### **Campaign Finance Report**

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

Filer Identificati Number :	on 2020	0146			Rep File			CANDI	ANDIDATE COMMITTEE \( \square \) LOBBYIST								
Name of Filing C	Committee, Candid	ate or L	obbyist:	Ī	TIM	DEF	OOR	FOR AUI	DITOR	GENE	RAL						
Street Address:	P.O. BOX 64																
City:	HARRISBURG							State:	PA			Zip Cod	de: 17	7108			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. <b>X</b>	2ND FRIDAY P PRIMARY	RE-	2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No		<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY I ELECTION	PRE-	- 5	5.	30 DA ELECT		POST-	6.		TERMINATION REPORT?		Yes	No		<b>√</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2024					IG METHO				PAPER		<b>/</b>	DISKE	TTE	
Name of Office S	Sought by Candida	te:	-					DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
	,							МО	DAY	YE	AR	rumber	Toode	REP		couc	
								11		5	2024		(SEE IN	STRUCTI	ONS FOR (	ODES	)
Summary of Expenditures	Receipts and	МО	DAY YE	AR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
			1 1	20	)24	Т	0	3		4	2024						
A. Amount Bro	ught Forward Fror	n Last R	eport				\$			2,5	22.65						
B. Total Moneta	ary Contributions	And Rec	eipts (From Sc	hec	dule	I)	\$			60,0	)54.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			62,5	76.65						
D. Total Expend	ditures (From Sch	edule II	I)				\$			17,8	89.72						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			44,6	86.93						
F. Value Of In-	Kind Contributions	Receiv	ed (From Sche	dul	e II)	)	\$			2,3	63.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			1			
			A	FF.	IDA	١VI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign her	e. I	f thi	is is	a Can	didate re	eport, o	candio	date sig	ın here.					
I swear (or affirm) correct and complete	) that this report, incl ete.	uding the	attached sched	ules	filed	l on	paper o	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , tr	ue,
Sworn to and subs	cribed before me this	<b>;</b>	20							s	ignature	of Perso	n Submit	ting Rep	ort		_
	Signatu	re					<b>-</b>					Prin	ted Name	e			-
My Commission Ex	-											Ema	il				-
	мо	D	AY	YR					Are	ea Cod	e	Daytim	e Teleph	none Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized Co	mm	ittee	e, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowl	edge and belief t	his	politi	ical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate			-
	day of —						_					D.:1	d Nac				_
	Signature						-					Printe	d Name				
My Commission Exp	_											Ema	il				_
	МО	D	AY	YR			•		Area	Code		Da	aytime T	elephon	e Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	Period		
TIM DEFOOR FOR AUDITOR GENERAL	From:	1/1/202	<u>4</u> To:	<u>3/4/2024</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	54.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	56,000.00
All Other Contributions (Part D)			\$	4,000.00
TOTAL for the Reporting	Period	(3)	\$	60,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	60,054.00

#### **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 Candi	Name of Filing Committee or Candidate						
		ı	From:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Committee	3		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

### ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Comm	nittee or Candidate	Re	Reporting Period						
		Fr	om:		To	<b>)</b> :			
				DATE			AMOUNT		
Full Name of Contribut	or		мо	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)							
			1	1	1				
	I				<u> </u>		PAGE TOTAL		

#### **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				
TIM DEFOOR FOR AUDITOR GENERAL			From:	1/	<u>/1/2024</u>	То:		3/4/2024
				DA	TE		,	AMOUNT
Full Name of Contributing Committee BETTER PENNSYLVANIA PAC				МО	DAY	YEAR	\$	1,250.00
Mailing Address 121 STATE ST				2	6	2024		,
City HARRISBURG	<b>State</b> PA	<b>Zip Code</b> 17101	e (Plus 4)					
Full Name of Contributing Committee CAPITAL BLUE PAC				МО	DAY	YEAR	\$	500.00
Mailing Address P.O. BOX 60710		•		2	6	2024		
City HARRISBURG	<b>State</b> PA	<b>Zip Code</b> 17106	e (Plus 4)					
Full Name of Contributing Committee  COMMONWEALTH LEADERS FUND				мо	DAY	YEAR	\$	25,000.00
Mailing Address P.O. BOX 934				3	4	2024		,
City HARRISBURG	<b>State</b> PA	<b>Zip Code</b> 17108	e (Plus 4)					
Full Name of Contributing Committee CPA PAC				мо	DAY	YEAR	\$	1,000.00
Mailing Address 500 N 3RD ST SUITE	600A			2	21	2024	ľ	1,000.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code</b> 17101	e (Plus 4)					
Full Name of Contributing Committee CUPAC				МО	DAY	YEAR	\$	1,000.00
Mailing Address 4309 N FRONT ST				2	6	2024		·
City HARRISBURG	<b>State</b> PA	<b>Zip Code</b> 17110	e (Plus 4)					
Full Name of Contributing Committee FIRST PAC				мо	DAY	YEAR	\$	500.00
Mailing Address PENNSYLVANIA ASSO 800 N 3RD ST, SU	OCIATION OF COMMU	JNITY BAI	NKERS	2	6	2024		
City HARRISBURG	<b>State</b> PA	<b>Zip Code</b> 17101	e (Plus 4)					

