

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 : 20230128		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: COMMITTEE TO ELECT SHAWN MCLAUGHLIN								
Street Address: 2260 ERIN COURT								
City: LANCASTER				State: PA		Zip Code: 17601		
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2023	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>	DISKETTE	
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code
				MO	DAY	YEAR		
				11	7	2023		
							(SEE INSTRUCTIONS FOR CODES)	
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR
		3	28	2023		5	1	2023
A. Amount Brought Forward From Last Report					\$ 0.00			
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 0.00			
C. Total Funds Available (Sum Of Lines A and B)					\$ 5,505.00			
D. Total Expenditures (From Schedule III)					\$ 0.00			
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 5,505.00			
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 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

Name of Filing Committee or Candidate	Reporting Period
COMMITTEE TO ELECT SHAWN MCLAUGHLIN	From: <u>3/28/2023</u> To: <u>5/1/2023</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 780.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 525.00
All Other Contributions (Part B)	\$ 200.00
TOTAL for the Reporting Period (2)	\$ 725.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 2,000.00
All Other Contributions (Part D)	\$ 2,000.00
TOTAL for the Reporting Period (3)	\$ 4,000.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 5,505.00
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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 COMMITTEE TO ELECT SHAWN MCLAUGHLIN	Reporting Period From: <u>3/28/2023</u> To: <u>5/1/2023</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee SUPPORTERS OF DAVE ZIMMERMAN			MO	DAY	YEAR	\$ 250.00
Mailing Address 314 DEERFIELD DRIVE			4	17	2023	
City EAST EARL	State PA	Zip Code (Plus 4) 17519				

Full Name of Contributing Committee FRIENDS OF BRYANT GLICK			MO	DAY	YEAR	\$ 75.00
Mailing Address 13 BRODERICK COURT			4	20	2023	
City LEOLA	State PA	Zip Code (Plus 4) 17540				

Full Name of Contributing Committee FRIENDS OF ANN HESS			MO	DAY	YEAR	\$ 100.00
Mailing Address 1672 MANHEIM PIKE			4	17	2023	
City LANCASTER	State PA	Zip Code (Plus 4) 17601				

Full Name of Contributing Committee FRIENDS OF ANDREW SPADE			MO	DAY	YEAR	\$ 100.00
Mailing Address 95 LAURIE LANE			4	7	2023	
City LITITZ	State PA	Zip Code (Plus 4) 17543				

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

PAGE TOTAL
\$ 525.00

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 COMMITTEE TO ELECT SHAWN MCLAUGHLIN	Reporting Period From: <u>3/28/2023</u> To: <u>5/1/2023</u>
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DATE	AMOUNT
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Full Name of Contributor LAWRENCE ROSKOS			MO	DAY	YEAR	\$ 100.00
Mailing Address 20 SYCAMORE DR			4	3	2023	
City ELIZABETHTOWN	State PA	Zip Code (Plus 4) 17022				

Full Name of Contributor R KEITH VOGT			MO	DAY	YEAR	\$ 100.00
Mailing Address 808 JASMINE AVE			4	17	2023	
City MOUNT JOY	State PA	Zip Code (Plus 4) 17552				

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

PAGE TOTAL
\$ 200.00

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 COMMITTEE TO ELECT SHAWN MCLAUGHLIN	Reporting Period From: <u>3/28/2023</u> To: <u>5/1/2023</u>
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				DATE			AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$	1,000.00
JAM FOR PA				4	12	2023		
Mailing Address 2260 ERIN COURT								
City LANCASTER	State PA	Zip Code (Plus 4) 17601						
Full Name of Contributing Committee				MO	DAY	YEAR	\$	500.00
FRIENDS OF RAY D'AGOSTINO				4	12	2023		
Mailing Address PO BOX 2184								
City LANCASTER	State PA	Zip Code (Plus 4) 17608						
Full Name of Contributing Committee				MO	DAY	YEAR	\$	500.00
FRIENDS OF JOSH PARSONS				4	17	2023		
Mailing Address 2830 MILLERS RUN ROAD								
City LANCASTER	State PA	Zip Code (Plus 4) 17601						

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

PAGE TOTAL
\$ 2,000.00

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 COMMITTEE TO ELECT SHAWN MCLAUGHLIN	Reporting Period From: <u>3/28/2023</u> To: <u>5/1/2023</u>
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				DATE			AMOUNT
Full Name of Contributor STUART K RADNOVIC				MO	DAY	YEAR	\$ 500.00
Mailing Address 310 SILVERWOOD DRIVE				4	17	2023	
City LITITZ	State PA	Zip Code (Plus 4) 17543					
Employer Name RETIRED / NONE				Occupation RETIRED			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
Full Name of Contributor RICK RODGERS				MO	DAY	YEAR	\$ 500.00
Mailing Address 301 E ORANGE STREET				4	5	2023	
City LANCASTER	State PA	Zip Code (Plus 4) 17602					
Employer Name RODGERS AND ASSOCIATES				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
2025 LITITZ PIKE			LANCASTER		PA	17601	
Full Name of Contributor DAVID HOLLINGER				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 755 WHITE OAK DRIVE				3	31	2023	
City DENVER	State PA	Zip Code (Plus 4) 17517					
Employer Name FAMILY PLACE PROPERTIES LP				Occupation MANAGER			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
495 SMOKESTOWN ROAD			DENVER		PA	17517	

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

PAGE TOTAL
\$ 2,000.00

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	Reporting Period From: To:
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				DATE	AMOUNT		
Full Name				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

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

PAGE TOTAL
\$ 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 Period	
COMMITTEE TO ELECT SHAWN MCLAUGHLIN		From: <u>3/28/2023</u> To: <u>5/1/2023</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	\$ 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.						PAGE TOTAL \$ 0.00	

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SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period From To:
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				DATE	AMOUNT	
To Whom Paid			MO	DAY	YEAR	
Mailing Address						\$ 0.00
City	State	Zip Code (Plus 4)	Description of Expenditure			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 0.00

