

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 : 20160239		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: SUPPORTERS FOR CAROL HILL-EVANS											
Street Address:											
City: YORK				State: PA		Zip Code: 17404					
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.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	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
REPRESENTATIVE IN THE GENERAL ASSEMBLY					MO	DAY	YEAR	95	STH	DEM	67
					11	7	2023	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		11	28	2023		12	31	2023			
A. Amount Brought Forward From Last Report					\$		17,951.43				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		8,050.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		26,001.43				
D. Total Expenditures (From Schedule III)					\$		8,931.49				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		17,069.94				
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
SUPPORTERS FOR CAROL HILL-EVANS	From: <u>11/28/2023</u> To: <u>12/31/2023</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)	\$ 1,750.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 1,750.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 6,000.00
All Other Contributions (Part D)	\$ 300.00
TOTAL for the Reporting Period (3)	\$ 6,300.00

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.)	\$ 8,050.00
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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				Reporting Period			
SUPPORTERS FOR CAROL HILL-EVANS				From: <u>11/28/2023</u> To: <u>12/31/2023</u>			
				DATE		AMOUNT	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
AFSCME COUNCIL 13			10	18	2023	
Mailing Address	State	Zip Code (Plus 4)				
City HARRISBURG	PA	171111507				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
CAPITOL STRATEGIES GROUP, LLC			10	10	2023	
Mailing Address	State	Zip Code (Plus 4)				
City HARRISBURG	PA	171080070				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
HIGHMARK PAC			10	18	2023	
Mailing Address	State	Zip Code (Plus 4)				
City CAMP HILL	PA	170111702				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
PA AMERICAN WATER CO. PAC			9	25	2023	
Mailing Address	State	Zip Code (Plus 4)				
City MECHANICSBURG	PA	170554436				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
PENNSYLVANIA PHARMACISTS ASSOCIATION (PHARMPAC)			10	18	2023	
Mailing Address	State	Zip Code (Plus 4)				
City HARRISBURG	PA	171011112				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
STRATEGY PAC			11	14	2023	
Mailing Address	State	Zip Code (Plus 4)				
City HARRISBURG	PA	171021937				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
UGI UTILITIES, INC PAC			10	24	2023	
Mailing Address	State	Zip Code (Plus 4)				
City DENVER	PA	175179039				

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

PAGE TOTAL

\$ 1,750.00

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)					

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 Candidate	Reporting Period
SUPPORTERS FOR CAROL HILL-EVANS	From: <u>11/28/2023</u> To: <u>12/31/2023</u>

				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
APSCUF/CAP				10	2	2023	
Mailing Address							
City	HARRISBURG	State	PA	Zip Code (Plus 4)		171011203	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
CONSTELLATION EMPLOYEE PAC				10	4	2023	
Mailing Address							
City	WASHINGTON	State	DC	Zip Code (Plus 4)		200012133	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 2,500.00
FRIENDS OF FREEDOM AND CONVENIENCE				10	18	2023	
Mailing Address							
City	YORK	State	PA	Zip Code (Plus 4)		174048495	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
LAWPAC				10	30	2023	
Mailing Address							
City	HARRISBURG	State	PA	Zip Code (Plus 4)		171011505	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PA REALTORS PAC				10	16	2023	
Mailing Address							
City	LEMOYNE	State	PA	Zip Code (Plus 4)		170431241	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PSEA PACE				10	20	2023	
Mailing Address							
City	HARRISBURG	State	PA	Zip Code (Plus 4)		171051724	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 500.00
S.R. WOJDAK & ASSOCIATES						
Mailing Address			10	21	2023	
City	HARRISBURG	State				PA

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 500.00
UFCW LOCAL 1776						
Mailing Address			10	6	2023	
City	PLYMOUTH MEETING	State				PA

