

# Campaign Finance Report

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

<b>Filer Identification Number :</b> 20220187		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>			
<b>Name of Filing Committee, Candidate or Lobbyist:</b> FRIENDS OF STEPHENIE SCIALABBA											
<b>Street Address:</b> P.O. BOX 2350											
<b>City:</b> CRANBERRY TWP					<b>State:</b> PA		<b>Zip Code:</b> 16066-3452				
<b>TYPE OF REPORT</b>  (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	<input checked="" type="checkbox"/> No		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2023	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>			
<b>Name of Office Sought by Candidate:</b>					<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	REP 10			
					11	7	2023	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>		
		1	1	2023		12	31	2023			
<b>A. Amount Brought Forward From Last Report</b>					\$ 40,788.79						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>					\$ 6,600.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>					\$ 47,388.79						
<b>D. Total Expenditures (From Schedule III)</b>					\$ 20,354.76						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>					\$ 27,034.03						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>					\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>					\$ 10,000.00						

## 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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF STEPHENIE SCIALABBA	From: <u>1/1/2023</u> To: <u>12/31/2023</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 500.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 500.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 5,100.00
<b>All Other Contributions (Part D)</b>	\$ 1,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 6,100.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 6,600.00
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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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF STEPHENIE SCIALABBA	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2023</u> <b>To:</b> <u>12/31/2023</u>
<b>DATE</b>	
<b>AMOUNT</b>	

<b>Full Name of Contributing Committee</b> ARCONIC INC EMPLOYEES VOLUNTARY PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 201 ISABELLA STREET			11	27	2023	
<b>City</b> PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15212				

  

<b>Full Name of Contributing Committee</b> PA ASSN OF NURSE ANESTHETISTS PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 400 W. WILSON BRIDGE ROAD			6	19	2023	
<b>City</b> WORTHINGTON	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 430852259				

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

<b>PAGE TOTAL</b>
\$ 500.00



# 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF STEPHENIE SCIALABBA	<b>From:</b> <u>1/1/2023</u> <b>To:</b> <u>12/31/2023</u>

				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
ENERGY TRANSFER EMPLOYEE MANAGEMENT COMPANY PAC				6	19	2023	
Mailing Address1005 CONGRESS AVE SUITE 995							
CityAUSTIN	StateTX	Zip Code (Plus 4)787012469					
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
HOSPITAL & HEALTHSYSTEM ASSOC OF PA PAC(HAPAC)				7	6	2023	
Mailing Address30 NORTH THIRD STREET STE 600 PO BOX 8600							
CityHARRISBURG	StatePA	Zip Code (Plus 4)17101					
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
HIGHMARK PAC OF HIGHMARK INC				6	22	2023	
Mailing Address1800 CENTER ST							
CityCAMP HILL	StatePA	Zip Code (Plus 4)170890000					
Full Name of Contributing Committee				MO	DAY	YEAR	\$300.00
FIRSTENERGY PAC				6	22	2023	
Mailing Address76 S MAIN ST							
CityAKRON	StateOH	Zip Code (Plus 4)443080000					
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
THE PENNSYLVANIA INSURANCE PAC				6	22	2023	
Mailing Address409 NORTH SECOND STREET STE 202							
CityHARRISBURG	StatePA	Zip Code (Plus 4)17101					
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
PABAR PAC (PA BAR ASSN)				6	13	2023	
Mailing Address100 SOUTH STREET							
CityHARRISBURG	StatePA	Zip Code (Plus 4)17101					

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
PSCOA PAC			6	16	2023	
Mailing Address	2421 N FRONT STREET					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17110	

Full Name of Contributing Committee			MO	DAY	YEAR	\$300.00
CHAMBER PAC			6	16	2023	
Mailing Address	1 COMMECE SQ 417 WALNUT ST					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	171010000	

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
BETTER PENNSYLVANIA PAC			6	16	2023	
Mailing Address	121 STATE STREET					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17101	

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
NFG PAPAC (NATIONAL FUEL GAS)			6	20	2023	
Mailing Address	PO BOX 2081					
City	ERIE	State	PA	Zip Code (Plus 4)	165120000	

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
UGI UTILITIES INC/UGI ENERGY SERVICES LLC PAC			7	25	2023	
Mailing Address	1 UGI DRIVE					
City	DENVER	State	PA	Zip Code (Plus 4)	17517	

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

PAGE TOTAL

\$ 5,100.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF STEPHENIE SCIALABBA	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2023</u> <b>To:</b> <u>12/31/2023</u>
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				DATE	AMOUNT	
Full Name of Contributor	MO	DAY	YEAR			
ERIC CLANCY				\$ 1,000.00		
<b>Mailing Address</b> 225 GRANVIEW AVENUE	6	15	2023			
<b>City</b> CAMP HILL <b>State</b> PA <b>Zip Code (Plus 4)</b> 17011						
<b>Employer Name</b> DELTA DEVELOPMENT GROUP	<b>Occupation</b> EXECUTIVE VICE PRESIDENT					
<b>Employer Mailing Address/Principal Place of Business</b> 225 GRANDVIEW AVE	<b>City</b> CAMP HILL		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17011		

