Campaign Finance Report

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

Filer Identification 20140277 Number :						port ed B		CAND	DATE		СОМ	MITTEE 🗸		LOBI	BYIST		
Name of Filing C	Committee, Candid	late or L	obbyist:		PAT	TRIO	TS FC	R PERRY	1								
Street Address:	4075 LINGLE	STOWN	ROAD,PMB	:119													
City:	HARRISBURG	i						State:	PA			Zip Cod	ie: 17	7112			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	-	2.	30 DA		POST-				AMENDMENT REPORT?		No	~	1
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	y pre	≣-	5.	30 DA					TERMINA REPORT		Yes	No	~	
report type)	ANNUAL REPORT	7. X	Year 2023				FILING METHOD () CHECK ONE					PAPER DISKETTE				TTE	
Name of Office S	Sought by Candida	ite:	-		DATE OF ELECTION						N	District Number	Office Code	Par	ty Code	County Code	
	,							МО	DAY	YI	AR	Number	code			Code	
								11		7	2023		(SEE IN	ISTRUCTI	ONS FOR C	ODES)	
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	ΥI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	s trom:		11 28	2	023	3 T	<u> </u>	12	2	31	2023						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			173,	118.49						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 1,578,567.51																	
C. Total Funds Available (Sum Of Lines A and B) \$ 1,751,68								586.00									
D. Total Expenditures (From Schedule III)						\$		1,	204,5	27.44							
E. Ending Cash Balance (Subtract Line D From Line C)							\$		į	547,1	58.56						
F. Value Of In-	Kind Contribution	s Receiv	ed (From So	chedu	le I	Ί)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			•			
				AFF	ID	AVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign l	here. :	If th	his is	a Car	ndidate r	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sch	hedule	s file	ed on	paper	or by elect	tronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , true	
Sworn to and subs	cribed before me thi day of	s	20							S	Signature	of Perso	n Submit	ting Rep	oort		
	Signatu	ıre					-					Prin	ted Name	e			
My Commission Ex	cpires											Ema	il				
	мо	D	AY	YR					Are	ea Coo	le	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	ee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of a	ny knowl	edge and beli	ef this	poli	itical	comm	ittee has r	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L.	1333,	
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate			
	day of —— ————		_ 20				-					Printe	d Name				
	Signature						-										
My Commission Exp	ires											Ema	il				
	МО	D	AY	YR	l		•		Area Code Daytime Telephone Number								

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
PATRIOTS FOR PERRY	From:	11/28/202	<u>3</u> To:	12/31/2023
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	(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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re					
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•			•	•		PAGE TOTAL

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

0.00

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 of Candidate			Reporting Period From: To:					
					DATE		AN	4OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$ \$	0.00
City	State	Zip Code (Plus 4)	1					

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

PAGE TOTAL \$ 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 Candi	me of Filing Committee or Candidate Rep		Reporting	Reporting Period					
			From:			То:			
				DA	TE		Α	MOUNT	
Full Name of Contributing Commit	tee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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.)

ame of Filing Committee or Candidate		Reporting Period						
			Fror	n:		To		
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address State Tin Code (Plus 4)						\$	0.00	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupation				
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary 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	ting Perio	od			
			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 o	on Schedule I. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z</i> 50a. y 1 dgc,	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 Per	iod							
PATRIOTS FOR PERRY	From:	<u>11/28/2023</u> To:	12/31/2023						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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)	\$	0.00						
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,		\$	0.00						

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	me of Filing Committee or Candidate				Re	porting F	Period			
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(F	Plus 4)						
Employer of Contributor			•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.								PAGE TOTAL 0.00		

STATEMENT OF EXPENDITURES

			1						
Name of Filing Committee or Candida	ate		Reporti	ng Period					
PATRIOTS FOR PERRY			From	11/28	8/2023	То:	12/31/2023		
				DATE			AMOUNT		
To Whom Paid CUMBERLAND COUNTY REPUBLICAN	I COMMITTEE		мо	DAY	YEAR				
Mailing Address 8 STOVER DR			10	4	2023	\$	750.00		
City CARLISLE	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	17013		IBUTION					
To Whom Paid YORK COUNTY REPUBLICAN COMMITTEE			МО	DAY	YEAR				
Mailing Address 204 SAINT CHARLES WY			10	23	2023	\$	600.00		
City YORK	State PA	Zip Code (Plus 4) 17402	· ·	Description of Expenditure CONTRIBUTION					
To Whom Paid DAUPHIN COUNTY REPUBLICAN COM	MMITTEE		МО	DAY	YEAR				
Mailing Address 2255 PAXTON CH	HURCH ROAD		8	9	2023	\$	1,100.00		
City HARRISBURG	State PA	Zip Code (Plus 4) 17110		otion of Exp	penditure				
To Whom Paid PA YOUNG REPUBLICANS			мо	DAY	YEAR				
Mailing Address 902 COLUMBIA AVENUE			8	1	2023	\$	1,000.00		
			Descrip	otion of Exp IBUTION	enditure	1			

To Whom Paid CUMBERLAND COUNTY FEDERATION (мо	DAY	YEAR			
Mailing Address 8 STOVER DRIVE				9	2023	\$ 300.00
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure CONTRIBUTION			

To Whom Paid NORTHERN YORK COUNTY REPUBLICAN CLUB			МО	DAY	YEAR		
Mailing Address 2730 EMIG MILL ROAD			3	8	2023	\$	250.00
City DOVER	State PA	Zip Code (Plus 4) 17315	Description of Expenditure CONTROBUTION				
To Whom Paid ALL OTHER FEDERAL DISBURSEMENTS			МО	DAY	YEAR		
Mailing Address						\$	1,200,527.44
City	State	Zip Code (Plus 4)	Description of Expenditure NON-PA FEDERAL DISBURSEMENTS				
Enter Grand Total of Expe	anditures on Page 1 Re	uport Cover Page Item D					PAGE TOTAL
Linter Grand Total of Expe	multures on Page 1, Re	sport cover Page, Item D	•			\$	1,204,527.44