								0
Full Name of Contr	ributing Committee NSYLVANIA			МО	DAY	YEAR	,	F00 00
Mailing Address	P.O. BOX 870			_	-	2024	. <b>\$</b>	500.00
City CAMP HILL	-	State	Zip Code (Plus 4)	2	6	2024		
		PA	17001					
Full Name of Conti	ributing Committee			мо	DAY	YEAR		
FRIENDS OF CHR	IS GEBHARD			1-10	DAI	ILAK	<b> </b>	1,000.00
Mailing Address	1451 QUENTIN RD S	UITE 400 BOX 248		2	6	2024		,
City LEBANON		State	Zip Code (Plus 4)	] -				
		PA	17042					
Full Name of Cont	ributing Committee			МО	DAY	YEAR		
FRIENDS OF KIM	WARD						\$	5,000.00
Mailing Address	P.O. BOX 83			2	6	2024		
City HARRISBU	RG	State	Zip Code (Plus 4)					
		PA	17108					
Full Name of Conti	ributing Committee			МО	DAY	YEAR		
FRIENDS OF NICC	DLE ZICCARELLI						\$	2,500.00
Mailing Address	P.O. BOX 12022			3	4	2024		
City HARRISBU	RG	State	Zip Code (Plus 4)					
		PA	17108					
Full Name of Conti	ributing Committee			мо	DAY	YEAR		
GREENLEE PARTN	ERS STATE PAC			1-10	JA.	ILAK	<b> </b>	1,000.00
Mailing Address	P.O. BOX 291			2	6	2024		·
City HARRISBU	RG	State	Zip Code (Plus 4)	]				
		PA	17108					
Full Name of Conti	ributing Committee	-	-	МО	DAY	YEAR		
HIGHMARK PAC				МО	DAT	TEAR	<b> </b>	500.00
Mailing Address	1800 CENTER ST			2	6	2024	]	
City CAMP HILL	-	State	Zip Code (Plus 4)	] -		2021		
		PA	17089					
Full Name of Conti	ributing Committee			мо	DAY	YEAR		
MCNEES PAC				МО	DAT	TEAR	<b> </b>	1,500.00
Mailing Address	P.O. BOX 1166			1	30	2024	]	,
City HARRISBU	RG	State	Zip Code (Plus 4)	]				
		PA	17108					
Full Name of Conti	ributing Committee			мо	DAY	YEAR		
PECO PAC				140	DAT	IEAK	<b>\$</b>	500.00
Mailing Address	2301 MARKET ST			2	6	2024		
City PHILADELE	PHIA	State	Zip Code (Plus 4)	] -				
		PA	19103					

