# **Campaign Finance Report**

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

| Filer Identification 20160003<br>Number :       |  |          |             |                       |         |              | y :           | CANDI               | DATE      |          | СОМ      | MITTEE                 | ✓              | LOB     | BYIST  |              |              |
|---|--|----------|-------------|-----------------------|---------|--------------|---------------|---------------------|-----------|----------|----------|------------------------|----------------|---------|--------|--------------|--------------|
| Name of Filing                                  | Committee, C   | andida   | te or L     | obbyist:              |         |              | -             | ZEL, DAV            | VN CON    | 1MIT     | TEE FR   | IENDS                  | DF             |         |        |              |              |
| Street Address:                                 |  |          |             |                       |         |              |               |                     |           |          |          |                        |                |         |        |              |              |
| City:   | DILLSBU  | JRG      |             |                       |         |              |               | State:              | PA        |          |          | Zip Co                 | 7019-9334      |         |        |              |              |
| TYPE OF<br>REPORT                               | 6TH TUESDA   |          | 1.          | 2ND FRIDA<br>PRIMARY  | Y PRE   | - 2.         | 30 DA<br>PRIM |                     | POST-     | 3.       |          | AMENDMENT<br>REPORT?   |                | Yes     | ✓ ^    | lo           |              |
| (place X to<br>the right of                     | 6TH TUESDA<br>PRE-ELECTIO                                      |          | 4.          | 2ND FRIDA<br>ELECTION | Y PRE   | - 5.         | 30 D/<br>ELEC |                     | POST-     | POST- 6. |          | TERMINATION<br>REPORT? |                | Yes     | Ν      | lo           | $\checkmark$ |
| report type)                                    | ANNUAL RE  | PORT     | 7. <b>X</b> | <b>Year</b> 2023      |         |              |               | NG METHO<br>CHECK O |           |          |          | PAPER V                |                |         | DISK   | ETTE         |              |
| Name of Office                                  | <br>Sought by Ca   | ndidat   | e:          |                       |         |              |               | DATE O              | F ELEC    | CTIO     | N        | District<br>Number     | Office<br>Code | Pa      | ty Cod | e Cou<br>Cod |              |
|   |  |          |             |                       |         |              |               | мо                  | DAY       | YE       | AR       |                        |                | REF     | )      | 67           |              |
|   |  |          | -,          |                       | -       |              |               | 11                  |           | 7        | 2023     |                        | (SEE INS       | TRUCTI  | ONS FO | R CODES      | 5)           |
| Summary of Receipts and MO DAY YEAR             |  |          |             |                       |         |              |               | мо                  | DAY       | YE       | AR       | FC                     | OR OFFIC       | e use   | ONL    | 1            |              |
| Expenditure                                     | s from:  |          |             | 1 1                   | 2       | 023 <b>T</b> | 0             | 12                  | 3         | 31       | 2023     |                        |                |         |        |              |              |
| A. Amount Bro                                   | ought Forward  | d From   | Last R      | eport                 |         |              | \$            |                     | 1         | 105,1    | 05.30    |                        |                |         |        |              |              |
| B. Total Monet                                  | B. Total Monetary Contributions And Receipts (From Schedule I) |          |             |                       |         |              | \$            | \$ 6,868.73         |           |          |          |                        |                |         |        |              |              |
| C. Total Funds Available (Sum Of Lines A and B) |  |          |             |                       |         | \$           | 5             | 1                   | 111,9     | 74.03    |          |                        |                |         |        |              |              |
| D. Total Expenditures (From Schedule III)       |  |          |             |                       | \$      | 5            |               | 22,7                | 76.00     |          |          |                        |                |         |        |              |              |
| E. Ending Cash                                  | n Balance (Su  | ıbtract  | Line D      | From Line             | C)      |              | \$            |                     |           | 89,1     | 98.03    | -                      |                |         |        |              |              |
| F. Value Of In                                  |  |          |             | •                     |         | le II)       | \$            | 5                   |           |          | 0.00     | -                      |                |         |        |              |              |
| G. Unpaid Deb                                   | ts And Obliga  | ations   | (From S     | Schedule IV           | ')      |              | \$            | 5                   |           |          | 0.00     |                        |                |         |        |              |              |
|   |  |          |             |                       | AFF     | IDAVI        | t se          | CTION               |           |          |          |                        |                |         |        |              |              |
| PART I - If this i<br>I swear (or affirm        |  | -        | •           | -                     |         |              |               |                     |           |          | -        | -                      | f my know      | /ledae  | and be | lief . t     | rue          |
| correct and comp                                | lete.  |          |             |                       | liculic | o nicu on    | paper         | or by ciece         |           | , aramı  |          |                        |                | licuge  |        |              |              |
| Sworn to and sub                                | scribed before i<br>day of                                     | me this  |             | 20                    |         |              |               |                     |           | Si       | ignature | e of Perso             | n Submitt      | ing Re  | port   |              |              |
|   |  | lignatur | e           |                       |         |              | -             |                     |           |          |          | Prin                   | ted Name       |         |        |              | —            |
| My Commission E                                 |  |          | -           |                       |         |              |               |                     |           |          |          | Ema                    | il             |         |        |              | -            |
|   | мо   |          | D           | AY                    | YR      |              | -             |                     | Are       | a Cod    | e        | Daytin                 | ne Telepho     | one Nu  | mber   |              | —            |
| Part II- If this is                             | a report of  | a cand   | idate's     | authorized            | Comn    | nittee, C    | andid         | late shall          | sign he   | ere.     | _        |                        |                | _       | _      |              |              |
| I swear (or affirm<br>No 320) as amend          |  | est of m | y knowle    | edge and beli         | ef this | political    | comm          | nittee has n        | ot violat | ed any   | y provis | ions of th             | e act of Ju    | ine 3,1 | 937 (P | .L. 133      | 33,          |
| Sworn to and subs                               | cribed before m<br>day of                                      | ne this  |             | 20                    |         |              |               |                     |           |          | s        | ignature               | of Candida     | te      |        |              | -            |
|   |  |          |             |                       |         |              | -             |                     |           |          |          | Printe                 | ed Name        |         |        |              | -            |
| My Commission Ex                                |  | ature    |             |                       |         |              | -             |                     |           |          |          | Ema                    | il             |         |        |              | _            |
|   |  |          |             |                       |         |              | -             |                     |           |          |          |                        |                |         |        |              | _            |
|   | M  | 10       | D           | AY                    | YR      |              |               |                     | Area (    | Code     |          | D                      | aytime Te      | lephor  | ne Num | ber          |              |

