

# Campaign Finance Report

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

<b>Filer Identification Number :</b> 20220570		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>			
<b>Name of Filing Committee, Candidate or Lobbyist:</b> MEGAN MARTIN FOR PA											
<b>Street Address:</b> 1600 APPLETREE ROAD											
<b>City:</b> HARRISBURG					<b>State:</b> PA		<b>Zip Code:</b> 17110				
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1. <input checked="" type="checkbox"/>	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.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2023	<b>FILING METHOD ( ) CHECK ONE</b>		<b>PAPER</b> <input checked="" type="checkbox"/>		<b>DISKETTE</b>			
<b>Name of Office Sought by Candidate:</b>					<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
JUDGE OF THE COMMONWEALTH COURT					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	CCJ REP 22			
					11	7	2023	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>		
		1	1	2023		3	27	2023			
<b>A. Amount Brought Forward From Last Report</b>					\$		2,499.00				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>					\$		71,529.40				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>					\$		74,028.40				
<b>D. Total Expenditures (From Schedule III)</b>					\$		28,817.36				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>					\$		45,211.04				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>					\$		13,553.74				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>					\$		37,420.37				

## 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 of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
Detailed Summary Page

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MEGAN MARTIN FOR PA	From: <u>1/1/2023</u> To: <u>3/27/2023</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 325.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 250.00
<b>All Other Contributions (Part B)</b>	\$ 1,450.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 1,700.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 36,500.00
<b>All Other Contributions (Part D)</b>	\$ 32,500.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 69,000.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 204.40

<b>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.)</b>	\$ 71,229.40
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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.**

<b>Name of Filing Committee or Candidate</b>  MEGAN MARTIN FOR PA	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2023</u> <b>To:</b> <u>3/27/2023</u>
<b>DATE</b>	
<b>AMOUNT</b>	

<b>Full Name of Contributing Committee</b> BRAVO PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 20 NORTH MARKET STREET SUITE 800			3	16	2023	
<b>City</b> HARRISBURG	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  17101				

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

<b>PAGE TOTAL</b>
\$ 250.00

**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)**

<b>Name of Filing Committee or Candidate</b> MEGAN MARTIN FOR PA				<b>Reporting Period</b> From: <u>1/1/2023</u> To: <u>3/27/2023</u>			
				<b>DATE</b>		<b>AMOUNT</b>	

  

<b>Full Name of Contributor</b> SEAN C. CAMPBELL			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b> 124 SPANGLERS MILL ROAD			3	8	2023	
<b>City</b> NEW CUMBERLAND	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17070				

  

<b>Full Name of Contributor</b> THOMAS E. CHARLES			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 2421 COPE DRIVE			2	6	2023	
<b>City</b> MECHANICSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17055				

  

<b>Full Name of Contributor</b> JOHN H. EICEHLBERGER, JR			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 643 HILLSIDE VIEW DRIVE			2	6	2023	
<b>City</b> DUNCANSVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 166357455				

  

<b>Full Name of Contributor</b> BRADLEY JACOBS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b> 402 STONEGATE ROAD			2	11	2023	
<b>City</b> YORK	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17408				

  

<b>Full Name of Contributor</b> DONNA L. KREISER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 1247 CENTRAL AVENUE			2	24	2023	
<b>City</b> COLUMBIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17512				

Full Name of Contributor MICHAEL H. KUZIAK			MO	DAY	YEAR	\$ 200.00
Mailing Address 49 OLD QUARRY ROAD			3	27	2023	
City DANVILLE	State PA	Zip Code (Plus 4) 17821				

Full Name of Contributor JESSICA RODIC			MO	DAY	YEAR	\$ 150.00
Mailing Address 1592 COPPERSTONE ROAD			1	17	2023	
City HARRISBURG	State PA	Zip Code (Plus 4) 17111				

Full Name of Contributor ADAM SANTUCCI			MO	DAY	YEAR	\$ 250.00
Mailing Address 403 GRIST MILL ROAD			2	21	2023	
City HUMMELSTOWN	State PA	Zip Code (Plus 4) 17036				

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

**PAGE TOTAL**

\$ 1,450.00

# 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.**

<b>Name of Filing Committee or Candidate</b>  MEGAN MARTIN FOR PA	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2023</u> <b>To:</b> <u>3/27/2023</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee CITIZENS FOR KAIL				MO	DAY	YEAR	\$ 1,000.00
Mailing Address P O BOX 94				3	23	2023	
City BEAVER	State PA	Zip Code (Plus 4) 15009					
Full Name of Contributing Committee FRIENDS OF CAMERA BARTOLOTTA				MO	DAY	YEAR	\$ 2,500.00
Mailing Address PO BOX 25				3	21	2023	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108					
Full Name of Contributing Committee FRIENDS OF DEVLIN				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 74 SUN HIGH CIRCLE				3	27	2023	
City PALMYRA	State PA	Zip Code (Plus 4) 17078					
Full Name of Contributing Committee FRIENDS OF DOUG MASTRIANO				MO	DAY	YEAR	\$ 10,000.00
Mailing Address P O BOX 138				2	27	2023	
City FAYETTEVILLE	State PA	Zip Code (Plus 4) 17222					
Full Name of Contributing Committee FRIENDS OF JOE PITTMAN				MO	DAY	YEAR	\$ 5,000.00
Mailing Address P O BOX 382				3	8	2023	
City INDIANA	State PA	Zip Code (Plus 4) 15701					