Full Name of Contributing Committee   Full Name of Contributing Commi							17.62 /
Mailing   Address   Add				МО	DAY	YEAR	\$ 5,000,00
This continue of Continue o	Mailing Address 421 OFFICE PARK [	DR .		3	1	2024	3,000.00
Name of Contributing Committee   PHARRISBURG   State   PHARRISBURG   P	City MOUNTAIN BROOK	State	Zip Code (Plus 4)	]		2024	
PHARM PAC		AL	35223				
Mailing Address   50E N 3RD ST   State   Zip Code (Plus 4)   17101   Pa   2   6   2024   Pa   17101   Pa   17101   Pa   Pa   Pa   17101   Pa   Pa   Pa   Pa   Pa   Pa   Pa   P	_			МО	DAY	YEAR	<b>\$</b> 1.750.00
City         HARRISBURS         State PA         Zip Code (Plus 4) 17101         Image: Control of the PA         Text (Plus 4) 17101         Image: Control of the PA         Text (Plus 4) 17101         Image: Control of the PA         Text (Plus 4) 17101         PA         DAY         YEAR         1,750.00           FUIL Name of Control of the PA         *** Table of the PA         21p Code (Plus 4) 19114         2         6         2024         2         4         2024         4 <t< td=""><td>Mailing Address 508 N 3RD ST</td><td></td><td></td><td>2</td><td>6</td><td>2024</td><td></td></t<>	Mailing Address 508 N 3RD ST			2	6	2024	
Phil Name of Contributing Committee   Phil Name of Contributing Comm	City HARRISBURG	State	Zip Code (Plus 4)			2021	
Mailing   Address   2417   WELSH RD   SUITE 21   State   PA   19114   PA   2   6   2024   PA   2000   PA   PA   19114   PA   PA   19114   PA   PA   PA   PA   PA   PA   PA   P		PA	17101				
Mailing   Address   2417 WELSH RD   SUTE 21   21   22   26   2024   20				МО	DAY	YEAR	<b>\$</b> 1.750.00
City PHILADELPHIA PA         2ip Code (Plus 4) 19114         Total Name of Contributing Committee PIPAC         Full Name of Contributing Committee PARAPISBURG         State PARAPISBURG         PARAPISBURG         MO DAY YEAR         PARAPISBURG         PARAPISBURG         MO DAY YEAR         PARAPISBURG         PARAPISBURG <td>Mailing Address 2417 WELSH RD S</td> <td>UITE 21</td> <td></td> <td>2</td> <td>6</td> <td>2024</td> <td></td>	Mailing Address 2417 WELSH RD S	UITE 21		2	6	2024	
Full Name of Contributing Committee   PIPAC	City PHILADELPHIA	State	Zip Code (Plus 4)	] -		2021	
PIPAC		PA	19114				
Mailing Address		МО	DAY	YEAR	\$ 1,000.00		
City	Mailing Address 409 N SECOND ST	SUITE 202		2	6	2024	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Mo	City HARRISBURG	State	Zip Code (Plus 4)				
Mo		PA	17101				
Mailing   Address   225 STATE ST   210 Code (Plus 4)   17101   20				МО	DAY	YEAR	\$ 1,000.00
State   PA   PA   PA   PA   PA   PA   PA   P	Mailing Address 225 STATE ST			2	6	2024	
