

Campaign Finance Report

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

Filer Identification Number : 2008026		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: VOGEL, ELDER FOR SENATE										
Street Address: PO BOX 163										
City: ZELIENOPLE				State: PA		Zip Code: 16063				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2024	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	
				MO	DAY	YEAR				
				11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		MO	DAY	YEAR	
		3	5	2024			4	8	2024	
FOR OFFICE USE ONLY										
A. Amount Brought Forward From Last Report					\$ 194,950.74					
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 0.00					
C. Total Funds Available (Sum Of Lines A and B)					\$ 194,950.74					
D. Total Expenditures (From Schedule III)					\$ 33,797.53					
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 161,153.21					
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00					
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 0.00					

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
VOGEL, ELDER FOR SENATE	From: <u>3/5/2024</u> To: <u>4/8/2024</u>

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

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 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)	\$ 0.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 0.00

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

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 0.00
---	---------

Name of Filing Committee or Candidate	Reporting Period
	From: To:

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

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

PAGE TOTAL	
\$	0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

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

Name of Filing Committee or Candidate	Reporting Period	
	From:	To:

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

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

PAGE TOTAL
\$ 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	Reporting Period
	From: To:

				DATE			AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00	
Mailing Address								
City	State	Zip Code (Plus 4)						
Employer Name				Occupation				
Employer Mailing Address/Principal Place of Business			City		State		Zip Code (Plus 4)	

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

PAGE TOTAL	
\$	0.00

PART E OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Reporting Period From: To:
---------------------------------------	--

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

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS
DURING THE REPORTING PERIOD.**

Detailed Summary Page

Name of Filing Committee or Candidate		Reporting Period	
VOGEL, ELDER FOR SENATE		From: <u>3/5/2024</u> To: <u>4/8/2024</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 0.00

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period From: To:
---------------------------------------	--

			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
VOGEL, ELDER FOR SENATE	From <u>3/5/2024</u> To: <u>4/8/2024</u>

				DATE		AMOUNT	
To Whom Paid Tyler Falk				MO	DAY	YEAR	\$ 425.00
Mailing Address 421 Lawnview Ave				4	8	2024	
City New Castle	State PA	Zip Code (Plus 4) 16105	Description of Expenditure April Treasury Duties				
To Whom Paid LN Consulting				MO	DAY	YEAR	\$ 15,723.22
Mailing Address 121 State St				4	8	2024	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure Mailing 2				
To Whom Paid CEF of Beaver County				MO	DAY	YEAR	\$ 100.00
Mailing Address PO Box 1605				3	28	2024	
City Beaver Falls	State PA	Zip Code (Plus 4) 15010	Description of Expenditure Walk-a-Thon				
To Whom Paid Beaver Valley Lodge #4 FOP				MO	DAY	YEAR	\$ 100.00
Mailing Address PO Box 111				3	28	2024	
City Monaca	State PA	Zip Code (Plus 4) 15061	Description of Expenditure Tee Sponsor				
To Whom Paid CCWC				MO	DAY	YEAR	\$ 100.00
Mailing Address PO Box 1277				3	28	2024	
City Aliquippa	State PA	Zip Code (Plus 4) 15001	Description of Expenditure Bronze Sponsor				
To Whom Paid United Way of Lawrence County				MO	DAY	YEAR	\$ 100.00
Mailing Address 223 N Mercer St				3	28	2024	
City New Castle	State PA	Zip Code (Plus 4) 16101	Description of Expenditure 100th Anniversary Donation				

To Whom Paid			MO	DAY	YEAR	\$ 30.00
Enon Valley Community Historical Society			3	28	2024	
Mailing Address PO Box 235			3	28	2024	
City Enon Valley	State PA	Zip Code (Plus 4) 16120	Description of Expenditure Ad			

To Whom Paid			MO	DAY	YEAR	\$ 50.00
BCLGC			3	28	2024	
Mailing Address 897 State Route 288			3	28	2024	
City Fombell	State PA	Zip Code (Plus 4) 16123	Description of Expenditure Quarter Page Ad			

To Whom Paid			MO	DAY	YEAR	\$ 16,394.19
LN Consulting			3	28	2024	
Mailing Address 121 State St			3	28	2024	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure Mailing 1			

To Whom Paid			MO	DAY	YEAR	\$ 350.00
Tri County FNRA			3	8	2024	
Mailing Address 113 Jeffrey Circle			3	8	2024	
City Coraopolis	State PA	Zip Code (Plus 4) 15108	Description of Expenditure Future of Freedom Fundraiser			

To Whom Paid			MO	DAY	YEAR	\$ 9.12
Zelienople Post Office			3	8	2024	
Mailing Address 249 S Main St			3	8	2024	
City Zelienople	State PA	Zip Code (Plus 4) 16063	Description of Expenditure Mailing of Reports			

To Whom Paid			MO	DAY	YEAR	\$ 160.00
Beaver County Chamber of Commerce			3	8	2024	
Mailing Address 525 Third St 2nd Floor			3	8	2024	
City Beaver	State PA	Zip Code (Plus 4) 15009	Description of Expenditure Silent Auction & Gala			

To Whom Paid			MO	DAY	YEAR	\$ 100.00
Beaver County Symphonic Wind Ensemble			3	8	2024	
Mailing Address 198 Linmar Homes			3	8	2024	
City Aliquippa	State PA	Zip Code (Plus 4) 15001	Description of Expenditure Maestro Sponsor			

To Whom Paid			MO	DAY	YEAR	\$ 100.00
Communicycle			3	8	2024	
Mailing Address 329 Franklin Ave			3	8	2024	
City Aliquippa	State PA	Zip Code (Plus 4) 15001	Description of Expenditure Purse Bingo Sponsor			

To Whom Paid Sheetz			MO	DAY	YEAR	\$ 50.00
Mailing Address 499 Adams St			4	3	2024	
City Rochester	State PA	Zip Code (Plus 4) 15074	Description of Expenditure Gift Card for Fundraiser			

To Whom Paid WESBANCO BANK INC			MO	DAY	YEAR	\$ 6.00
Mailing Address 251 S Main St			3	29	2024	
City Zelienople	State PA	Zip Code (Plus 4) 16063	Description of Expenditure Fee			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 33,797.53

