Campaign Finance Report

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

						port ed B		CANDI	DATE		MITTEE		LOBI	BYIST			
Name of Filing C	Committee, Candid	ate or L	obbyist:	-	TIM	DEF	OOR	FOR AUI	DITOR	GENE	RAL					•	
Street Address:																	
City:	HARRISBURG							State: PA				Zip Cod	le: 17	7108			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDAY P PRIMARY	RE-	. 2	2.	30 DA PRIMA		POST- 3.			AMENDM REPORT		Yes	No		\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					30 DA ELECT		POST-	POST- 6.			ATION ?	Yes	No		\
report type)	ANNUAL REPORT	7.	Year 2024	FILING METHO () CHECK ON							PAPER		/	DISKE	TTE		
Name of Office S	Sought by Candida	nt by Candidate: DATE OF ELECTION						N	District Number	Office Code	Par	ty Code	Cour				
								МО	DAY	YE	AR		1	REP			
								11		5	2024		(SEE IN	STRUCTI	ONS FOR (CODES)
Summary of Expenditures	Receipts and	МО	DAY YE	AR		_	_	МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY		
			1 1	20)24	Т	0	3		4	2024						
A. Amount Bro	ught Forward Fron	n Last R	.eport				\$			2,5	22.65						
B. Total Moneta	ary Contributions	And Rec	eipts (From Sc	hec	dule	ı)	\$			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 (Subtract	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						
			Α	FF.	IDA	١٧٢	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	ndidate re	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and complete) that this report, incl ete.	uding the	attached schedu	ules	filed	d 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 day of	ì	20							s	ignature	of Perso	n Submit	ting Rep	ort		_
	Signatu	re					- -					Prin	ted Name	e			_
My Commission Ex	cpires						_					Ema	il				_
	МО	D	AY	YR					Are	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized Cor	mm	itte	e, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ıy knowle	edge and belief t	:his	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 133	3,
Sworn to and subsc	ribed before me this										S	ignature o	of Candid	ate			-
	day of —— ————						-					Printe	d Name				-
	Signature						-										_
My Commission Exp	ires											Ema					
	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	g Period		
TIM DEFOOR FOR AUDITOR GENERAL	From:	1/1/202	<u>4</u> To:	3/4/2024
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 ar 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 Candidate			Reporting Period					
		1	From:		То	:		
				DATE			AMOUNT	
Full Name of Contributing Committee			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.

(Exclude contributions from political committees reported in Part A)

(Excid	de contributions noi	n poneicar comm			porteu	in i dic	- ,	
Name of Filing Committe	ee or Candidate		Repo	rting P	eriod			
			From	1 :		To):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL

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

PAGE TOTAL \$ 0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name	Name of Filing Committee or Candidate Repor			Reporting	g Period				
TIM [DEFOOR FOR AUDITOR GENERAL			From:	1/	<u>/1/2024</u>	То:	3/4/2024	
					DA	TE		Α	MOUNT
Full N	lame of Contributing Committee				мо	DAY	YEAR		
BETT	ER PENNSYLVANIA PAC				140	DAI	ILAN	 	1,250.00
Mailii	ng Address				2	6	2024		,
City	HARRISBURG	State	Zip Cod	e (Plus 4)			2021		
		PA	17101						
Full N	lame of Contributing Committee				мо	DAY	YEAR		
CAPI	TAL BLUE PAC							\$	500.00
Mailiı	ng Address				2	6	2024		
City	HARRISBURG	State	Zip Cod	e (Plus 4)	_				
		PA	17106						
	Jame of Contributing Committee MONWEALTH LEADERS FUND				мо	DAY	YEAR	\$	25,000.00
Mailii	ng Address				3	4	2024]	23,000.00
City	HARRISBURG	State	Zip Cod	e (Plus 4)]		2024		
		PA	17108						
Full N	lame of Contributing Committee				МО	DAY	YEAR		
CPA I	PAC							\$	1,000.00
Mailii	ng Address				2	21	2024		
City	HARRISBURG	State	Zip Cod	e (Plus 4)					
		PA	17101						
Full N	lame of Contributing Committee				мо	DAY	YEAR		
	ng Address							\$	1,000.00
City		State	Zin Cod	e (Plus 4)	2	6	2024		
City	HARRISBURG	PA	17110	e (Flus 4)					
Full N	lame of Contributing Committee	<u> </u>	<u> </u>					<u>.</u> 	
	T PAC				МО	DAY	YEAR	\$	500.00
Mailii	ng Address				2	6	2024		500.00
City	HARRISBURG	State	Zip Cod	e (Plus 4)]		2024		
		PA	17101						