Full Name of Contributing Committee PSCOA PAC  Mailing Address 2421 N FRONT ST  City HARRISBURG State PA 17110  Full Name of Contributing Committee TROOPERS ASSOCIATION PAC  Mailing Address 3625 VARTAN WAY  City HARRISBURG State PA 17110  Full Name of Contributing Committee TROOPERS ASSOCIATION PAC  Mailing Address 3625 VARTAN WAY  Full Name of Contributing Committee VALUE DRUG PAC  Mo DAY YEAR  \$ 1,000.00  ### 1,750.00  ### 1,750.00  Mailing Address 195 THEATER DR  City DUNCANSVILLE State Zip Code (Plus 4)  ### 1,750.00	City HARRISBURG	State	Zip Code (Plus 4)				
PSCOA PAC		PA	17101				
Mailing Address         2421 N FRONT ST         2024         2024         2024         2024         2024         6         2024         2024         6         2024         4         4         6         2024         4<	_			МО	DAY	YEAR	<b>.</b> 1,000,00
City HARRISBURG         State PA         Zip Code (Plus 4) 17110         Language Code (Plus 4) 17110         PA         TROOPERS ASSOCIATION PAC         MO DAY YEAR         YEAR         1,000.00           Mailing Address 3625 VARTAN WAY         City HARRISBURG         State PA         Zip Code (Plus 4) 17110         PA         DAY YEAR         YEAR         1,750.00           Mo DAY YEAR         YEAR         \$ 1,750.00           Mailing Address         195 THEATER DR         2 21 2024	Mailing Address 2421 N FRONT ST					2024	1,000.00
Full Name of Contributing Committee   TROOPERS ASSOCIATION PAC	City HARRISBURG	State	Zip Code (Plus 4)		6	2024	
TROOPERS ASSOCIATION PAC		PA	17110				
Mailing Address         3625 VARTAN WAY           City         HARRISBURG         State PA         Zip Code (Plus 4) 17110         Address         DAY         YEAR         YEAR         1,750.00           Mailing Address         195 THEATER DR         Zip Code (Plus 4)         2         2         2         2         2         2024			•	мо	DAY	YEAR	\$ 1,000,00
City     HARRISBURG     State PA     Zip Code (Plus 4) 17110     Language       Full Name of Contributing Committee VALUE DRUG PAC       Walling Address     195 THEATER DR       City     DUNCANSVILLE       State     Zip Code (Plus 4)	Mailing Address 3625 VARTAN WAY			2	6	2024	1,000.00
Full Name of Contributing Committee  VALUE DRUG PAC  Mailing Address 195 THEATER DR  City DUNCANSVILLE State Zip Code (Plus 4)  MO DAY YEAR  \$ 1,750.00	City HARRISBURG	State	Zip Code (Plus 4)	1 ′		2024	
VALUE DRUG PAC  Mailing Address 195 THEATER DR  State Zip Code (Plus 4)  \$ 1,750.00		PA	17110				
VALUE DRUG PAC         \$ 1,750.00           Mailing Address         195 THEATER DR         2         21         2024           City         DUNCANSVILLE         State         Zip Code (Plus 4)         2         21         2024	Full Name of Contributing Committee			МО	DAY	YEAR	
Mailing Address 195 THEATER DR  2 21 2024  City DUNCANSVILLE State Zip Code (Plus 4)	VALUE DRUG PAC						<b>\$</b> 1,750.00
City DUNCANSVILLE State Zip Code (Plus 4)	Mailing Address 195 THEATER DR			2	21	2024	
PA	City DUNCANSVILLE						
		PA	16635				l