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

| Detailed Summary Page   |             |                |                |                   |  |  |  |  |  |
|---|-------------|----------------|----------------|-------------------|--|--|--|--|--|
| Name of Filing Committee or Candidate   | Reporting   | g Period       |                |                   |  |  |  |  |  |
| KEEFER WETZEL, DAWN COMMITTEE FRIENDS OF  | From:       | <u>1/1/202</u> | 2 <u>3</u> To: | <u>12/31/2023</u> |  |  |  |  |  |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor   |             |                |                |                   |  |  |  |  |  |
| TOTAL for the Reporting   | 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)  | \$          | 100.00         |                |                   |  |  |  |  |  |
| TOTAL for the Reporting   | g Period    | (2)            | \$             | 100.00            |  |  |  |  |  |
| 3. Contributions Received Over \$250.00 (From Part C and Part D)  |             |                | 1              |                   |  |  |  |  |  |
| Contributions Received From Political Committees (Part C)   |             |                | \$             | 0.00              |  |  |  |  |  |
| All Other Contributions (Part D)  |             |                | \$             | 6,750.00          |  |  |  |  |  |
| TOTAL for the Reporting   | g Period    | (3)            | \$             | 6,750.00          |  |  |  |  |  |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)  |             |                |                |                   |  |  |  |  |  |
| TOTAL for the Reporting   | g Period    | (4)            | \$             | 18.73             |  |  |  |  |  |
|   |             |                |                |                   |  |  |  |  |  |
| Total Monetary Contributions and Receipts During this Reporting Period (Add ar<br>totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa |             |                | \$             | 6,868.73          |  |  |  |  |  |
| Total Monetary Contributions and Receipts During this Reporting Period (Add an  | nd enter am | ount           |                |                   |  |  |  |  |  |

# 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 Candidat   | e     |                  | Repo | orting l | Period    |  |    |            |
|--|-------|------------------|------|----------|-----------|--|----|------------|
|  |       |                  |      |          | From: To: |  |    |            |
|  |       | ·                |      |          | DATE      |  |    | AMOUNT     |
| Full Name of Contributing Committee     MO     DAY                           |       |                  |      |          |           |  |    |            |
| 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       |

| PART B<br>ALL OTHER CONTRIBUTIONS<br>\$50.01 TO \$250.00<br>Use this Part to itemize all other contributions with an aggregate value from<br>\$50.01 to \$250.00 in the reporting period.<br>(Exclude contributions from political committees reported in Part A) |  |  |  |                         |      |      |    |                             |  |
|---|--|--|--|-------------------------|------|------|----|-----------------------------|--|
| Name of Filing Committee or Candidate Reporting Period  |  |  |  |                         |      |      |    |                             |  |
| KEEFER WETZEL, DAWN COMMITTEE FRIENDS OF  |  |  |  | From: <u>1/1/2023</u> T |      |      |    | <b>D:</b> <u>12/31/2023</u> |  |
|   |  |  |  |                         | DATE |      |    | AMOUNT                      |  |
| Full Name of Contributor  |  |  |  | мо                      | DAY  | YEAR |    |                             |  |
| Kenneth Miller  |  |  |  |                         |      |      |    | 100.00                      |  |
| Mailing Address       City     Dillsburg     State     Zip Code (Plus - 17019)       PA     17019   |  |  |  | 3                       | 29   | 2023 | \$ | 100.00                      |  |
|   |  |  |  |                         |      |      |    | PAGE TOTAL                  |  |
| Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.  |  |  |  |                         |      |      | \$ | 100.00                      |  |

# 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 |    |            |      |      |        |
|---------------------------------------|-------------|---------|------------------|----|------------|------|------|--------|
|                                       |             |         | From:            |    |            | То:  |      |        |
|                                       |             |         |                  | DA | TE         |      |      | AMOUNT |
| Full Name of Contributing Committee   |             |         |                  | мо | DAY        | YEAR |      | 0.00   |
| Mailing Address                       |             |         |                  |    |            |      | - \$ | 0.00   |
| City                                  | State       | Zip Cod | e (Plus 4)       |    |            |      |      |        |
|                                       |             |         |                  |    |            |      |      |        |
|                                       |             |         |                  |    | PAGE TOTAL |      |      |        |
| Enter Grand Total of Part C on Scheo  | age, Sectio | n 3.    |                  |    | \$         | 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   |  |    |              | Rep                   | orting Pe | riod         |               |                   |                   |  |  |
|---|--|----|--------------|-----------------------|-----------|--------------|---------------|-------------------|-------------------|--|--|
| KEEFER WETZEL, DAWN COMMITTEE F         | RIENDS OF  |    |              | From                  | n:        | <u>1/1/2</u> | <u>023</u> To | :                 | <u>12/31/2023</u> |  |  |
|   |  |    |              |                       | DA        | ATE          |               | I                 | AMOUNT            |  |  |
| Full Name of Contributor                |  |    |              |                       | мо        | DAY          | YEAR          |                   |                   |  |  |
| Dave & Holly Kelly                      |  |    |              |                       | МО        | DAT          | ILAK          | \$                | 500.00            |  |  |
| Mailing Address                         |  |    |              |                       | 11        | 4            | 2023          |                   |                   |  |  |
| City Dillsburg                          | State  | Zi | p Code (Plus | ; 4)                  |           |              |               |                   |                   |  |  |
|   | PA   | 17 | /019         |                       |           |              |               |                   |                   |  |  |
| Employer Name Self employed             |  |    |              |                       | Occupat   | ion          | Busines       | sman              | man               |  |  |
| Employer Mailing Address/Principal Plac | e of Business  |    | City         |                       | State Zi  |              |               | Zip Co            | de (Plus 4)       |  |  |
|   |  |    | Dillsburg    |                       |           | PA           |               | 17019             | )                 |  |  |
| Full Name of Contributor                |  |    |              |                       |           |              |               |                   |                   |  |  |
| Kingsley Blasco                         |  |    |              |                       | мо        | DAY          | YEAR          | \$                | 500.00            |  |  |
| Mailing Address                         |  |    |              |                       | 8         | 15           | 2023          |                   |                   |  |  |
| City Newville                           | State  | Zi | p Code (Plus | ; 4)                  | 0         | 15           |               |                   |                   |  |  |
|   | PA   | 17 | 241          |                       |           |              |               |                   |                   |  |  |
| Employer Name Retired                   |  |    |              |                       | Occupat   | ion          | Self          |                   |                   |  |  |
| Employer Mailing Address/Principal Plac | e of Business  |    | City         |                       |           | State        |               | Zip Co            | de (Plus 4)       |  |  |
|   |  |    | Newville     |                       |           | OR           |               | 17241             |                   |  |  |
| Full Name of Contributor                |  |    |              |                       | NO        | DAY          | VEAD          |                   |                   |  |  |
| Frances X Ryan                          |  |    |              |                       | мо        | DAY          | YEAR          | \$                | 250.00            |  |  |
| Mailing Address                         |  |    |              |                       | 3         | 1            | 2023          |                   |                   |  |  |
| City Lebanon                            | State  | Zi | p Code (Plus | ; 4)                  | 5         | -            |               |                   |                   |  |  |
|   | PA   | 17 | '042         |                       |           |              |               |                   |                   |  |  |
| Employer Name Commonwealth of Pa        |  |    |              |                       | Occupat   | ion          | Legislat      | or                |                   |  |  |
| Employer Mailing Address/Principal Plac | e of Business  |    | City         |                       |           | State        |               | Zip Co            | de (Plus 4)       |  |  |
|   |  |    | Harrisburg   | ]                     |           | PA           |               | 17042             | 2                 |  |  |
| Full Name of Contributor                |  |    |              |                       |           |              |               |                   |                   |  |  |
| Frances X Ryan                          |  |    |              |                       | мо        | DAY          | YEAR          | \$                | 500.00            |  |  |
| Mailing Address                         |  |    |              |                       |           | 15           | 2022          |                   |                   |  |  |
| City Lebanon                            | State  | Zi | p Code (Plus | ; 4)                  | 8         | 15           | 2023          |                   |                   |  |  |
|   | PA   | 17 | '042         |                       |           |              |               |                   |                   |  |  |
| Employer Name Commonwealth of Pa        |  |    |              | Occupation Legislator |           |              |               |                   |                   |  |  |
| Employer Mailing Address/Principal Plac | mployer Mailing Address/Principal Place of Business City |    |              | •                     |           | State        |               | Zip Code (Plus 4) |                   |  |  |
|   |  |    | Harrisburg   | 1                     |           | PA           |               | 17042             | 2                 |  |  |