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

<b>PAGE TOTAL</b>
\$ 1,000.00

## 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: <span style="float: right;">To:</span>
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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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF STEPHENIE SCIALABBA		From: <u>1/1/2023</u> To: <u>12/31/2023</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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:

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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF STEPHENIE SCIALABBA	From <u>1/1/2023</u> To: <u>12/31/2023</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
BONEFISH GRILL				
<b>Mailing Address</b> 3505 GETTYSBURG ROAD	1	4	2023	\$ 1,407.19
<b>City</b> CAMP HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17011	<b>Description of Expenditure</b> DINNER FOR VOLUNTEERS, POLL WORKERS AND FAMILY RE SWEARING-IN CEREMONY	
To Whom Paid	MO	DAY	YEAR	
C and J CATERING				
<b>Mailing Address</b> 903 SPRING GARDEN DRIVE	1	4	2023	\$ 2,023.94
<b>City</b> MIDDLETOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17057	<b>Description of Expenditure</b> BREAKFAST AND LUNCH FOR CAMPAIGN TEAM/VOLUNTEERS FOR SWEARING IN CEREMONY	
To Whom Paid	MO	DAY	YEAR	
HILTON HARRISBURG				
<b>Mailing Address</b> 1 NORTH 2ND ST	1	5	2023	\$ 2,411.65
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	<b>Description of Expenditure</b> LODGING FOR CAMPAIGN TEAM AND VOLUNTEERS FOR SWEARING-IN CEREMONY	
To Whom Paid	MO	DAY	YEAR	
CHRIIDREN'S ADVOCACY CENTER				
<b>Mailing Address</b> 101 MAHOOD RD	1	19	2023	\$ 300.00
<b>City</b> BUTLER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16001	<b>Description of Expenditure</b> WINTER HARVEST - COMBATING CHILD SEX TRAFFICKING AND COMMERCIAL SEXUAL EXPLOITATION EVENT	
To Whom Paid	MO	DAY	YEAR	
THE ORIGINAL ROADHOUSE				
<b>Mailing Address</b> 333 W MAIBN ST	3	6	2023	\$ 117.88
<b>City</b> EAST PALESTINE	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 44413	<b>Description of Expenditure</b> LUNCH FOR VOLUNTEERS WHO DELIVERED WATER TO E. PALESTINE VICTIMS RE TRAIN DERAILMENT	

<b>To Whom Paid</b> RIGHTWAY COMPLIANCE LLC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 120.00
<b>Mailing Address</b> PO BOX 60162			3	9	2023	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17106	<b>Description of Expenditure</b> ACCOUNTING			

<b>To Whom Paid</b> UNITED STATES POSTAL SERVICE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 332.00
<b>Mailing Address</b> 240 EXECUTIVE DRIVE			3	16	2023	
<b>City</b> CRANBERRY TOWNSHIP	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16066	<b>Description of Expenditure</b> RENEWAL OF P.O. BOX			

<b>To Whom Paid</b> SAGGESE STRATEGIES, LLC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 810.00
<b>Mailing Address</b> 5426 LINCOLN HIGHWAY			3	15	2023	
<b>City</b> GAP	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17527	<b>Description of Expenditure</b> FUNDRAISING			

<b>To Whom Paid</b> STEPHENIE SCIALABBA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 682.10
<b>Mailing Address</b> 207 EMERSON PINES DRIVE			8	7	2023	
<b>City</b> CRANBERRY TOWNSHIP	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16066	<b>Description of Expenditure</b> LOAN REPAYMENT			

<b>To Whom Paid</b> JOHN SCIALABBA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 12,000.00
<b>Mailing Address</b> 207 EMERSON PINES DRIVE			8	7	2023	
<b>City</b> CRANBERRY TOWNSHIP	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16066	<b>Description of Expenditure</b> LOAN REPAYMENT			

<b>To Whom Paid</b> STARN MARKETING GROUP			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 150.00
<b>Mailing Address</b> 1057 FRENCH STREET			10	2	2023	
<b>City</b> MEADVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16335	<b>Description of Expenditure</b> WEBSITE DESIGN			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 20,354.76

**SCHEDULE IV**

**STATEMENT OF UNPAID DEBTS**

**Use this Section to itemize all unpaid debts and obligations  
which are outstanding at the end of the reporting period**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF STEPHENIE SCIALABBA	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2023</u> <b>To:</b> <u>12/31/2023</u>
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				DATE			Outstanding Balance of Debt
Name of Creditor				MO	DAY	YEAR	\$ 10,000.00
STEPHENIE SCIALABBA							
Mailing Address				5	1	2022	
City		CRANBERRY TOWNSHIP	State	Zip Code (Plus 4)		Description of Debt	
		PA	16066		LOAN TO CAMPAIGN		

<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>	<b>PAGE TOTAL</b>  <b>\$ 10,000.00</b>
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