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

**PAGE TOTAL \$** 56,000.00

### ALL OTHER CONTRIBUTIONS

**OVER \$250.00** 

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

Name of Filing Committee or Candidate

(Exclude contributions from political committees reported in Part C.)

Reporting Period

TIM DEFOOR FOR AUDITOR GENERAL			Fron	1:	1/1/2	<u>024</u> To	:	<u>3/4/2024</u>
				DA	<b>TE</b>		АМО	UNT
Full Name of Contributor				мо	DAY	YEAR		500.00
K&L GATES, LLP				МО	DAT	ILAK	<b>\$</b>	500.00
Mailing Address 210 SIXTH AVE				2	6	2024	1	
City PITTSBURGH	State	Zip Code (Plus	s 4)	_	O O	2024		
	PA	15222						
Employer Name				Occupation				
Employer Mailing Address/Principal Place of Business City					State		Zip Code (	Plus 4)
Full Name of Contributor				мо	DAY	YEAR	I .	
NICHOLAS DEBENEDICTIS				140	DAT	ILAK	\$	500.00
Mailing Address 231 GOLF VIEW RD				2	6	2024		
City ARDMORE	State	Zip Code (Plus	5 4)	] -	· ·			
	PA	19003						
Employer Name				Occupat	ion	RETIRE	)	
Employer Mailing Address/Principal Place of Business  City								
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code (	Plus 4)
Employer Mailing Address/Principal Plac Full Name of Contributor	e of Business	City		MO		VEAD	_	
	e of Business	City		мо	State	YEAR	Zip Code (	<b>Plus 4)</b> 500.00
Full Name of Contributor	e of Business	City			DAY		_	
Full Name of Contributor WILLIAM W HEILIG	e of Business	City Zip Code (Plus	s 4)	<b>MO</b> 2		<b>YEAR</b> 2024	_	
Full Name of Contributor WILLIAM W HEILIG Mailing Address 924 WINDING LN			s 4)		DAY		_	
Full Name of Contributor WILLIAM W HEILIG Mailing Address 924 WINDING LN	State	Zip Code (Plus	s 4)		<b>DAY</b> 6		\$	
Full Name of Contributor WILLIAM W HEILIG Mailing Address 924 WINDING LN City MEDIA	<b>State</b> PA	Zip Code (Plus	s 4)	2	<b>DAY</b> 6	2024	\$	500.00
Full Name of Contributor WILLIAM W HEILIG Mailing Address 924 WINDING LN City MEDIA  Employer Name	<b>State</b> PA	Zip Code (Plus 19063	5 4)	2 Occupat	DAY 6 ion State	2024 RETIREI	\$ Zip Code (	500.00 Plus 4)
Full Name of Contributor WILLIAM W HEILIG  Mailing Address 924 WINDING LN  City MEDIA  Employer Name  Employer Mailing Address/Principal Place	<b>State</b> PA	Zip Code (Plus 19063	s 4)	2	DAY 6	2024	\$	500.00
Full Name of Contributor WILLIAM W HEILIG Mailing Address 924 WINDING LN City MEDIA  Employer Name Employer Mailing Address/Principal Plac	<b>State</b> PA	Zip Code (Plus 19063	s 4)	2 Occupat	DAY 6 ion State	2024 RETIRED	\$ Zip Code (	500.00 Plus 4)
Full Name of Contributor WILLIAM W HEILIG Mailing Address 924 WINDING LN City MEDIA  Employer Name Employer Mailing Address/Principal Place Full Name of Contributor JOHN HOLT	<b>State</b> PA	Zip Code (Plus 19063		2 Occupat	DAY 6 ion State	2024 RETIREI	\$ Zip Code (	500.00 Plus 4)
Full Name of Contributor WILLIAM W HEILIG  Mailing Address 924 WINDING LN  City MEDIA  Employer Name  Employer Mailing Address/Principal Place  Full Name of Contributor  JOHN HOLT  Mailing Address 108 DAISY LN	State PA e of Business	Zip Code (Plus 19063 City		2 Occupat	DAY 6 ion State	2024 RETIRED	\$ Zip Code (	500.00 Plus 4)
Full Name of Contributor WILLIAM W HEILIG  Mailing Address 924 WINDING LN  City MEDIA  Employer Name  Employer Mailing Address/Principal Place  Full Name of Contributor  JOHN HOLT  Mailing Address 108 DAISY LN	State PA e of Business State PA	Zip Code (Plus 19063 City		2 Occupat	DAY 6 ion State DAY 30	2024 RETIRED	\$ Zip Code (	500.00 Plus 4)
Full Name of Contributor WILLIAM W HEILIG  Mailing Address 924 WINDING LN  City MEDIA  Employer Name  Employer Mailing Address/Principal Place  Full Name of Contributor  JOHN HOLT  Mailing Address 108 DAISY LN  City WEXFORD	State PA e of Business State PA	Zip Code (Plus 19063 City		Occupat  MO  1	DAY 6 ion State DAY 30	2024  RETIRED  YEAR  2024	\$ Zip Code (	500.00 Plus 4) 500.00