<b>Full Name of Contributing Committee</b> FRIENDS OF JUDY WARD			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 5,000.00
<b>Mailing Address</b> P O BOX 288			2	23	2023	
<b>City</b> HOLLIDAYSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16648				
<b>Full Name of Contributing Committee</b> FRIENDS OF SCOTT MARTIN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 5,000.00
<b>Mailing Address</b> 802 LIGHTFOOT DRIVE			3	16	2023	
<b>City</b> LANCASTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17602				
<b>Full Name of Contributing Committee</b> PA INSURANCE PAC (PIPAC)			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 409 N 2ND STREET SUITE 202			3	16	2023	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101				
<b>Full Name of Contributing Committee</b> PMA PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 225 STATE STREET			3	8	2023	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101				
<b>Full Name of Contributing Committee</b> UGI UTILITIES/UGI ENERGY PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> 1 UGI DRIVE			3	16	2023	
<b>City</b> DENVER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17517				
<b>Full Name of Contributing Committee</b> VOLUNTEERS FOR ARGALL			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> P.O. BOX 241			3	8	2023	
<b>City</b> TAMAQUA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18252				

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

<b>PAGE TOTAL</b>
\$ 36,500.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  MEGAN MARTIN FOR PA	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2023</u> <b>To:</b> <u>3/27/2023</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
ERIK R. ANDERSON							
Mailing Address 2950 MERIDIAN LANE APT 12							\$ 2,500.00
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055		3	8	2023	
Employer Name POST & SCHELL				Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 17 N 2ND ST			City HARRISBURG		State PA	Zip Code (Plus 4) 17101	
Full Name of Contributor				MO	DAY	YEAR	
DAVID E. BARENSFELD							
Mailing Address 257 PETRIE ROAD							\$ 500.00
City NEW BRIGHTON	State PA	Zip Code (Plus 4) 15066		3	14	2023	
Employer Name ELLWOOD GROUP				Occupation BUSINESSMAN			
Employer Mailing Address/Principal Place of Business BOX 790			City ELLWOOD CITY		State PA	Zip Code (Plus 4) 16117	
Full Name of Contributor				MO	DAY	YEAR	
J. MARK BOVER							
Mailing Address P O BOX 145 256 HAMER DRIVE							\$ 500.00
City DUNCANSVILLE	State PA	Zip Code (Plus 4) 16635		1	4	2023	
Employer Name VALUE DRUG CO.				Occupation VP OF OPERATIONS			
Employer Mailing Address/Principal Place of Business 195 THEATRE DRIVE			City DUNCANSVILLE		State PA	Zip Code (Plus 4) 16635	



<b>Full Name of Contributor</b> JOHN ANDREW CROMPTON			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> 71 TAVERN HOUSE HL			2	24	2023	
<b>City</b> MECHANICSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17050				
<b>Employer Name</b> MCNEES WALLACE & NURICK			<b>Occupation</b> ATTORNEY			
<b>Employer Mailing Address/Principal Place of Business</b> 100 PINE ST		<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101		

<b>Full Name of Contributor</b> JAMES KUTZ			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,500.00
<b>Mailing Address</b> 504 ALLEVIEW DRIVE			3	8	2023	
<b>City</b> MECHANICSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17055				
<b>Employer Name</b> POST & SCHELL			<b>Occupation</b> ATTORNEY			
<b>Employer Mailing Address/Principal Place of Business</b> 17 N 2ND STREET		<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101		

<b>Full Name of Contributor</b> GEORGE H. MARGETAS, ESQ.			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 2270 TROTTER RIDGE COURT			3	9	2023	
<b>City</b> YORK	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17408				
<b>Employer Name</b> MARGETAS LEGAL LLC			<b>Occupation</b> ATTORNEY			
<b>Employer Mailing Address/Principal Place of Business</b> 1815 W MARKET ST		<b>City</b> YORK	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17404		

<b>Full Name of Contributor</b> WILLIAM SCOTT MARTIN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 25,000.00
<b>Mailing Address</b> 1 HUNT PLACE			1	6	2023	
<b>City</b> MECHANICSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170502912				
<b>Employer Name</b> SOBI			<b>Occupation</b> SALES			
<b>Employer Mailing Address/Principal Place of Business</b> 77 4TH AVENUESUITE 300		<b>City</b> WALTHAM	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 02451		