| Full Name of Contributor                |               |                                  | мо      | DAY | YEAR | F 000.00          |
|---|---------------|----------------------------------|---------|-----|------|-------------------|
| James D. Robinson                       |               |                                  | MO      | DAT | ILAN | \$ 5,000.00       |
| Mailing Address                         |               |                                  | 6       | 25  | 2023 |                   |
| City Gettysburg                         | State         | Zip Code (Plus 4)                | 0       | 25  | 2025 |                   |
|   | PA            | 17325                            |         |     |      |                   |
| Employer Name Self                      | Occupat       | ion                              | Retired |     |      |                   |
| Employer Mailing Address/Principal Plac | e of Business | City                             | State   |     |      | Zip Code (Plus 4) |
|   |               | Gettysburg                       |         | PA  |      | 17325             |
| Enter Grand Total of Part C on Schee    | 4             | <b>PAGE TOTAL</b><br>\$ 6,750.00 |         |     |      |                   |

### 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               |                 | Report                | ing Perio | d   |                             |    |            |
|-------------------------------|-------------------------|-----------------|-----------------------|-----------|-----|-----------------------------|----|------------|
| KEEFER WETZEL, DAWN CO        | MMITTEE FRIENDS OF      |                 | From: <u>1/1/2023</u> |           |     | 3 <b>To:</b> <u>12/31/2</u> |    | .2/31/2023 |
|                               |                         | l               |                       | D         | ATE |                             | А  | MOUNT      |
| Full Name                     |                         |                 |                       | мо        | DAY | YEAR                        |    | 10.72      |
| Adams County National Bank    |                         |                 |                       | MO        | DAT | TEAR                        | \$ | 18.73      |
| Mailing Address               |                         |                 |                       | 12        | 31  | 2023                        |    |            |
| City Gettysburg               | State                   | Zip Code (F     | Plus 4)               |           | 51  | 2025                        |    |            |
|                               | PA                      | 17325           |                       |           |     |                             |    |            |
| Receipt Description Intere    | est                     | •               |                       |           | 1   |                             |    |            |
|                               |                         |                 |                       | _         |     | Γ                           | P  | AGE TOTAL  |
| Enter Grand Total of Part E o | on Schedule I, Detailed | I Summary Page, | Section               | 4.        |     | 4                           | 5  | 18.73      |

### 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 |                             |                   |  |  |  |  |  |
|---|------------------|-----------------------------|-------------------|--|--|--|--|--|
| KEEFER WETZEL, DAWN COMMITTEE FRIENDS OF  | From:            | <u>1/1/2023</u> <b>то</b> : | <u>12/31/2023</u> |  |  |  |  |  |
| . 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 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)        | \$                          | 0.00              |  |  |  |  |  |
| TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (<br>amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 3 |                  | \$                          | 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:     |        |           | То:        |        |      |
|  |          |                   |           | DATE   |           |            | AMOUNT |      |
| Full Name of Contributor                           |          |                   | мо        | DAY    | YEAR      |            |        |      |
| Mailing Address                                    |          |                   |           |        |           | <b>\$</b>  |        | 0.00 |
| City   | State    | Zip Code (Plus 4) |           |        |           |            |        |      |
| Description of Contribution:                       |          |                   |           |        |           | -          |        |      |
| Enter Grand Total of Part F on Sched<br>Section 2. | iled Sum | mary Pag          | e,        |        | PAGE TOTA | <u>، ۱</u> |        |      |
|  |          |                   |           |        |           | \$         |        | 0.00 |

### PAGE 11

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

| Name of Filing Committee or Candidate                          |                  |                   | Re     | porting l    | Period |                       |                           |
|--|------------------|-------------------|--------|--------------|--------|-----------------------|---------------------------|
|  |                  |                   | Fro    | om:          |        | То:                   |                           |
|  |                  |                   |        |              | DATE   |                       | AMOUNT                    |
| Full Name of Contributor                                       |                  |                   |        | мо           | DAY    | YEAR                  |                           |
| Mailing Address  |                  |                   |        |              |        |                       | <b>\$</b> 0.00            |
| City   | State            | Zip Code(Plus 4)  |        |              |        |                       |                           |
| Employer of Contributor  |                  |                   |        | Occupa       | ation  |                       |                           |
| Employer Mailing Address/Principal Plac                        | City             | Stat              | e Zip  | Code(Plus 4) | Descri | ption of Contribution |                           |
| Enter Grand Total of Part G on Sch<br>Summary Page, Section 3. | edule II, In-Kin | d Contributions D | etaile | ed           |        |                       | <b>PAGE TOTAL</b><br>0.00 |

# SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate  |           |                   | Reporti                    | ng Period        |               |       |                   |  |  |  |  |
|--|-----------|-------------------|----------------------------|------------------|---------------|-------|-------------------|--|--|--|--|
| KEEFER WETZEL, DAWN COMMITTEE F        | RIENDS OF |                   | From                       | <u>1/:</u>       | <u>1/2023</u> | То:   | <u>12/31/2023</u> |  |  |  |  |
|  |           |                   |                            | DATE             |               |       | AMOUNT            |  |  |  |  |
| To Whom Paid                           |           |                   | мо                         | DAY              | YEAR          |       |                   |  |  |  |  |
| Pa Freedom fund                        |           |                   | МО                         |                  |               |       |                   |  |  |  |  |
| Mailing Address                        |           |                   | 1                          | 3                | 2023          | \$    | 10,000.00         |  |  |  |  |
| City Lewisburg                         | State     | Zip Code (Plus 4) | Descrip                    | tion of Exp      | enditure      |       |                   |  |  |  |  |
|  | PA        | 17837             | Donation                   |                  |               |       |                   |  |  |  |  |
| To Whom Paid                           |           |                   | мо                         | DAY              | YEAR          |       |                   |  |  |  |  |
| J.C. Consulting                        |           |                   | MO                         |                  |               |       |                   |  |  |  |  |
| Mailing Address                        |           |                   | 1                          | 17               | 2023          | \$    | 250.00            |  |  |  |  |
| City Etters                            | State     | Zip Code (Plus 4) | Description of Expenditure |                  |               |       |                   |  |  |  |  |
| PA 17319                               |           |                   |                            | Social Media     |               |       |                   |  |  |  |  |
| To Whom Paid<br>B J's Wholesalers      |           |                   |                            | DAY              | YEAR          |       |                   |  |  |  |  |
| Mailing Address                        |           |                   | 1                          | 17               | 2023          | \$    | 84.06             |  |  |  |  |
| City Camp Hill                         | State     | Zip Code (Plus 4) | Descript                   | l<br>tion of Exp | enditure      |       |                   |  |  |  |  |
|  | PA        | 17011             | Fuel                       |                  |               |       |                   |  |  |  |  |
| To Whom Paid                           |           |                   |                            |                  |               |       |                   |  |  |  |  |
| Spirit Airline                         |           |                   | мо                         | DAY              | YEAR          |       |                   |  |  |  |  |
| Mailing Address                        |           |                   | 2                          | 1                | 2023          | \$    | 3.50              |  |  |  |  |
| <b>City</b> Mirama                     | State     | Zip Code (Plus 4) | Descrip                    | tion of Exp      | enditure      |       |                   |  |  |  |  |
|  | FL        | 33025             | Coffee                     |                  |               |       |                   |  |  |  |  |
| To Whom Paid                           |           |                   | MO                         | DAY              | VEAD          |       |                   |  |  |  |  |
| Manchester Fire Co,                    |           |                   | мо                         | DAY              | YEAR          |       |                   |  |  |  |  |
| Mailing Address                        |           |                   | 2                          | 9                | 2023          | \$    | 500.00            |  |  |  |  |
| City York                              | State     | Zip Code (Plus 4) | Descript                   | tion of Exp      | enditure      |       |                   |  |  |  |  |
|  | PA        | 17408             | Donatio                    | n                |               |       |                   |  |  |  |  |
| To Whom Paid                           |           |                   | мо                         | DAY              | YEAR          |       |                   |  |  |  |  |
| 3 J's Wholesalers                      |           |                   | МО                         |                  |               |       |                   |  |  |  |  |
| lailing Address                        |           | 2                 | 14                         | 2023             | \$            | 83.29 |                   |  |  |  |  |
| City Camp Hill State Zip Code (Plus 4) |           |                   | Descript                   | l<br>tion of Exp | enditure      | I     |                   |  |  |  |  |
|  | PA 17011  |                   |                            |                  | Fuel          |       |                   |  |  |  |  |

| To Whom Paid   |  |       |                   | мо  | DAY              | YEAR     |    |        |  |  |  |
|--|--|-------|-------------------|---|------------------|----------|----|--------|--|--|--|
| Bakers   | Bakers Rest                            |       |                   |   |                  |          |    |        |  |  |  |
| Mailing  | Address                                |       |                   | 2   | 16               | 2023     | \$ | 14.51  |  |  |  |
| City   | City Dillsburg State Zip Code (Plus 4) |       |                   |   |                  | enditure |    |        |  |  |  |
|  | PA 17019                               |       |                   |   | Meeting          |          |    |        |  |  |  |
| To Who   | To Whom Paid                           |       |                   |   | DAY              | YEAR     |    |        |  |  |  |
| Eden R   | Eden Resort                            |       |                   |   |                  | TLAK     |    |        |  |  |  |
| Mailing Address  |  |       |                   | 2   | 17               | 2023     | \$ | 24.00  |  |  |  |
| City         Lancaster         State         Zip Code (Plus 4) |  |       |                   | Descrip                                   | tion of Exp      | enditure |    |        |  |  |  |
|  |  | PA    | 17501             | Luncheo                                   | on meeting       |          |    |        |  |  |  |
| To Whom Paid<br>HRCC   |  |       |                   | мо  | DAY              | YEAR     |    |        |  |  |  |
|  | Address                                |       |                   | 2   | 15               | 2023     | \$ | 260.00 |  |  |  |
| City   | Harrisburg                             | State | Zip Code (Plus 4) | Descrip                                   | l<br>tion of Exp | enditure |    |        |  |  |  |
| -  |  | PA    | 17108             | Advertis                                  |                  |          |    |        |  |  |  |
|  | To Whom Paid<br>J.C. Consulting        |       |                   |   | DAY              | YEAR     |    |        |  |  |  |
|  | Address                                |       |                   | 2   | 21               | 2023     | \$ | 250.00 |  |  |  |
|  |  | 1     |                   |   |                  |          |    |        |  |  |  |
| City   | Etters                                 | State | Zip Code (Plus 4) | Description of Expenditure                |                  |          |    |        |  |  |  |
|  |  | PA    | 17319             | Social Media                              |                  |          |    |        |  |  |  |
|  | om Paid<br>ounty Agriculture Society   |       |                   | мо  | DAY              | YEAR     |    |        |  |  |  |
| Mailing  | Address                                |       |                   | 2   | 22               | 2023     | \$ | 400.00 |  |  |  |
| City   | York                                   | State | Zip Code (Plus 4) | Description of Expenditure                |                  |          |    |        |  |  |  |
|  |  | PA    | 17404             | Advertising                               |                  |          |    |        |  |  |  |
| To Who   | om Paid                                |       |                   | мо  | DAY              | YEAR     |    |        |  |  |  |
| Mailing  | Address                                |       |                   | 3   | 3                | 2023     | \$ | 800.00 |  |  |  |
| Citra  | Dillahama                              | State | Zip Code (Plus 4) | Descript                                  | l                |          |    |        |  |  |  |
| City   | Dillsburg                              | PA    | 17019             | Description of Expenditure Annual Banquet |                  |          |    |        |  |  |  |
| To Who   | om Paid                                |       | 17019             | MO  | DAY              | YEAR     |    |        |  |  |  |
| Sunoco   | )                                      |       |                   |   |                  |          |    |        |  |  |  |
| Mailing  | Address                                | -     | -                 | 3   | 1                | 2023     | \$ | 85.32  |  |  |  |
| City   | Natiopnal Harbor                       | State | Zip Code (Plus 4) | Descrip                                   | tion of Exp      | enditure |    |        |  |  |  |
|  |  | MD    | 20745             | Fuel                                      |                  |          |    |        |  |  |  |
| To Who   | om Paid                                |       |                   | мо  | DAY              | YEAR     |    |        |  |  |  |
| NPT Sp   | oorts Bar                              |       |                   |   |                  |          |    |        |  |  |  |
| Mailing  | Address                                |       |                   | 3   | 2                | 2023     | \$ | 93.07  |  |  |  |
| City   | National Harbor                        | State | Zip Code (Plus 4) | Descrip                                   | tion of Exp      | enditure |    |        |  |  |  |
| MD 20745   |  |       |                   | Meeting                                   |                  |          |    |        |  |  |  |