							_		
Full Name of Contributor				мо	DAY	YEAR	<b> </b>	500.00	
MARY BETH JENKINS							_	300.00	
Mailing Address 123 WOAK HANNE	VILLAGE DR			2	6	2024	1		
City FORD CITY	State	Zip Code	(Plus 4)						
	PA	16226					l		
Employer Name UPMC HEALTH PLAN				Occupat	ion	EXECUT	IVE		
Employer Mailing Address/Principal Plac	ce of Business	City			State		Zip Code	e (Plus 4)	
600 GRANT ST		PITTS	SBURGH		PA		15219		
Full Name of Contributor									
SHERYL A KASHUBA				МО	DAY	YEAR	\$	500.00	
Mailing Address 807 CHARLES ST				2	6	2024	1		
City GLENSHAW	State	Zip Code	(Plus 4)	1 4	O	2024			
	PA	15116					1		
Employer Name UPMC				Occupation EXECUTIVE					
Employer Mailing Address/Principal Place of Business City				State		Zip Code	e (Plus 4)		
200 LOTHROP ST		PITTS	SBURGH		PA		15213		
						,			
Full Name of Contributor									
Full Name of Contributor				мо	DAY	YEAR	\$	500.00	
JOSEPH G WAGMAN	ı						\$	500.00	
	State	Zip Code	(Plus 4)	<b>мо</b>	<b>DAY</b> 14	<b>YEAR</b> 2024	\$	500.00	
JOSEPH G WAGMAN  Mailing Address 975 SUMMIT CIR, N	State	-	(Plus 4)				\$	500.00	
JOSEPH G WAGMAN  Mailing Address 975 SUMMIT CIR, N  City YORK		<b>Zip Code</b> (17403	(Plus 4)		14	2024		500.00	
JOSEPH G WAGMAN  Mailing Address 975 SUMMIT CIR, N  City YORK  Employer Name	State PA	17403	(Plus 4)	2	14				
JOSEPH G WAGMAN  Mailing Address 975 SUMMIT CIR, N  City YORK	State PA	-	(Plus 4)	2	14	2024		500.00 e (Plus 4)	
JOSEPH G WAGMAN  Mailing Address 975 SUMMIT CIR, N  City YORK  Employer Name	State PA	17403	(Plus 4)	2 Occupat	14	2024 RETIREI			
JOSEPH G WAGMAN  Mailing Address 975 SUMMIT CIR, N  City YORK  Employer Name  Employer Mailing Address/Principal Place	State PA	17403	(Plus 4)	2	14	2024			
JOSEPH G WAGMAN  Mailing Address 975 SUMMIT CIR, N  City YORK  Employer Name  Employer Mailing Address/Principal Place  Full Name of Contributor	PA ce of Business	17403	(Plus 4)	Occupat	14 ion State	2024 RETIRED	Zip Code	e (Plus 4)	
JOSEPH G WAGMAN  Mailing Address 975 SUMMIT CIR, N  City YORK  Employer Name  Employer Mailing Address/Principal Place  Full Name of Contributor  EDWARD H WEST	PA ce of Business	17403		2 Occupat	14	2024 RETIREI	Zip Code	e (Plus 4)	
JOSEPH G WAGMAN  Mailing Address 975 SUMMIT CIR, N  City YORK  Employer Name  Employer Mailing Address/Principal Place  Full Name of Contributor  EDWARD H WEST  Mailing Address 246 PINK HOUSE R	PA  ce of Business	17403 City		Occupat	14 ion State	2024 RETIRED	Zip Code	e (Plus 4)	
JOSEPH G WAGMAN  Mailing Address 975 SUMMIT CIR, N  City YORK  Employer Name  Employer Mailing Address/Principal Place  Full Name of Contributor  EDWARD H WEST  Mailing Address 246 PINK HOUSE R	State PA  ce of Business  D  State	17403  City  Zip Code		Occupat	ion State DAY	2024  RETIRED  YEAR  2024	Zip Code	e (Plus 4)	
JOSEPH G WAGMAN  Mailing Address 975 SUMMIT CIR, N  City YORK  Employer Name  Employer Mailing Address/Principal Place  Full Name of Contributor  EDWARD H WEST  Mailing Address 246 PINK HOUSE R  City SEWICKLEY	State PA  ce of Business  D  State PA	17403  City  Zip Code		Occupate MO	ion State DAY	2024  RETIRED  YEAR  2024	zip Code	e (Plus 4) 500.00	
JOSEPH G WAGMAN  Mailing Address 975 SUMMIT CIR, N  City YORK  Employer Name  Employer Mailing Address/Principal Place  Full Name of Contributor  EDWARD H WEST  Mailing Address 246 PINK HOUSE R  City SEWICKLEY  Employer Name	State PA  ce of Business  D  State PA	2ip Code (15143		Occupate MO	14 State DAY 6	2024  RETIRED  YEAR  2024	zip Code	<b>e (Plus 4)</b> 500.00  EQUESTED	