Full N	lame of Contributing Committee			МО	DAY	YEAR		
FOOD	PPAC OF PENNSYLVANIA						 	500.00
Mailin	ng Address			2	6	2024]	333.33
City	CAMP HILL	State	Zip Code (Plus 4)]		2024		
		PA	17001					
Full N	lame of Contributing Committee			МО	DAY	YEAR		
FRIEN	NDS OF CHRIS GEBHARD						\$	1,000.00
Mailin	ng Address			2	6	2024		
City	LEBANON	State	Zip Code (Plus 4)	-				
		PA	17042					
Full Name of Contributing Committee				МО	DAY	YEAR		
FRIEN	NDS OF KIM WARD						\$	5,000.00
Mailin	ng Address			2	6	2024		
City	HARRISBURG	State	Zip Code (Plus 4)	_				
		PA	17108					
Full N	lame of Contributing Committee			МО	DAY	YEAR		
FRIEN	NDS OF NICOLE ZICCARELLI			1.0			\$	2,500.00
Mailin	ng Address			3	4	2024		,
City	HARRISBURG	State	Zip Code (Plus 4)		4	2024		
		PA	17108					
Full N	lame of Contributing Committee			МО	DAY	YEAR		
GREE	NLEE PARTNERS STATE PAC			MO	DAT	TEAR	 	1,000.00
Mailin	ng Address			2	6	2024		1,000.00
City				1 4	1 0			
	HARRISBURG	State	Zip Code (Plus 4)			2024		
	HARRISBURG	State PA	Zip Code (Plus 4) 17108			2024		
Full N	HARRISBURG Iame of Contributing Committee			 				
				МО	DAY	YEAR		500.00
HIGH	lame of Contributing Committee				DAY	YEAR	\$	500.00
HIGH	lame of Contributing Committee MARK PAC			MO 2			\$	500.00
HIGH Mailin	lame of Contributing Committee MARK PAC ng Address	PA	17108		DAY	YEAR	\$	500.00
HIGH Mailin	lame of Contributing Committee MARK PAC ng Address	PA State	17108 Zip Code (Plus 4)	- 2	DAY 6	YEAR 2024	\$	500.00
HIGH Mailin City	lame of Contributing Committee MARK PAC ng Address CAMP HILL	PA State	17108 Zip Code (Plus 4)		DAY	YEAR		
HIGH Mailin City Full N MCNE	lame of Contributing Committee MARK PAC ng Address CAMP HILL	PA State	17108 Zip Code (Plus 4)	. 2 MO	DAY 6	YEAR 2024 YEAR	\$	1,500.00
HIGH Mailin City Full N MCNE	Iame of Contributing Committee MARK PAC ng Address CAMP HILL Iame of Contributing Committee	PA State	17108 Zip Code (Plus 4)	- 2	DAY 6	YEAR 2024		
HIGH Mailin City Full N MCNE Mailin	lame of Contributing Committee MARK PAC ng Address CAMP HILL lame of Contributing Committee EES PAC ng Address	State PA	17108 Zip Code (Plus 4) 17089	. 2 MO	DAY 6	YEAR 2024 YEAR		
HIGH Mailin City Full N MCNE Mailin City	lame of Contributing Committee MARK PAC ng Address CAMP HILL lame of Contributing Committee EES PAC ng Address	State PA State	2ip Code (Plus 4) 17089	мо 1	DAY 6 DAY 30	YEAR 2024 YEAR 2024		
HIGH Mailin City Full N MCNE Mailin City	Iame of Contributing Committee MARK PAC Ing Address CAMP HILL Iame of Contributing Committee EES PAC Ing Address HARRISBURG	State PA State	2ip Code (Plus 4) 17089	. 2 MO	DAY 6	YEAR 2024 YEAR	\$	1,500.00
Full N Mailin City Full N MCNE Mailin City Full N PECO	Iame of Contributing Committee MARK PAC Ing Address CAMP HILL Iame of Contributing Committee EES PAC Ing Address HARRISBURG	State PA State	2ip Code (Plus 4) 17089	MO 1	DAY 6 DAY 30	YEAR 2024 YEAR 2024 YEAR		
Full N Mailin City Full N MCNE Mailin City Full N PECO	Iame of Contributing Committee MARK PAC Ing Address CAMP HILL Iame of Contributing Committee EES PAC Ing Address HARRISBURG Iame of Contributing Committee	State PA State	2ip Code (Plus 4) 17089	мо 1	DAY 6 DAY 30	YEAR 2024 YEAR 2024	\$	1,500.00
Full N Mailin City Full N MCNE Mailin City Full N PECO Mailin	lame of Contributing Committee MARK PAC ng Address CAMP HILL lame of Contributing Committee EES PAC ng Address HARRISBURG	State PA State PA	Zip Code (Plus 4) 17089 Zip Code (Plus 4) 17108	MO 1	DAY 6 DAY 30	YEAR 2024 YEAR 2024 YEAR	\$	1,500.00