|  |                             |       |                   |                            |                  |                  | PA | GE 14    |  |  |
|--|-----------------------------|-------|-------------------|----------------------------|------------------|------------------|----|----------|--|--|
| To Wh  | nom Paid                    |       |                   | мо                         | DAY              | YEAR             |    |          |  |  |
| Whee   | ler for Pa                  |       |                   |                            |                  | /                |    |          |  |  |
| Mailin   | g Address                   |       |                   | 3                          | 8                | 2023             | \$ | 500.00   |  |  |
| City   | Red Lion                    | State | Zip Code (Plus 4) | Description of Expenditure |                  |                  |    |          |  |  |
|  |                             | РА    | 17356             | Donatio                    | n                |                  |    |          |  |  |
| To Wh  | nom Paid                    |       |                   | мо                         | DAY              | YEAR             |    |          |  |  |
| Cadilla  | ac Ranch                    |       |                   |                            |                  | 12/40            |    |          |  |  |
| Mailin   | g Address                   |       |                   | 3                          | 3                | 2023             | \$ | 46.21    |  |  |
| City   | Oxon Hill                   | State | Zip Code (Plus 4) | Description of Expenditure |                  |                  |    |          |  |  |
|  |                             | MD    | 20745             | Lunch                      |                  |                  |    |          |  |  |
| To Whom Paid   |                             |       |                   | мо                         | DAY              | YEAR             |    |          |  |  |
| Redstone American  |                             |       |                   |                            |                  | TEAR             |    |          |  |  |
| Mailing Address  |                             |       |                   |                            | 6                | 2023             | \$ | 96.77    |  |  |
| City         National Harbor         State         Zip Code (Plus 4) |                             |       |                   |                            | L<br>tion of Exp | enditure         |    |          |  |  |
| MD 20745   |                             |       |                   | Dinner                     | meeting          |                  |    |          |  |  |
| To Wh  | nom Paid                    |       |                   |                            | DAY              | VEAD             |    |          |  |  |
| Gaylo  | rd National Airport         |       |                   | мо                         | DAY              | YEAR             |    |          |  |  |
| Mailing Address  |                             |       |                   | 3                          | 6                | 2023             | \$ | 1,076.76 |  |  |
| City   | National Harbor             | State | Zip Code (Plus 4) | Description of Expenditure |                  |                  |    |          |  |  |
|  |                             | MD    | 20745             | Conference                 |                  |                  |    |          |  |  |
| To Wh  | nom Paid                    |       |                   | мо                         | DAY              | YEAR             |    |          |  |  |
| Sheet  | Z                           |       |                   | MO                         |                  | TEAK             |    |          |  |  |
| Mailin   | g Address                   |       |                   | 4                          | 19               | 2023             | \$ | 82.95    |  |  |
| City   | Gettysburg                  | State | Zip Code (Plus 4) | Descrip                    | tion of Exp      | enditure         |    |          |  |  |
|  |                             | PA    | 17325             | Fuel                       |                  |                  |    |          |  |  |
| To Wh  | nom Paid                    |       |                   | мо                         | DAY              | YEAR             |    |          |  |  |
| Greys  | tone Brew House             |       |                   | МО                         |                  |                  |    |          |  |  |
| Mailin   | g Address                   |       |                   | 4                          | 19               | 2023             | \$ | 54.36    |  |  |
| City   | Dillsburg                   | State | Zip Code (Plus 4) | Descrip                    | tion of Exp      | enditure         |    |          |  |  |
|  |                             | PA    | 17019             | Meeting                    | J                |                  |    |          |  |  |
| To Wh  | nom Paid                    |       |                   | мо                         | DAY              | YEAR             |    |          |  |  |
| Sheet  | Z                           |       |                   | MO                         |                  | TEAR             |    |          |  |  |
| Mailin   | g Address                   |       |                   | 4                          | 14               | 2023             | \$ | 89.22    |  |  |
| City Gettysburg State Zip Code (Plus 4)                              |                             |       |                   | Descrip                    | tion of Exp      | enditure         |    |          |  |  |
| City   | PA 17325                    |       |                   |                            |                  |                  |    |          |  |  |
| City   |                             | PA    | 17325             | Fuel                       |                  |                  |    |          |  |  |
|  | nom Paid                    | PA    | 1/325             |                            | DAY              | VEAD             |    |          |  |  |
| To Wh  | nom Paid<br>tone Brew House | PA    | 1/325             | MO                         | DAY              | YEAR             |    |          |  |  |
| <b>To Wh</b><br>Greys  |                             | РА    | 1/325             |                            | <b>DAY</b> 14    | <b>YEAR</b> 2023 | \$ | 41.61    |  |  |
| <b>To Wh</b><br>Greys  | tone Brew House             | State | Zip Code (Plus 4) | <b>мо</b><br>4             |                  | 2023             | \$ | 41.61    |  |  |

