Campaign Finance Report

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

Filer Identificati Number :	on 20	230128				Repo			CA	NDII	DATE		COMM	4ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, Can	didate or	Lobb	yist:		СОМІ	MIT	TEE	TO EL	.ECT	SHAV	VN M	CLAUG	HLIN					
Street Address:																			
City:	LANCASTE	R							State	e:	PA			Zip Cod	le: 17	601			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		ND FRIDAY RIMARY	PRE-	2.		30 DA		Р	OST-	3.		AMENDM REPORT?		Yes	N	0	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		ND FRIDAY LECTION	/ PRE	- 5.		30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	N	0	/
report type)	ANNUAL REPO	RT 7.	Ye	ear 2023					NG ME					PAPER		\checkmark	DISK	ETTE	
Name of Office S	ought by Cand	idate:							DAT	E O	F ELE	CTIC	N	District Number	Office Code	Pai	ty Cod	Code	
									МО		DAY	YI	AR						
										11		7	2023		(SEE INS	STRUCTI	ONS FOR	CODES	5)
Summary of		МО		DAY	YEAR				МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	,	
Expenditures	trom:		9	19	20	023	T	0		10	:	23	2023						
A. Amount Bro	ught Forward F	rom Last	Repo	ort				\$					705.00						
B. Total Monet	ary Contributio	ns And Re	eceip	ts (From	Sche	dule 1	I)	\$					0.00						
C. Total Funds	Available (Sum	Of Lines	A an	nd B)				\$				-	705.00						
D. Total Expend	ditures (From S	Schedule	III)					\$					0.00						
E. Ending Cash	Balance (Subt	ract Line	D Fro	om Line C	E)			\$				7	05.00						
F. Value Of In-	Kind Contributi	ons Rece	ived	(From Sc	hedul	e II)		\$				2,4	06.00						
G. Unpaid Debt	s And Obligation	ons (From	Sch	edule IV)			\$					0.00						
					AFF	IDA'	VI٦	ΓSE	CTIC	ΟN									
PART I - If this is	a Committee i	report, tro	easuı	rer sign h	ere. I	f this	s is	a Car	ndidat	te re	port, c	candi	date sig	ın here.					
I swear (or affirm) correct and comple		including t	he att	tached sch	edules	filed	on p	paper	or by e	electr	ronic m	edium	, are to t	he best of	my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before me day of	this	20	0						•		S	Signature	of Person	n Submitt	ing Re	oort		-
	Sign	ature						-						Print	ted Name				
My Commission Ex	cpires							_		•				Emai	I				
	МО		DAY		YR						Are	ea Coo	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a c	andidate	's aut	thorized	Comm	ittee	, Ca	andid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my knov	vledge	e and belie	ef this	politio	cal	comm	ittee h	as no	ot viola	ted ar	y provis	ions of the	e act of Ju	ıne 3,1	937 (P.	L. 133	з,
Sworn to and subsc	ribed before me t day of	his		•									s	ignature o	f Candida	ite			_
			20	·				-						Printe	d Name				-
	Signatu	ire						-											_
My Commission Exp	ires													Emai	I				
	мо		DAY		YR						Area	Code		Da	ytime Te	elephoi	ne Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
COMMITTEE TO ELECT SHAWN MCLAUGHLIN	From:	9/19/202	<u>3</u> To:	10/23/2023
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reportin	g 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)			\$	0.00
TOTAL for the Reportin	g 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
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reportin	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reportin	g Period	(4)	\$	0.00
			ı	
Total Monetary Contributions and Receipts During this Reporting Period (Add a totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1, Page 1, Report Cover Page 2, Page 2			\$	0.00

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	R	eporting	Period			
		F	rom:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Con	nmittee		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.

From: To: DATE AMOUNT Full Name of Contributor MO DAY YEAR Mailing Address City State Zip Code (Plus 4) From: To: AMOUNT AMOUNT \$ 0	Name of Filing Comn	nittee or Candidate		Reporting	Period			
Full Name of Contributor MO DAY YEAR Mailing Address \$ 0				From:		To	o:	
Mailing Address \$ 0					DATE			AMOUNT
	Full Name of Contribut	or		мо	DAY	YEAR		
City State Zip Code (Plus 4)	Mailing Address						\$	0.00
	City	State	Zip Code (Plus 4)					
								PAGE TOTAL

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		А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR	\$		0.00
Mailing Address							7 *		0.00
City	State	Zip Cod	e (Plus 4)						
<u> </u>	I	ı			ı	<u> </u>			
		_		_				PAGE TOT	AL
Enter Grand Total of Part C on Scheo	lule 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	orting Pe	riod			
			Fron	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus	s 4)					
Employer Name			Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	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:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus 4)					
Receipt Description	•	•			•			
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C					PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	summary Page,	Section	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 Period	d	
COMMITTEE TO ELECT SHAWN MCLAUGHLIN	From:	<u>9/19/2023</u> To:	10/23/2023
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)	\$	2,406.00
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,		\$	2,406.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Ca	ndidate		Reporting Period					
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						 	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•				
				_	Г			
Enter Grand Total of Part F of Section 2.	n Schedule II, In-Ki	nd Contributions Detai	led Sum	nmary Pa	ge,		PAGE TOTAL	
						\$	0.00	

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

Name of Filing Committee or Candidate	Reporting I	Period	
COMMITTEE TO ELECT SHAWN MCLAUGHLIN	From:	<u>9/19/2023</u> To:	10/23/2023

						DATE		AMOUNT
Full Name of Contributor					мо	DAY	YEAR	
REPUBLICAN COMMITTEE OF LA	NCASTER COUNTY					27(1		
Mailing Address					10	23	2023	\$ 2,406.00
City LANCASTER	State		Zip Code(Plus 4)					
	PA		17601					
Employer of Contributor N/A	<u>-</u>			Occupation N/A				
Employer Mailing Address/Princip	oal Place of Business	Cit	ty .	State Zip Code(Plus 4) Description of Contribution				ption of Contribution
							YARD S	SIGNS, MAILERS
Enter Grand Total of Part G	on Schedule II. In-K	ind (Contributions De	etaile				PAGE TOTAL
Summary Page, Section 3.	n senedale 11, 111 K		continuations D	ctanc	-			2,406.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
			From			То:	
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
Mailing Address				0.00			
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
Lines Grand Total Of Expenditures of	m rage I, Report C	over rage, Item L	, .			\$	0.00