

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 : 20140011		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: AUMENT FOR SENATE											
Street Address: PO BOX 194											
City: LANDISVILLE					State: PA		Zip Code: 17538				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	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.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	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	Party Code	County Code
					MO	DAY	YEAR	REP			
					11	7	2023	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		9	19	2023		10	23	2023			
A. Amount Brought Forward From Last Report					\$ 35,291.42						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 0.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 35,291.42						
D. Total Expenditures (From Schedule III)					\$ 2,627.56						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 32,663.86						
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
AUMENT FOR SENATE	From: <u>9/19/2023</u> To: <u>10/23/2023</u>

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)	\$ 0.00
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
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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 0.00
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<div>PART B</div> <div>ALL OTHER CONTRIBUTIONS</div> <div>\$50.01 TO \$250.00</div> <div>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)</div>						
Name of Filing Committee or Candidate				Reporting Period		
				From:		To:
				DATE		AMOUNT
Full Name of Contributor				MO	DAY	YEAR
Mailing Address						
City	State	Zip Code (Plus 4)				
						\$ 0.00
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.						<div>PAGE TOTAL</div> <div>\$ 0.00</div>

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:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 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: To:

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

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:

			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	
AUMENT FOR SENATE		From: <u>9/19/2023</u> To: <u>10/23/2023</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 RECIEVED - 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:
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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.							PAGE TOTAL \$ 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

Name of Filing Committee or Candidate	Reporting Period
AUMENT FOR SENATE	From <u>9/19/2023</u> To: <u>10/23/2023</u>

DATE				AMOUNT		
To Whom Paid TRIO BAR AND GRILLE			MO	DAY	YEAR	\$ 47.51
Mailing Address 3707 MARIETTA AVE			10	16	2023	
City COLUMBIA	State PA	Zip Code (Plus 4) 175128943	Description of Expenditure MEALS			
To Whom Paid TRIO BAR AND GRILLE			MO	DAY	YEAR	\$ 53.01
Mailing Address 3707 MARIETTA AVE			10	20	2023	
City COLUMBIA	State PA	Zip Code (Plus 4) 175128943	Description of Expenditure MEALS			
To Whom Paid TACO AMIGOS RESTAURANT			MO	DAY	YEAR	\$ 93.86
Mailing Address 200 N 2ND ST			10	18	2023	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011421	Description of Expenditure MEALS			
To Whom Paid SHEETZ			MO	DAY	YEAR	\$ 37.58
Mailing Address 5700 6TH AVENUE			9	25	2023	
City ALTOONA	State PA	Zip Code (Plus 4) 16602	Description of Expenditure FUEL			
To Whom Paid LNP GROUP			MO	DAY	YEAR	\$ 19.95
Mailing Address 8 W. KING STREET			9	26	2023	
City LANCASTER	State PA	Zip Code (Plus 4) 17608	Description of Expenditure ADMINISTRATIVE			

To Whom Paid GOOGLE INC			MO	DAY	YEAR	\$ 63.60
Mailing Address 1600 AMPHITHEATRE PKWY			10	2	2023	
City MOUNTAIN VIEW	State CA	Zip Code (Plus 4) 94043	Description of Expenditure ADMINISTRATIVE			

To Whom Paid S'MORE SPACE STORAGE			MO	DAY	YEAR	\$ 278.78
Mailing Address 581 STONEY BATTERY ROAD			10	3	2023	
City LANDISVILLE	State PA	Zip Code (Plus 4) 17538	Description of Expenditure ADMINISTRATIVE			

To Whom Paid SILVER SPRING FAMILY RESTAURANT			MO	DAY	YEAR	\$ 45.90
Mailing Address 3653 MARIETTA AVE			10	9	2023	
City LANCASTER	State PA	Zip Code (Plus 4) 176011129	Description of Expenditure MEALS			

To Whom Paid CONSTANT CONTACT			MO	DAY	YEAR	\$ 85.86
Mailing Address 1601 TRAPELO ROAD			10	10	2023	
City WALTHAM	State MA	Zip Code (Plus 4) 02431	Description of Expenditure ADMINISTRATIVE			

To Whom Paid ARISTOTLE INTL			MO	DAY	YEAR	\$ 900.00
Mailing Address 205 PENNSYLVANIA AVE, SE			10	3	2023	
City WASHINGTON	State DC	Zip Code (Plus 4) 20003	Description of Expenditure ADMINISTRATIVE			

To Whom Paid TRIO BAR AND GRILLE			MO	DAY	YEAR	\$ 74.45
Mailing Address 3707 MARIETTA AVE			9	28	2023	
City COLUMBIA	State PA	Zip Code (Plus 4) 175128943	Description of Expenditure MEALS			

To Whom Paid YODER'S RESTAURANT			MO	DAY	YEAR	
Mailing Address 14 S TOWER RD			10	19	2023	
City NEW HOLLAND	State PA	Zip Code (Plus 4) 175571517	Description of Expenditure MEALS			

To Whom Paid EL SOL MEXICAN RESTAURANT			MO	DAY	YEAR	
Mailing Address 18 S 3RD STREET			9	26	2023	
City HARRISBURG	State PA	Zip Code (Plus 4) 171012103	Description of Expenditure MEALS			

To Whom Paid ARISTOTLE INTL			MO	DAY	YEAR	
Mailing Address 205 PENNSYLVANIA AVE, SE			10	10	2023	
City WASHINGTON	State DC	Zip Code (Plus 4) 20003	Description of Expenditure ADMINISTRATIVE			

To Whom Paid UBER TECHNOLOGIES			MO	DAY	YEAR	
Mailing Address 1455 MARKET STREET			10	16	2023	
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 941031331	Description of Expenditure TRANSPORTATION			

To Whom Paid GODADDY.COM			MO	DAY	YEAR	
Mailing Address 14747 N. NORTHSIDE BLVD			10	10	2023	
City SCOTTSDALE	State AZ	Zip Code (Plus 4) 85260	Description of Expenditure ADMINISTRATIVE			

To Whom Paid VERIZON WIRELESS			MO	DAY	YEAR	
Mailing Address 142 PARK CITY CENTER			10	2	2023	
City LANCASTER	State PA	Zip Code (Plus 4) 17601	Description of Expenditure ADMINISTRATIVE			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 2,627.56