|   |  |       |                   |                            |                            |          | 14 | GL 15    |  |  |
|---|--|-------|-------------------|----------------------------|----------------------------|----------|----|----------|--|--|
| To Wł   | nom Paid   |       |                   | мо                         | DAY                        | YEAR     |    |          |  |  |
| J.C. Consulting   |  |       |                   | 110                        |                            |          |    |          |  |  |
| Mailin  | g Address  |       |                   | 4                          | 23                         | 2023     | \$ | 250.00   |  |  |
| City  | Etters   | State | Zip Code (Plus 4) | Descrip                    | tion of Exp                | enditure |    |          |  |  |
|   |  | PA    | 17319             | Social N                   | 1edia                      |          |    |          |  |  |
| To W  | nom Paid   |       |                   |                            | DAY                        | VEAD     |    |          |  |  |
| HRCC  |  |       |                   | мо                         | DAY                        | YEAR     |    |          |  |  |
| Mailin  | g Address  |       |                   | 5                          | 5                          | 2023     | \$ | 250.00   |  |  |
| City  | Harrisburg   | State | Zip Code (Plus 4) | Description of Expenditure |                            |          |    |          |  |  |
| PA 17108  |  |       |                   | Donatio                    | 'n                         |          |    |          |  |  |
| To Whom Paid  |  |       |                   |                            |                            |          |    |          |  |  |
| Northern York County for Excellence                                 |  |       |                   | мо                         | DAY                        | YEAR     |    |          |  |  |
| Mailing Address   |  |       |                   | 5                          | 3                          | 2023     | \$ | 2,000.00 |  |  |
| City         New Cumberland         State         Zip Code (Plus 4) |  |       |                   | Description of Expenditure |                            |          |    |          |  |  |
|   |  | PA    | 17070             | Donatio                    | n                          |          |    |          |  |  |
| To W  | nom Paid   |       |                   |                            | DAY                        | VEAD     |    |          |  |  |
| Rutte   | rs Gas   |       |                   | мо                         | DAY                        | YEAR     |    |          |  |  |
| Mailing Address   |  |       |                   | 6                          | 28                         | 2023     | \$ | 75.22    |  |  |
| City  | City     Dillsburg     State     Zip Code (Plus 4) |       |                   |                            | Description of Expenditure |          |    |          |  |  |
|   |  | PA    | 17019             | Fuel                       |                            |          |    |          |  |  |
| To Wł   | nom Paid   |       |                   | мо                         | DAY                        | YEAR     |    |          |  |  |
| J.C. C  | onsulting  |       |                   | MO                         |                            | TEAK     |    |          |  |  |
| Mailin  | g Address  |       |                   | 6                          | 20                         | 2023     | \$ | 250.00   |  |  |
| City  | Etters   | State | Zip Code (Plus 4) | Description of Expenditure |                            |          |    |          |  |  |
|   |  | PA    | 17319             | Social N                   | 1edia                      |          |    |          |  |  |
| To W  | nom Paid   |       |                   | мо                         | DAY                        | YEAR     |    |          |  |  |
| Dillsb  | urg Community Fair                                 |       |                   | MO                         |                            | TEAK     |    |          |  |  |
| Mailin  | g Address  |       |                   | 8                          | 3                          | 2023     | \$ | 120.00   |  |  |
| City  | Dillsburg  | State | Zip Code (Plus 4) | Descrip                    | tion of Exp                | enditure |    |          |  |  |
|   | -  | PA    | 17019             | Advertis                   | sing                       |          |    |          |  |  |
| To W  | nom Paid   |       |                   |                            | DAY                        | VEAD     |    |          |  |  |
| Shiloł  | n Fire Company                                     |       |                   | мо                         | DAY                        | YEAR     |    |          |  |  |
| Mailin  | g Address  |       |                   | 8                          | 10                         | 2023     | \$ | 100.00   |  |  |
| City  | Shiloh   | State | Zip Code (Plus 4) | Descrip                    | tion of Exp                | enditure |    |          |  |  |
|   |  | PA    | 17001             | Donation                   |                            |          |    |          |  |  |
| To Whom Paid  |  |       |                   | мо                         | DAY                        | YEAR     |    |          |  |  |
| IO Wr   | B J's Wholesalers                                  |       |                   |                            |                            |          |    |          |  |  |
|   | Wholesalers  |       |                   |                            |                            |          |    |          |  |  |
| B J's \   | Wholesalers<br>g Address                           |       |                   | 8                          | 18                         | 2023     | \$ | 85.88    |  |  |
| B J's \   |  | State | Zip Code (Plus 4) |                            | 18<br>tion of Exp          |          | \$ | 85.88    |  |  |