 $\label{lem:constraint} \textbf{Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3. }$ 

**PAGE TOTAL \$** 4,000.00

# OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee	or Candidate		Report	ing Peri	od			
			From:			To:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (P	Plus 4)					
Receipt Description	<b>'</b>	<b>'</b>		<u> </u>			•	
				_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	Section	4.			\$	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							
TIM DEFOOR FOR AUDITOR GENERAL	From:	<u>1/1/2024</u> <b>To:</b>	<u>3/4/2024</u>					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)								
TOTAL for the Reporting Pe	eriod (2)	\$	0.00					
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)								
TOTAL for the Reporting Pe	eriod (3)	\$	2,363.00					
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,	•	\$	2,363.00					

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidate			Reporting	g Period				
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	•	•	•				
					_			
Enter Grand Total of Part F on School	dule II, In-Kind (	Contributions Deta	iled Sum	mary Pag	je,		PAGE TOTA	<b>L</b>
Section 2.						\$		0.00

#### **SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED**

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate					Reporting Period						
TIM DEFOOR FOR AUDITOR GENERAL				From: 1/1/202			4 <b>To</b> : <u>3/4/2024</u>				
				•			DATE			AMOUNT	
Full Name of Contributor COMMONWEALTH LEADERS FUND					мо		DAY	YEAR			
Mailing Address P.O. BOX 934						2	8	2024	\$	1,513.00	
City HARRISBURG	<b>State</b> PA		ip Code(Plus 4) 7108								
Employer of Contributor					Occ	cupat	tion				
Employer Mailing Address/Principal Place of Business				State	State Zip C		Code(Plus 4)			ption of Contribution RAISING EVENT	
Full Name of Contributor  ELIZABETH P HAVEY					МО		DAY	YEAR			
Mailing Address 600 MORENO RD	MORENO RD				2	5	2024	<b>\$</b> 850.00			
City PENN VALLEY	<b>State</b> PA		<b>ip Code(Plus 4)</b> 9072								
Employer of Contributor DILWORTH PAXSON Occupation AT							TORNEY				
Employer Mailing Address/Principal Place of Business 1500 MARKET ST SUITE 3500E			ADELPHIA	<b>State</b> PA	<b>Zip Code(Plus 4)</b> 19102		Description of Contribution TICKET				
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 2,363.00					

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
TIM DEFOOR FOR AUDITOR GENERAL	From	1/1/2024	То:	<u>3/4/2024</u>			

				DATE		AMOUNT				
To Whom Paid			МО	DAY	YEAR					
WINRED										
Mailing Address P.O. BOX 9891				23	2024	\$	1.18			
City ARLINGTON State Zip Code (Plus 4)				tion of Exp	enditure					
	VA	22219	SERVICE FEE							
To Whom Paid			мо	DAY	YEAR					
WINRED			140		ILAK					
Mailing Address P.O. BOX 9	9891		1	25	2024	\$	0.24			
City ARLINGTON State Zip Code (Plus			Description of Expenditure							
VA 22219				SERVICE FEE						
To Whom Paid			МО	DAY	YEAR					
WINRED			140		ILAK					
Mailing Address P.O. BOX 9	9891		1	25	2024	\$	0.20			
City ARLINGTON State Zip Code (Plus		Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
VA 22219			SERVICE FEE							
To Whom Paid			МО	DAY	YEAR					
WINRED			MO	DAT	TEAR					
Mailing Address P.O. BOX 9	9891		1	28	2024	\$	0.39			
City ARLINGTON	State	Zip Code (Plus 4)	Description of Expenditure							
	VA	22219	SERVICE FEE							
To Whom Paid			мо	DAY	YEAR					
WINRED			MO	DAI	ILAK					
Mailing Address P.O. BOX 9	9891		1	30	2024	\$	19.70			
City ARLINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>				
	VA	22219	SERVICE FEE							
To Whom Paid			МО	DAY	YEAR					
AMY W. PETRAGLIA			MO		ILAK					
Mailing Address 8000 CHRISTOPHER WREN DR #307			2	8	2024	\$	3,000.00			
City WEXFORD	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>				
	PA	15090	CONSULTING							

						I	PAGE 15			
To Whom Paid	МО	DAY	YEAR							
BARSZ GOWIE AMON & amp; F	FULTZ									
Mailing Address 1400 N PROVIDENCE RD BUILDING 2, SUITE 1040			2	14	2024	\$	343.75			
City MEDIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
PA 19063				CONSULTING						
To Whom Paid			мо	DAY	YEAR					
DTR CONSULTING			MO	DAT	IEAR					
Mailing Address 210 KELKER ST			2	14	2024	\$	5,000.00			
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
PA 17102				PROFESSIONAL SERVICES						
To Whom Paid			МО	DAY	YEAR					
LN CONSULTING, LLC			MO	DAT	IEAR					
Mailing Address 121 STATE	ST		2	15	2024	\$	5,000.00			
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	Description of Expenditure						
	CONSULTING									
To Whom Paid			МО	DAY	YEAR					
LN CONSULTING, LLC			MO	DAT	IEAR					
Mailing Address 121 STATE	ST		2	15	2024	\$	4,324.14			
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure							
	PA	17101	REIMBURSEMENT							
To Whom Paid			MO	DAY	YEAR					
POSTMASTER			МО	DAT	TEAR					
Mailing Address 312 MARKE	ET ST		2	16	2024	\$	200.00			
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	Description of Expenditure						
	PA	17108	RENTAL FEE							
To Whom Paid			МО	DAY	YEAR					
WINRED			MO	DAI	ILAK					
Mailing Address P.O. BOX 9891			2	21	2024	\$	0.12			
City ARLINGTON State Zip Code (Plus 4)		Description of Expenditure								
	VA	22219	SERVICE FEE							
							PAGE TOTAL			
Enter Grand Total of Expend	ditures on Page 1, Rep	port Cover Page, Item D	).			\$	17,889.72			
							=: ,0001,2			