	
									МО		DAY	Y	'EAR		•	DEI	1		
										11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES	5)
Summary of		d	МО	DA	Y ,	YEAR			МО		DAY	Y	'EAR	FO	R OFFIC	E USE	ONLY	,	
Expenditures	irom:		1	.0	25	20	22 <b>1</b>	ГО		11		28	2022						
A. Amount Bro	ught Forward I	From	Last R	eport				\$	i			92,	,435.76						
B. Total Moneta	ary Contributio	ons Ar	nd Reco	eipts (	From	Sched	ule I)	\$	5				100.00						
C. Total Funds	Available (Sun	n Of L	ines A	and B	3)			\$	5			92,	,535.76						
D. Total Expend	ditures (From	Sched	lule III	[)				\$	5				677.73						
E. Ending Cash	Balance (Subt	tract L	Line D	From	Line C	)		\$	5			91,	858.03						
F. Value Of In-	Kind Contribut	ions F	Receive	ed (Fr	om Scl	hedule	e II)	\$	5				0.00						
G. Unpaid Debt	s And Obligati	ons (I	From S	chedu	ıle IV)			\$	5				0.00						
						AFFI	DAV1	T SE	CTI	NC									
PART I - If this is		=	-		_								_						
I swear (or affirm) correct and comple		, includ	ding the	attach	ed sche	edules 1	filed on	paper	or by	electi	ronic m	ediun	n, are to t	the best o	f my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before me day of	e this		20									Signature	of Perso	n Submitt	ing Re <sub>l</sub>	oort		
	Sign	nature						_						Prin	ted Name				
My Commission Ex	xpires							_		•				Emai	il				
	МО		DA	Υ		YR					Are	ea Co	de	Daytim	e Teleph	one Nu	mber		ᆜ
Part II- If this is	a report of a	candio	date's	autho	rized C	Commi	ttee, (	Candid	late s	hall	sign he	ere.							
I swear (or affirm) No 320) as amende		of my	knowle	dge an	d belie	f this p	olitical	comn	nittee l	nas n	ot viola	ted a	ny provis	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before me	this		20									s	ignature o	of Candida	ite			_
·				-				_						Printe	d Name				-
My Commission Exp	Signat	ure						_						Ema	il				-
·								_											-
	МО		DA	ΑY		YR					Area	Code		Da	aytime Te	lephor	e Num	ber	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
PA ECONOMIC GROWTH PAC	10/25/202	<u>2</u> To:	11/28/2022	
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)			\$	100.00
TOTAL for the Reporting	Period	(2)	\$	100.00
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)	\$	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			\$	100.00

#### **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				Period			
		F	rom:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Com	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 or Candidate

**Reporting Period** 

PA ECONOMIC GROWTH PAC

From: <u>10/25/2022</u> To:

DATE

11/28/2022

AMOUNT

Full Name of Contributor RICK SMITH	мо	DAY	YEAR			
Mailing Address						<b>\$</b> 100.00
City YORK	State	Zip Code (Plus 4)	12	15	2022	
	PA	17402				

**PAGE TOTAL \$** 100.00

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				
			From:			То:		
				DA	TE		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							<b>-</b>   \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

## 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	Reporting Period				
			Fror	n:		To	):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	on 3.		:	\$	PAGE TOTAL 0.00

## 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	ing Peri	od			
			From:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<u>'</u>	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	4.			\$	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 Per	iod	
PA ECONOMIC GROWTH PAC	From:	<u>10/25/2022</u> <b>To:</b>	11/28/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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 Candidate Re			Reporting Period				
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>7</b> \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•		•	•	•		
Enter Grand Total of Part F on	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	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 Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

## STATEMENT OF EXPENDITURES

Name of Filing Committee	or Candidate		Reporti	ng Period				
PA ECONOMIC GROWTH P			From		<u>5/2022</u>	To:	11/28/2022	
TA LEGNOMIC GROWITT	AC .		110111	10/2.	3/2022	10.	11/20/2022	
				DATE			AMOUNT	
To Whom Paid			МО	DAY	YEAR			
INTUIT								
Mailing Address			12	7	2022	\$	31.80	
City MOUNTAIN VIEW	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	CA	94043	ACCOU	NTING SOF	TWARE			
To Whom Paid			МО	DAY	YEAR			
REAM PRINTING COMPANY	, INC.							
Mailing Address			12	15	2022	\$	209.88	
City YORK	y YORK State Zip Code (Plus 4)							
PA 17405				D HANDOL	JTS FOR	DALLASTO	OWN PARADE	
To Whom Paid				DAY	YEAR			
REAM PRINTING COMPANY								
Mailing Address			12	15	2022	\$	137.80	
City YORK	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	17405	PRINTE	D HANDOL	JTS FOR	DALLASTO	OWN PARADE	
To Whom Paid			МО	DAY	YEAR			
HERITAGE HILLS RESORT			1-10					
Mailing Address			12	15	2022	\$	195.30	
City YORK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
	PA	17402	SOUND	SYSTEM F	OR EDUC	CATIONAL	. EVENT	
To Whom Paid			МО	DAY	YEAR			
USPS			1-10		127110			
Mailing Address			12	16	2022	\$	83.00	
City YORK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	-		
	PA	17402	6-MONT	TH RENTAL	OF PO B	BOX		
To Whom Paid			МО	DAY	YEAR			
DEODI EC BANK			140		ILAK	l		

12

**NEW CHECKS** 

Zip Code (Plus 4)

17402

20

**Description of Expenditure** 

2022

PEOPLES BANK

**Mailing Address** 

YORK

State

PΑ

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

City

**PAGE TOTAL** 

19.95

677.73