| To Wh  | nom Paid   | мо          | DAY   | YEAR   |  |  |    |          |  |  |
|--|--|-------------|---|--|--|--|----|----------|--|--|
| J.C. C   | J.C. Consulting  |             |   |  |  |  |    |          |  |  |
| Mailin   | ıg Address   |             |   | 8  | 25   | 2023   | \$ | 500.00   |  |  |
| City   | Etters   | State       | Zip Code (Plus 4)                               | Descript   | tion of Exp  | enditure   |    |          |  |  |
|  |  | PA          | 17319   | social m   | nedia  |  |    |          |  |  |
| To Wh  | nom Paid   |             |   | мо   | DAY  | YEAR   |    |          |  |  |
| Apple  | .com   |             |   | мо   |  | TLAK   |    |          |  |  |
| Mailin   | ng Address   |             |   | 8  | 28   | 2023   | \$ | 1,186.14 |  |  |
| City   | Lancaster  | State       | Zip Code (Plus 4)                               | Description of Expenditure   |  |  |    |          |  |  |
| PA 17601   |  |             |   | Laptop   |  |  |    |          |  |  |
| To Wh  | nom Paid   |             |   |  | DAY  | YEAR   |    |          |  |  |
| Royer's Flowers  |  |             |   | мо   |  | TEAR   |    |          |  |  |
| Mailing Address  |  |             |   | 9  | 1  | 2023   | \$ | 63.05    |  |  |
| City         Camp Hill         State         Zip Code (Plus 4) |  |             |   |  | i<br>tion of Exp   | enditure   |    |          |  |  |
|  |  | PA          | 17011   | Flowers  |  |  |    |          |  |  |
| To Wh  | nom Paid   |             |   | мо   | DAY  | YEAR   |    |          |  |  |
| B J's ۱  | Wholesalers  |             |   | мо   |  | TEAK   |    |          |  |  |
| Mailing Address  |  |             |   | 9  | 9  | 2023   | \$ | 86.85    |  |  |
| City     Camp Hill     State     Zip Code (Plus 4)             |  |             |   | Descript   | i<br>tion of Exp   | enditure   |    |          |  |  |
|  |  | PA          | 17011   | Fuel   |  |  |    |          |  |  |
| To Wh  | nom Paid   |             |   | мо   | DAY  | YEAR   |    |          |  |  |
| Uber   |  |             |   | МО   |  | TEAR   |    |          |  |  |
| Mailin   | ng Address   |             |   | 9  | 18   | 2023   | \$ | 56.90    |  |  |
| City   | San Francisco  | State       | Zip Code (Plus 4)                               | Descrip  | tion of Exp  | enditure   | 1  |          |  |  |
|  |  | CA          | 94103   | Cab Far  | e  |  |    |          |  |  |
| To Wh  |  |             |   | Cabilat  | -  |  |    |          |  |  |
| Hilton Media Grille  |  |             |   |  |  | VEAR   |    |          |  |  |
| Hilton   | nom Paid<br>1 Media Grille   |             |   | мо   | DAY  | YEAR   |    |          |  |  |
|  |  |             |   |  |  | <b>YEAR</b><br>2023  | \$ | 39.56    |  |  |
|  | Media Grille   | State       | Zip Code (Plus 4)                               | <b>MO</b> 9  | DAY  | 2023   | \$ | 39.56    |  |  |
| Mailin   | n Media Grille<br>I <b>g Address</b>   | State<br>TX |   | <b>MO</b> 9  | DAY<br>18<br>tion of Exp   | 2023   | \$ | 39.56    |  |  |
| Mailin<br>City   | n Media Grille<br>I <b>g Address</b>   |             | Zip Code (Plus 4)                               | MO<br>9<br>Descript<br>Lunched   | DAY<br>18<br>tion of Exp   | 2023<br>enditure   | \$ | 39.56    |  |  |
| Mailin<br>City   | n Media Grille<br>ng Address<br>Dallas   |             | Zip Code (Plus 4)                               | MO<br>9<br>Descript  | DAY<br>18<br>tion of Exp   | 2023   | \$ | 39.56    |  |  |
| Mailin<br>City<br>To Wh<br>Uber                                | n Media Grille<br>ng Address<br>Dallas   |             | Zip Code (Plus 4)                               | MO<br>9<br>Descript<br>Lunched   | DAY<br>18<br>tion of Exp   | 2023<br>enditure   | \$ | 39.56    |  |  |
| Mailin<br>City<br>To Wh<br>Uber                                | n Media Grille<br>ng Address<br>Dallas<br>nom Paid   |             | Zip Code (Plus 4)                               | MO<br>9<br>Descript<br>Luncheo<br>MO<br>9                                    | DAY<br>18<br>tion of Exp<br>on<br>DAY                            | 2023<br>enditure<br>YEAR<br>2023                             |    |          |  |  |
| Mailin<br>City<br>To Wh<br>Uber<br>Mailin                      | n Media Grille<br>ng Address<br>Dallas<br>nom Paid<br>ng Address                                   | TX          | <b>Zip Code (Plus 4)</b><br>17732               | MO<br>9<br>Descript<br>Luncheo<br>MO<br>9                                    | DAY<br>18<br>tion of Exp<br>on<br>DAY<br>20<br>tion of Exp       | 2023<br>enditure<br>YEAR<br>2023                             |    |          |  |  |
| Mailin<br>City<br>To Wh<br>Uber<br>Mailin<br>City              | n Media Grille<br>ng Address<br>Dallas<br>nom Paid<br>ng Address                                   | TX<br>State | Zip Code (Plus 4)<br>17732<br>Zip Code (Plus 4) | MO<br>9<br>Descript<br>Luncheo<br>MO<br>9<br>Descript<br>Cab Far             | DAY<br>18<br>tion of Exp<br>on<br>DAY<br>20<br>tion of Exp<br>e  | 2023<br>enditure<br>YEAR<br>2023<br>enditure                 |    |          |  |  |
| Mailin<br>City<br>To Wh<br>Uber<br>Mailin<br>City              | Media Grille  g Address Dallas  nom Paid  g Address San Francisco  nom Paid                        | TX<br>State | Zip Code (Plus 4)<br>17732<br>Zip Code (Plus 4) | MO<br>9<br>Descript<br>Lunchec<br>MO<br>9<br>Descript                        | DAY<br>18<br>tion of Exp<br>on<br>DAY<br>20<br>tion of Exp       | 2023<br>enditure<br>YEAR<br>2023                             |    |          |  |  |
| Mailin<br>City<br>Uber<br>Mailin<br>City<br>To Wh<br>Sheet     | Media Grille  g Address Dallas  nom Paid  g Address San Francisco  nom Paid                        | TX<br>State | Zip Code (Plus 4)<br>17732<br>Zip Code (Plus 4) | MO<br>9<br>Descript<br>Luncheo<br>MO<br>9<br>Descript<br>Cab Far             | DAY<br>18<br>tion of Exp<br>on<br>DAY<br>20<br>tion of Exp<br>e  | 2023<br>enditure<br>YEAR<br>2023<br>enditure                 |    |          |  |  |
| Mailin<br>City<br>Uber<br>Mailin<br>City<br>To Wh<br>Sheet     | n Media Grille<br>ng Address<br>Dallas<br>nom Paid<br>ng Address<br>San Francisco<br>nom Paid<br>z | TX<br>State | Zip Code (Plus 4)<br>17732<br>Zip Code (Plus 4) | MO<br>9<br>Descript<br>Lunched<br>MO<br>9<br>Descript<br>Cab Far<br>MO<br>10 | DAY<br>18<br>tion of Exp<br>DAY<br>20<br>tion of Exp<br>e<br>DAY | 2023<br>enditure<br>YEAR<br>2023<br>enditure<br>YEAR<br>2023 | \$ | 32.26    |  |  |