Full N								
	Name of Contributing Committ	ee		мо	DAY	YEAR		
	NSYLVANIA RISING						\$	5,000.00
	ng Address	State	Zip Code (Plus 4)	3	4	2024		
City	MOUNTAIN BROOK	AL	35223					
		AL	33223	<u> </u>		<u> </u>		
	Name of Contributing Committ RMPAC	ee		мо	DAY	YEAR		1 750 00
Mailii	ng Address						\$	1,750.00
City	HARRISBURG	State	Zip Code (Plus 4)	2	6	2024		
		PA	17101					
Full N	Name of Contributing Committ	ee		МО	DAY	YEAR	\$	1,750.00
Maili	ng Address			2	6	2024		1,750.00
City	PHILADELPHIA	State	Zip Code (Plus 4)	_		2024		
		PA	19114					
Full N	Name of Contributing Committ	ee		МО	DAY	YEAR	\$	1,000.00
Maili	ng Address			2	6	2024		1,000.00
City	HARRISBURG	State	Zip Code (Plus 4)	_		2024		
		PA	17101					
Full Name of Contributing Committee PMA PAC								
PMA				МО	DAY	YEAR	s	1 000 00
							\$	1,000.00
	PAC	State	Zip Code (Plus 4)	мо 2	DAY 6	YEAR 2024	\$	1,000.00
Maili	PAC ng Address	ı	Zip Code (Plus 4) 17101				\$	1,000.00
Mailin City Full N	PAC ng Address	State PA						
City Full N	PAC ng Address HARRISBURG Name of Contributing Committee	State PA		- 2	6 DAY	2024 YEAR	\$	
City Full N	PAC ng Address HARRISBURG Name of Contributing Committed DA PAC ng Address	State PA		2	6	2024		
Mailin City Full N PSCC	PAC ng Address HARRISBURG Name of Contributing Committed DA PAC	State PA ee	17101	- 2	6 DAY	2024 YEAR		
Full N PSCC Mailin	PAC ng Address HARRISBURG Name of Contributing Committed DA PAC ng Address	State PA ee State PA	Zip Code (Plus 4)	- 2	6 DAY	2024 YEAR		
Full N PSCC Mailin City Full N	PAC ng Address HARRISBURG Name of Contributing Committed DA PAC ng Address HARRISBURG	State PA ee State PA	Zip Code (Plus 4)	мо 2	6 DAY	2024 YEAR 2024		1,000.00
Full N PSCC Mailin City Full N TROC	PAC ng Address HARRISBURG Name of Contributing Committed DA PAC ng Address HARRISBURG Name of Contributing Committed	State PA ee State PA	2ip Code (Plus 4) 17110	мо 2	6 DAY	2024 YEAR 2024	\$	1,000.00
Full N PSCC Mailin City Full N TROC	PAC ng Address HARRISBURG Name of Contributing Committed DA PAC ng Address HARRISBURG Name of Contributing Committed DPERS ASSOCIATION PAC	State PA State PA State State PA State	Zip Code (Plus 4) 17110 Zip Code (Plus 4)	мо 2 мо	6 DAY 6	2024 YEAR 2024 YEAR	\$	1,000.00
Full N PSCO Mailin City Full N TROC Mailin	PAC ng Address HARRISBURG Name of Contributing Committed DA PAC ng Address HARRISBURG Name of Contributing Committed DPERS ASSOCIATION PAC ng Address	State PA ee State PA ee	2ip Code (Plus 4) 17110	мо 2 мо	6 DAY 6	2024 YEAR 2024 YEAR	\$	1,000.00
Full N PSCC Mailin City Full N TROC Mailin City	PAC ng Address HARRISBURG Name of Contributing Committed DA PAC ng Address HARRISBURG Name of Contributing Committed DPERS ASSOCIATION PAC ng Address	State PA State PA State PA ee State PA	Zip Code (Plus 4) 17110 Zip Code (Plus 4)	мо 2 мо 2	6 DAY 6	2024 YEAR 2024 YEAR 2024	\$	1,000.00
Full N TROC Mailin City Full N TROC	PAC ng Address HARRISBURG Name of Contributing Committed DA PAC ng Address HARRISBURG Name of Contributing Committed DPERS ASSOCIATION PAC ng Address HARRISBURG HARRISBURG	State PA State PA State PA ee State PA	Zip Code (Plus 4) 17110 Zip Code (Plus 4)	мо 2 мо	6 DAY 6	2024 YEAR 2024 YEAR	\$	1,000.00
Full N TROC Mailin City Full N TROC Mailin City Full N VALU	PAC ng Address HARRISBURG Name of Contributing Committed DA PAC ng Address HARRISBURG Name of Contributing Committed DPERS ASSOCIATION PAC ng Address HARRISBURG Name of Contributing Committed Name of Contributing Committed	State PA State PA State PA ee State PA	Zip Code (Plus 4) 17110 Zip Code (Plus 4)	мо 2 мо 2 мо	6 DAY 6	2024 YEAR 2024 YEAR 2024 YEAR	\$	1,000.00
Full N TROC Mailin City Full N TROC Mailin City Full N VALU	PAC ng Address HARRISBURG Name of Contributing Committed DA PAC ng Address HARRISBURG Name of Contributing Committed DPERS ASSOCIATION PAC ng Address HARRISBURG Name of Contributing Committed DPERS ASSOCIATION PAC ng Address HARRISBURG	State PA State PA State PA ee State PA	Zip Code (Plus 4) 17110 Zip Code (Plus 4)	мо 2 мо 2	6 DAY 6	2024 YEAR 2024 YEAR 2024	\$	1,000.00 1,000.00 1,750.00