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

PAGE TOTAL	
\$	32,500.00

## 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.**

<b>Name of Filing Committee or Candidate</b>  MEGAN MARTIN FOR PA	<b>Reporting Period</b>  From: <u>1/1/2023</u> To: <u>3/27/2023</u>
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				DATE		AMOUNT	
Full Name				MO	DAY	YEAR	\$ 204.40
DELUXE							
Mailing Address				3	10	2023	
P O BOX 7247							
City	State		Zip Code (Plus 4)				
PHILADELPHIA	PA		191700001				
Receipt Description							
INCORRECT CHECKS RETURNED							

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

PAGE TOTAL	
\$	204.40

## 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
MEGAN MARTIN FOR PA		From: <u>1/1/2023</u> To: <u>3/27/2023</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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.						<b>PAGE TOTAL</b>  \$ 0.00

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

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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MEGAN MARTIN FOR PA	From <u>1/1/2023</u> To: <u>3/27/2023</u>

DATE				AMOUNT		
To Whom Paid ACCRW - ADAMS CO, COUNCIL REPUBLICAN WOMEN			MO	DAY	YEAR	\$ 140.00
Mailing Address   P O BOX 3664			2	17	2023	
City   GETTYSBURG	State PA	Zip Code (Plus 4) 17325	Description of Expenditure LINCOLN DAY DINNER			
To Whom Paid AMERICAN MARKING SYSTEMS			MO	DAY	YEAR	\$ 38.85
Mailing Address   10 GREENWOOD AVENUE SUITE C			2	24	2023	
City   WOODBURY	State NJ	Zip Code (Plus 4) 08096	Description of Expenditure BOOKEEPING STAMP			
To Whom Paid FULTON BANK			MO	DAY	YEAR	\$ 11.60
Mailing Address   P.O. BOX 1189			2	24	2023	
City   HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CR CARD FEES			
To Whom Paid CAREY SIRIANNI			MO	DAY	YEAR	\$ 2,000.00
Mailing Address   P O BOX 186			2	25	2023	
City   SEWICKLEY	State PA	Zip Code (Plus 4) 15143	Description of Expenditure FUNDRAISING/CONSULTING SERVICES			
To Whom Paid DELUXE BUSINESS CHECKS & SOLUTIONS			MO	DAY	YEAR	\$ 204.40
Mailing Address   P.O. BOX 7247			2	27	2023	
City   PHILADELPHIA	State PA	Zip Code (Plus 4) 191700001	Description of Expenditure CHECK ORDER			

<b>To Whom Paid</b> FULTON BANK			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> P.O. BOX 1189			2	27	2023	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Description of Expenditure</b> MONEY ORDER FOR PETITION FILING			

<b>To Whom Paid</b> LCRC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 460 MARKET STREET SUITE 125			2	28	2023	
<b>City</b> WILLIAMSPORT	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17701	<b>Description of Expenditure</b> DINNER			

<b>To Whom Paid</b> DELUXE BUSINESS CHECKS & SOLUTIONS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> P.O. BOX 7247			3	14	2023	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191700001	<b>Description of Expenditure</b> CHECK ORDER			

<b>To Whom Paid</b> RGB POLITICS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 3031 LOGAN STREET			3	16	2023	
<b>City</b> CAMP HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17011	<b>Description of Expenditure</b> YARD SIGNS			

<b>To Whom Paid</b> IGNITE STRATEGIES LLC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> P O BOX 101			3	22	2023	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Description of Expenditure</b> CAMPAIGN STAFF			

<b>To Whom Paid</b> FULTON BANK			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> P.O. BOX 1189			3	27	2023	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Description of Expenditure</b> CR CARD FEES			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 28,817.36



**SCHEDULE IV**  
**STATEMENT OF UNPAID DEBTS**  
 Use this Section to itemize all unpaid debts and obligations  
 which are outstanding at the end of the reporting period

<b>Name of Filing Committee or Candidate</b> MEGAN MARTIN FOR PA				<b>Reporting Period</b> From: <u>1/1/2023</u> To: <u>3/27/2023</u>			
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DATE				Outstanding Balance of Debt
<b>Name of Creditor</b> WILLIAM SCOTT MARTIN				\$ 25,000.00
<b>Mailing Address</b> 1 HUNT PLACE				
<b>City</b> MECHANICSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170502912	<b>Description of Debt</b> LOAN TO COMMITTEE	
DATE				Outstanding Balance of Debt
<b>Name of Creditor</b> WILLIAM SCOTT MARTIN				\$ 5,365.37
<b>Mailing Address</b> 1 HUNT PLACE				
<b>City</b> MECHANICSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170502912	<b>Description of Debt</b> LOAN TO COMMITTEE FOR MTGS, PRINTING, LODGING, SHIPPIN, MEALS, ETC	
DATE				Outstanding Balance of Debt
<b>Name of Creditor</b> WILLIAM SCOTT MARTIN				\$ 7,055.00
<b>Mailing Address</b> 1 HUNT PLACE				
<b>City</b> MECHANICSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170502912	<b>Description of Debt</b> LOAN TO COMMITTEE FOR MILEAGE	
<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>				<b>PAGE TOTAL</b> \$ 37,420.37