| To Wh   | To Whom Paid         |       |                   |                            |             |          |    |        |  |  |
|---|----------------------|-------|-------------------|----------------------------|-------------|----------|----|--------|--|--|
| YCRC  | YCRC                 |       |                   |                            | DAY         | YEAR     |    |        |  |  |
| Mailin  | g Address            |       |                   | 10                         | 2           | 2023     | \$ | 600.00 |  |  |
| City  | York                 | State | Zip Code (Plus 4) | Description of Expenditure |             |          |    |        |  |  |
|   |                      | РА    | 17406             | An nual Dinner             |             |          |    |        |  |  |
| To Wh   | To Whom Paid         |       |                   |                            | DAY         | VEAD     |    |        |  |  |
| Greyst  | Greystone Brew House |       |                   |                            | DAT         | YEAR     |    |        |  |  |
| Mailing   | Mailing Address      |       |                   |                            | 2           | 2023     | \$ | 67.24  |  |  |
| City  | Dillsburg            | State | Zip Code (Plus 4) | Descript                   | tion of Exp | enditure |    |        |  |  |
| PA 17019  |                      |       |                   | Meeting                    |             |          |    |        |  |  |
| To Wh   | om Paid              |       |                   | мо                         | DAY         | YEAR     |    |        |  |  |
| Waldo   | Waldorf 1100         |       |                   |                            | DAT         | TEAK     |    |        |  |  |
| Mailing Address   |                      |       |                   | 9                          | 25          | 2023     | \$ | 153.40 |  |  |
| City         Washington         State         Zip Code (Plus 4) |                      |       |                   |                            | tion of Exp | enditure |    |        |  |  |
|   |                      | DC    | 23415             | Meeting                    |             |          |    |        |  |  |
| To Wh   | om Paid              |       |                   | мо                         | DAY         | YEAR     |    |        |  |  |
| 7- Elev   | ven                  |       |                   |                            |             |          |    |        |  |  |
| Mailing Address   |                      |       |                   | 9                          | 11          | 2023     | \$ | 62.54  |  |  |
| CityThurmontStateZip Code (Plus 4)                              |                      |       |                   | Descript                   | tion of Exp | enditure |    |        |  |  |
|   |                      | MD    | 22234             | Fuel                       |             |          |    |        |  |  |
| To Wh   | om Paid              |       |                   | мо                         | DAY         | YEAR     |    |        |  |  |
| Rutter  | 's Gas               |       |                   |                            |             |          |    |        |  |  |
| Mailin  | g Address            |       |                   | 11                         | 6           | 2023     | \$ | 90.07  |  |  |
| City  | Dillsburg            | State | Zip Code (Plus 4) | Descript                   | tion of Exp | enditure |    |        |  |  |
|   |                      | PA    | 17019             | Fuel                       |             |          |    |        |  |  |
| To Wh   | om Paid              |       |                   | мо                         | DAY         | YEAR     |    |        |  |  |
| Rutter  | rs Gas               |       |                   |                            |             |          |    |        |  |  |
| Mailin  | g Address            |       |                   | 11                         | 6           | 2023     | \$ | 86.69  |  |  |
| City  | Dillsburg            | State | Zip Code (Plus 4) | Description of Expenditure |             |          |    |        |  |  |
|   |                      | РА    | 17019             | Fuel                       |             |          |    |        |  |  |
| To Wh   | om Paid              |       |                   | мо                         | DAY         | YEAR     |    |        |  |  |
| Hampt   | ton Inn              |       |                   |                            |             |          |    |        |  |  |
| Mailing   | g Address            |       | -                 | 11                         | 6           | 2023     | \$ | 165.25 |  |  |
| City  | Warren               | State | Zip Code (Plus 4) | Descript                   | ion of Exp  | enditure |    |        |  |  |
|   |                      | PA    | 16365             | Fuel                       |             |          |    |        |  |  |
| To Wh   | om Paid              |       |                   | мо                         | DAY         | YEAR     |    |        |  |  |
| Barry   | Hammaker             |       |                   |                            |             |          |    |        |  |  |
| Mailin  | Mailing Address      |       |                   |                            | 27          | 2023     | \$ | 500.00 |  |  |
|   |                      |       |                   |                            |             |          |    |        |  |  |
| City  | Dillsburg            | State | Zip Code (Plus 4) | Descript                   | ion of Exp  | enditure |    |        |  |  |

|  |                               |                     |                    |                            | 1           | 1        | I  |            |  |  |
|--|-------------------------------|---------------------|--------------------|----------------------------|-------------|----------|----|------------|--|--|
| To Wh                                      | To Whom Paid                  |                     |                    |                            | DAY         | YEAR     |    |            |  |  |
| Amtra                                      | Amtrack                       |                     |                    |                            |             |          |    |            |  |  |
| Mailin                                     | g Address                     |                     |                    | 11                         | 20          | 2023     | \$ | 140.00     |  |  |
| City                                       | Washington                    | State               | Zip Code (Plus 4)  | Descript                   | tion of Exp | enditure |    |            |  |  |
|  | DC 20002                      |                     |                    |                            | Travel      |          |    |            |  |  |
| To Wh                                      | To Whom Paid                  |                     |                    |                            | DAY         | YEAR     |    |            |  |  |
| Brothe                                     | Brothers Rest                 |                     |                    |                            | DAT         | TEAR     |    |            |  |  |
| Mailin                                     | Mailing Address               |                     |                    |                            | 2           | 2023     | \$ | 77.39      |  |  |
| City Mechanicsburg State Zip Code (Plus 4) |                               |                     |                    | Descript                   | tion of Exp | enditure |    |            |  |  |
|  |                               | PA                  | 17055              | Meeting                    |             |          |    |            |  |  |
| To Wh                                      | om Paid                       |                     |                    | мо                         | DAY         | YEAR     |    |            |  |  |
| J.C. C                                     | onsulting                     |                     |                    | MO                         | DAT         | TLAN     |    |            |  |  |
| Mailin                                     | g Address                     |                     |                    | 12                         | 5           | 2023     | \$ | 750.00     |  |  |
| City                                       | Etters                        | State               | Zip Code (Plus 4)  | Descript                   | tion of Exp | enditure |    |            |  |  |
|  |                               | PA                  | 17319              | Social Media               |             |          |    |            |  |  |
| To Wh                                      | om Paid                       |                     |                    | мо                         | DAY         | YEAR     |    |            |  |  |
| Ameri                                      | can Conservative Union        |                     |                    | Pie                        |             |          |    |            |  |  |
| Mailin                                     | g Address                     |                     |                    | 2                          | 2           | 2023     | \$ | 29.50      |  |  |
| City                                       | Alexandria                    | State               | Zip Code (Plus 4)  | Description of Expenditure |             |          |    |            |  |  |
|  |                               | VA                  | 22314              | Meeting tickets            |             |          |    |            |  |  |
| To Wh                                      | om Paid                       |                     |                    | мо                         | DAY         | YEAR     |    |            |  |  |
| Ameri                                      | can Conservative Union        |                     |                    | MO                         |             |          |    |            |  |  |
| Mailin                                     | g Address                     |                     |                    | 2                          | 2           | 2023     | \$ | 29.50      |  |  |
| City                                       | Alexandria                    | State               | Zip Code (Plus 4)  | Descript                   | tion of Exp | enditure | I  | ĺ          |  |  |
|  |                               | VA                  | 22314              | Meeting                    | Tickets     |          |    |            |  |  |
|  |                               |                     |                    |                            |             |          |    | PAGE TOTAL |  |  |
| Enter                                      | Grand Total of Expenditures o | on Page 1, Report C | over Page, Item D. |                            |             |          | \$ | 22,776.00  |  |  |