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.

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

Name of Filing Committee or Candidate			Name of Filing Committee or Candidate						
TIM DEFOOR FOR AUDITOR GENERAL				Fron	n:	1/1/2	<u>024</u> To	3/4/2024	
			·		DA	TE		А	MOUNT
Full Name of Contributor						DAY	VEAD		
K&L GATES, LLP					МО	DAY	YEAR	 \$	500.00
Mailing Address					2	6	2024	1	
City PITTSBURGH	State	Zip	Code (Plus	4)	_	U	2024		
	PA 15222								
Employer Name			Occupat	ion					
Employer Mailing Address/Principal Place of Business City					State		Zip Coo	de (Plus 4)	
Full Name of Contributor					мо	DAY	YEAR		
NICHOLAS DEBENEDICTIS					MO	DAT	ILAK	\$	500.00
Mailing Address					2	6	2024	1	
City ARDMORE	State	Zip	Code (Plus	4)	_	0	2024		
	PA	190	003						
							SETIBLE	`	
Employer Name					Occupat	ion	RETIRE	,	
Employer Name Employer Mailing Address/Principal Place	e of Business		City		Occupat	State	RETIRE		de (Plus 4)
• •	e of Business		City			State		Zip Coo	
Employer Mailing Address/Principal Plac	e of Business		City		MO MO	1	YEAR		de (Plus 4) 500.00
Employer Mailing Address/Principal Place Full Name of Contributor	e of Business		City		мо	State	YEAR	Zip Coo	
Employer Mailing Address/Principal Place Full Name of Contributor WILLIAM W HEILIG	e of Business	Zip	City Code (Plus	4)		State		Zip Coo	
Employer Mailing Address/Principal Place Full Name of Contributor WILLIAM W HEILIG Mailing Address		Zip 190	Code (Plus	4)	мо	State	YEAR	Zip Coo	
Employer Mailing Address/Principal Place Full Name of Contributor WILLIAM W HEILIG Mailing Address	State		Code (Plus	4)	мо	State DAY 6	YEAR	\$	
Employer Mailing Address/Principal Place Full Name of Contributor WILLIAM W HEILIG Mailing Address City MEDIA	State PA		Code (Plus	4)	MO 2	State DAY 6	YEAR 2024	\$	
Employer Mailing Address/Principal Place Full Name of Contributor WILLIAM W HEILIG Mailing Address City MEDIA Employer Name	State PA		Code (Plus	4)	MO 2 Occupat	DAY 6 ion State	YEAR 2024 RETIRE	\$ Zip Coo	500.00 de (Plus 4)
Employer Mailing Address/Principal Place Full Name of Contributor WILLIAM W HEILIG Mailing Address City MEDIA Employer Name Employer Mailing Address/Principal Place	State PA		Code (Plus	4)	MO 2	DAY 6	YEAR 2024	\$	500.00
Employer Mailing Address/Principal Place Full Name of Contributor WILLIAM W HEILIG Mailing Address City MEDIA Employer Name Employer Mailing Address/Principal Place Full Name of Contributor	State PA		Code (Plus	4)	MO 2 Occupat	DAY 6 ion State	YEAR 2024 RETIREE	\$ Zip Coo	500.00 de (Plus 4)
Employer Mailing Address/Principal Place Full Name of Contributor WILLIAM W HEILIG Mailing Address City MEDIA Employer Name Employer Mailing Address/Principal Place Full Name of Contributor JOHN HOLT	State PA	190	Code (Plus		MO 2 Occupat	DAY 6 ion State	YEAR 2024 RETIRE	\$ Zip Coo	500.00 de (Plus 4)
Employer Mailing Address/Principal Place Full Name of Contributor WILLIAM W HEILIG Mailing Address City MEDIA Employer Name Employer Mailing Address/Principal Place Full Name of Contributor JOHN HOLT Mailing Address	State PA Se of Business	190	Code (Plus)63 City		MO 2 Occupat	DAY 6 ion State	YEAR 2024 RETIREE	\$ Zip Coo	500.00 de (Plus 4)
Employer Mailing Address/Principal Place Full Name of Contributor WILLIAM W HEILIG Mailing Address City MEDIA Employer Name Employer Mailing Address/Principal Place Full Name of Contributor JOHN HOLT Mailing Address	State PA Se of Business State PA	190	Code (Plus)63 City		MO 2 Occupat	DAY 6 ion State DAY 30	YEAR 2024 RETIREE	\$ Sip Coo	500.00 de (Plus 4)
Employer Mailing Address/Principal Place Full Name of Contributor WILLIAM W HEILIG Mailing Address City MEDIA Employer Name Employer Mailing Address/Principal Place Full Name of Contributor JOHN HOLT Mailing Address City WEXFORD	State PA Se of Business State PA PA	190	Code (Plus)63 City		MO 2 Occupat	DAY 6 ion State DAY 30	YEAR 2024 RETIREE YEAR 2024	\$ Zip Coo	500.00 de (Plus 4)

