# **Campaign Finance Report**

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

Filer Identificat Number :	<b>ion</b> 2016	0359			Repor Filed E		CANDI	IDATE		СОМІ	MITTEE	✓	LOBE	BYIST		
Name of Filing (	Committee, Candida	ate or L	obbyist:		WAGNE	R, SC	COTT FOR	R GOVE	RNOF	R, INC						
Street Address:	204 ST. CHAR	RLES W	AY SUITE F													
City:	YORK						State:	PA			Zip Co	<b>de:</b> 17	: 17402			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. <b>X</b>	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIM		POST-	3.		AMENDM REPORT		Yes	No	$\checkmark$	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 D ELEC	AY CTION	POST-	6.		TERMIN/ REPORT		Yes	✓ No		
report type)	ANNUAL REPORT	7.	<b>Year</b> 2023				NG METH				PAPER		$\checkmark$	DISKE	TTE	
Name of Office S	Sought by Candidat	te:	-			-	DATE C	OF ELE	СТІО	Ν	District Number	Office Code	Par	ty Code	County Code	
							мо	DAY	YE	AR	-1		REP		67	
							11		7	2023		(SEE INS	STRUCTIO	ONS FOR (	CODES)	
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YE	AR	FC	R OFFIC	E USE	ONLY		
Expenditures	s from:		1 1	2	023 <b>T</b>	0	2	2	8	2023						
A. Amount Bro	ught Forward Fron	n Last R	eport			\$	5		1,2	53.98						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$	5			0.00	-					
C. Total Funds	Available (Sum Of	Lines A	and B)			4	5		1,2	53.98						
D. Total Expen	ditures (From Sche	edule II	1)			\$	5		1,2	53.98						
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		4	5			0.00	-					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)	4	5	7,2	254,9	06.41	-					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)		4	5			0.00						
				AFF	IDAVI	T SE	CTION									
	s a Committee repo	•	-								-					
I swear (or affirm correct and compl	) that this report, incl ete.	uding the	e attached sc	hedules	s filed on	paper	or by elect	tronic m	edium,	, are to	the best o	f my knov	vledge	and beli	ef , true	
Sworn to and subs	scribed before me this day of	5	20						S	ignatur	e of Perso	n Submitt	ing Rep	oort		
	Signatu	re				-					Prin	ted Name				
My Commission E	xpires										Ema	il				
	мо	D	AY	YR				Ar	ea Cod	e	Daytim	ie Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nittee, C	andic	date shall	sign h	ere.							
I swear (or affirm) No 320) as amend	) that to the best of m ed.	ny knowl	edge and beli	ief this	political	comn	nittee has r	not viola	ted an	y provis	ions of th	e act of Ju	ine 3,19	937 (P.L	. 1333,	
Sworn to and subso	cribed before me this									s	ignature o	of Candida	ite			
	day of					_					Printe	ed Name				
	Signature					-										
My Commission Exp	pires										Ema					
	мо	D	AY	YR		-		Area	Code		D	aytime Te	elephon	e Numb	er	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** WAGNER, SCOTT FOR GOVERNOR, INC From: <u>1/1/2023</u> **To:** 2/8/2023 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PAGE 3

# 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	Reporting Period						
			From:		То	:	
				DATE			AMOUNT
Full Name of Contributing Con	mmittee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
						Γ	PAGE TOTAL

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

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 Candidat	e			orting P	eriod	_		
			Fro	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 S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	<u>.</u>		\$	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 Cand	Reporting Period							
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	led Summary 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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

## 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			Reporting Period						
Fro					From: To				
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$		0.00
City	State	Zip Code (	Plus 4)						
Receipt Description	•						-		
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	ſAL
		iiai y i uge,	Section				\$		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 Perio	d	
WAGNER, SCOTT FOR GOVERNOR, INC	From:	<u>1/1/2023</u> то:	<u>2/8/2023</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)	\$	7,254,906.41
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,		\$	7,254,906.41

# 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		АМО	UNT
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

PAGE 10

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

Name of Filing Committee or Candidate					Rep	porting P	'eriod			
WAGNER, SCOTT FOR GOVERNOR, INC	2				Fro	m:	<u>1/1/202</u>	<u>23</u> To:	23 To: <u>2/8/20</u>	
							DATE			AMOUNT
Full Name of Contributor Scott Wagner						мо	DAY	YEAR		
Mailing Address PO Box 1627									\$	10,000.00
City <sub>York</sub>	<b>State</b> PA		Zip Code(F 17405	Plus 4)		2	7	2023		
Employer of Contributor Retired						Occupat	tion F	Retired		
Employer Mailing Address/Principal Plac Business	e of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
PO Box 1627		York		PA		174	05	Red Ma	averio	ttled Remaining ck Media Debt. ed letter
Full Name of Contributor Scott Wagner						мо	DAY	YEAR		
Mailing Address PO Box 1627									\$	7,244,906.41
City <sub>York</sub>	<b>State</b> PA		Zip Code(F 17405	Plus 4)		2	7	2023		
Employer of Contributor Retired						Occupat	tion F	Retired		
Employer Mailing Address/Principal Plac Business	e of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
PO Box 1627		York		PA		174	105	Forgive campa attache	ign lo	s of all net bans. See ter.
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, I	n-Kind (	Contributi	ons De	taile	d				<b>PAGE TOTAL</b> 7,254,906.41

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candi	date		Reporti	ng Period			
WAGNER, SCOTT FOR GOVERNOR	, INC		From	<u>1/</u>	<u>1/2023</u>	То:	<u>2/8/2023</u>
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
M and T Bank							
Mailing Address One M&T Plaza			1	9	2023	\$	10.00
City Buffalo	State	Zip Code (Plus 4)	Descri	ption of Exp	oenditure		
	NY	14203	Bank F	Bank Fee			
To Whom Paid M and T Bank				DAY	YEAR		
Mailing Address One M&T Plaza			2 8 2023			\$	10.00
City Buffalo	State	Zip Code (Plus 4)	Descri	ption of Exp	oenditure		
	NY	14203	Bank F	ee			
To Whom Paid Jukus Campaign Finance PLLC			мо	DAY	YEAR		
Mailing Address 4031 Thicket La	ane		2	6	2023	\$	100.00
City Harrisburg	State	Zip Code (Plus 4)	Descri	ption of Exp	oenditure		
	PA	17110	Accour	nting and C	omplianc	e Service	1
<b>To Whom Paid</b> Scott Wagner			мо	DAY	YEAR		
Mailing Address PO Box 1627			2	6	2023	\$	1,133.98
City York	State	Zip Code (Plus 4)	Descri	ption of Exp	Denditure		
	PA	17405	Partial	payback o	f campai <u>c</u>	gn loans	
							PAGE TOTAL
Enter Grand Total of Expenditu	res on Page 1, R	eport Cover Page, Item	D.			\$	1,253.98