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

PAGE TOTAL
\$ 6,000.00

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 SUPPORTERS FOR CAROL HILL-EVANS	Reporting Period From: <u>11/28/2023</u> To: <u>12/31/2023</u>
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			DATE	AMOUNT	
Full Name of Contributor	MO	DAY	YEAR		
RONALD HENRY	10	10	2023	\$ 300.00	
Mailing Address					
City BRYN MAWR	State PA	Zip Code (Plus 4) 190101938			
Employer Name CAPITAL STRATEGIES			Occupation LOBBIEST		
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
\$ 300.00

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	
SUPPORTERS FOR CAROL HILL-EVANS		From: <u>11/28/2023</u> To: <u>12/31/2023</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:
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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:

				DATE		AMOUNT	
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
SUPPORTERS FOR CAROL HILL-EVANS	From <u>11/28/2023</u> To: <u>12/31/2023</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
EXTRA VALUE CHECKS				
Mailing Address	10	20	2023	\$ 47.53
City PALOS HILLS	State IL	Zip Code (Plus 4) 604652472	Description of Expenditure UPDATED CHECKS	
To Whom Paid	MO	DAY	YEAR	
CAROL HILL-EVANS				
Mailing Address	10	10	2023	\$ 66.00
City YORK	State PA	Zip Code (Plus 4) 174033905	Description of Expenditure REIMBURSEMENT FOR POSTAGE STAMPS	
To Whom Paid	MO	DAY	YEAR	
HOUSE DEMOCRATIC CAMPAIGN COMMITTEE				
Mailing Address	4	30	2023	\$ 2,500.00
City HARRISBURG	State PA	Zip Code (Plus 4) 171022025	Description of Expenditure	
To Whom Paid	MO	DAY	YEAR	
HOUSE DEMOCRATIC CAMPAIGN COMMITTEE				
Mailing Address	8	17	2023	\$ 1,500.00
City HARRISBURG	State PA	Zip Code (Plus 4) 171022025	Description of Expenditure	
To Whom Paid	MO	DAY	YEAR	
HOUSE DEMOCRATIC CAMPAIGN COMMITTEE				
Mailing Address	10	1	2023	\$ 1,625.00
City HARRISBURG	State PA	Zip Code (Plus 4) 171022025	Description of Expenditure	
To Whom Paid	MO	DAY	YEAR	
MALCOLM FOR PA PAC				
Mailing Address	10	21	2023	\$ 250.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191300307	Description of Expenditure CONTRIBUTION	

To Whom Paid NGP VAN			MO	DAY	YEAR	\$ 500.85
Mailing Address			2	9	2023	
City WASHINGTON	State DC	Zip Code (Plus 4) 200055006	Description of Expenditure OPERATING EXPENDITURE			

To Whom Paid NGP VAN			MO	DAY	YEAR	\$ 500.85
Mailing Address			4	17	2023	
City WASHINGTON	State DC	Zip Code (Plus 4) 200055006	Description of Expenditure OPERATING EXPENDITURE			

To Whom Paid NGP VAN			MO	DAY	YEAR	\$ 500.85
Mailing Address			8	17	2023	
City WASHINGTON	State DC	Zip Code (Plus 4) 200055006	Description of Expenditure OPERATING EXPENDITURE			

To Whom Paid NGP VAN			MO	DAY	YEAR	\$ 500.85
Mailing Address			9	13	2023	
City WASHINGTON	State DC	Zip Code (Plus 4) 200055006	Description of Expenditure OPERATING EXPENDITURE			

To Whom Paid NGP VAN			MO	DAY	YEAR	\$ 500.85
Mailing Address			10	10	2023	
City WASHINGTON	State DC	Zip Code (Plus 4) 200055006	Description of Expenditure OPERATING EXPENDITURE			

To Whom Paid OLD TOWN DELI			MO	DAY	YEAR	\$ 418.70
Mailing Address			12	1	2023	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011173	Description of Expenditure OCTOBER 17, 2023 HARRISBURG EVENT			

To Whom Paid JASON QUERRY			MO	DAY	YEAR	\$ 20.01
Mailing Address			11	3	2023	
City YORK	State PA	Zip Code (Plus 4) 174042560	Description of Expenditure REIMBURSEMENT FOR TONER CARTRIDGE			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 8,931.49