								AGL 9	
Full Name of Contributor				мо	DAY	YEAR		F00.00	
MARY BETH JENKINS				1-10	DAI	ILAK	\$	500.00	
Mailing Address				2	6	2024			
City FORD CITY	State	Zi	p Code (Plus 4)		J	2024	Ĭ		
	l _{PA}	1 16	5226						
Employer Name UPMC HEALTH	PLAN			Occupation EXECUTIVE					
Employer Mailing Address/Princip	pal Place of Business		City		State		Zip Code ((Plus 4)	
			PITTSBURGH		PA 15219				
Full Name of Contributor			•						
SHERYL A KASHUBA				МО	DAY	YEAR	\$	500.00	
Mailing Address						2024	7		
City GLENSHAW	State	Zi	p Code (Plus 4)	2	6	2024			
	l _{PA}	1 15	5116						
Employer Name UPMC				Occupat	ion	EXECUT	IVE		
Employer Mailing Address/Principal Place of Business City			•	State		Zip Code (Plus 4)			
			PITTSBURGH		l _{PA}		15213		
Full Name of Contributor					<u> </u>				
JOSEPH G WAGMAN				МО	DAY	YEAR	\$	500.00	
Mailing Address							7		
City YORK	State	Zi	p Code (Plus 4)	2	14	2024			
one, rokk	PA		7403						
Employer Name	IFA	' 1/	403	Occupat	ion	retirei	<u>'</u>		
Employer Mailing Address/Princip	nal Blace of Business		City	Госсирас	State	KETIKEI	Zip Code	(Blue 4)	
Employer Mailing Address/Frincip	pai Place of Busilless		City		State		Zip Code ((Plus 4)	
Full Name of Contributor							1		
EDWARD H WEST				МО	DAY	YEAR	\$	500.00	
Mailing Address							7		
City SEWICKLEY	State	Zi	p Code (Plus 4)	2	6	2024			
SEWICKEET	PA		5143						
Employer Name		. 10		Occupat	ion	INFORM	ATION RE	OUESTED	
			City	State			RMATION REQUESTED Zip Code (Plus 4)		
Zimproyer Huming Additions, Filmospar Huse of Business				1					

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:			То:		
		•		C	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	us 4)					
Receipt Description	•	•			•	•	•	
Futor Curred Total of Bout	Fan Cabadula I. Datailad	Summer Base S	! !	4				PAGE TOTAL
Enter Grand Total of Part	E ON Schedule 1, Detalled	Summary Page, Se	ection	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 Perio	d						
TIM DEFOOR FOR AUDITOR GENERAL	From:	<u>1/1/2024</u> To:	3/4/2024					
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 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)	\$	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 Period					
						То:			
				DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						 		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:		-	•	•		•			
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTA	\L	
						\$		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: <u>1/1/20</u>		<u>24</u> To:		3/4/2024	
						DATE			AMOUNT
Full Name of Contributor COMMONWEALTH LEADERS FUND						DAY	YEAR		
Mailing Address					2	8	2024	\$	1,513.00
City HARRISBURG	State	Zip Code	(Plus 4)						
	PA	17108							
Employer of Contributor		•		Occu	ıpat	ion			
Employer Mailing Address/Princip	City	Sta	State Zip C				ption of Contribution RAISING EVENT		
Full Name of Contributor ELIZABETH P HAVEY			МО		DAY	YEAR			
Mailing Address					2	5	2024	\$	850.00
City PENN VALLEY	State	Zip Code	(Plus 4)						
	PA	19072							
Employer of Contributor DILWORTH PAXSON Occupation					ion A	TORNEY			
Employer Mailing Address/Principal Place of Business		City PHILADELPI				Zip Code(Plus 4) 19102		Description of Contribution	
		I I III LADELI I	114 14	1		72	I IICKE	•	

Summary Page, Section 3.

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				DAY	YEAR						
WINRED			МО		IZAK						
Mailing Address				23	2024	\$	1.18				
City ARLINGTON State Zip Code (Plus 4)			Descrip	tion of Exp	enditure						
VA 22219				SERVICE FEE							
To Whom Paid				DAY	YEAR						
WINRED			МО		IZAK						
Mailing Address				25	2024	\$	0.24				
City ARLINGTON	State	Zip Code (Plus 4)	Description of Expenditure								
VA 22219				SERVICE FEE							
To Whom Paid	мо	DAY	YEAR								
WINRED			110		1 Z / LIK						
Mailing Address			1	25	2024	\$	0.20				
City ARLINGTON State Zip Code (Plus 4)			Description of Expenditure								
VA 22219				SERVICE FEE							
To Whom Paid			мо	DAY	YEAR						
WINRED			HO		IZAK						
Mailing Address			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			110		1 Z / LIK						
Mailing Address			1	30	2024	\$	19.70				
City ARLINGTON	State	Zip Code (Plus 4)	Description of Expenditure								
VA 22219				SERVICE FEE							
To Whom Paid			мо	DAY	YEAR						
AMY W. PETRAGLIA					27.11						
Mailing Address			2	8	2024	\$	3,000.00				
City WEXFORD	State Zip Code (Plus 4)			tion of Exp	enditure						
PA 15090			CONSULTING								

								PAGE 15			
To Whor	m Paid			МО	DAY	YEAR					
BARSZ GOWIE AMON & amp; FULTZ					DAT	TEAR					
Mailing Address					14	2024	\$	34	3.75		
City MEDIA		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
PA 19063				CONSULTING							
To Whom Paid					DAY	YEAR					
DTR CONSULTING											
Mailing Address				2	14	2024	\$	5,00	0.00		
City HARRISBURG		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
PA 17102				PROFESSIONAL SERVICES							
To Whor	m Paid			МО	DAY	YEAR					
LN CON	SULTING, LLC					,					
Mailing Address				2	15	2024	\$	5,00	0.00		
City HARRISBURG		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	ıre				
		PA	17101	CONSU	LTING						
To Whom Paid				МО	DAY	YEAR					
LN CONSULTING, LLC				1-10		I ZAIR					
Mailing A	Address			2	15	2024	\$	4,32	4.14		
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		PA	17101	REIMBURSEMENT							
To Whom Paid				МО	DAY	YEAR					
POSTMA	ASTER					,					
Mailing A	Address			2	16	2024	\$	20	0.00		
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		PA	17108	RENTAL	RENTAL FEE						
To Whor	m Paid			МО	DAY	YEAR					
WINRED											
Mailing Address			2	21	2024	\$		0.12			
City ARLINGTON		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	VA 22219			SERVICE FEE							
Enter 1	and Total of Francis	ituuse en Daard Da	mont Cover Page Thomas					PAGE TOTA	\L		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	17,889	0 72			