

# 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 : 20160278		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: PA CAMPGROUND OWNERS PAC										
Street Address: 200 NORTH 3RD STREED SUTE 1500										
City: HARRISBURG				State: PA		Zip Code: 17101				
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	County Code
				MO	DAY	YEAR				
				11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		MO	DAY	YEAR	FOR OFFICE USE ONLY
		1	1	2024			4	8	2024	
A. Amount Brought Forward From Last Report					\$ 15,688.29					
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 3,350.00					
C. Total Funds Available (Sum Of Lines A and B)					\$ 19,038.29					
D. Total Expenditures (From Schedule III)					\$ 1,600.00					
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 17,438.29					
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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
PA CAMPGROUND OWNERS PAC	From: <u>1/1/2024</u> To: <u>4/8/2024</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>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 1,850.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 1,850.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 1,500.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 1,500.00

<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>	\$ 3,350.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

<b>PAGE TOTAL</b>	
\$	0.00

**PART B**  
**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)**

<b>Name of Filing Committee or Candidate</b> PA CAMPGROUND OWNERS PAC				<b>Reporting Period</b> From: <u>1/1/2024</u> To: <u>4/8/2024</u>			
				<b>DATE</b>		<b>AMOUNT</b>	
<b>Full Name of Contributor</b> Courtney Fidler				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 450 Red Church Rd				3	4	2024	
<b>City</b> Auburn	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17922					
<b>Full Name of Contributor</b> John D Garman				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b> 400 Beach Rd				3	15	2024	
<b>City</b> Cedar Run	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17727					
<b>Full Name of Contributor</b> Vincent Gianelli				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 150.00
<b>Mailing Address</b> 117 Chestnut Lake Rd				4	1	2024	
<b>City</b> Brodheadsville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18322					
<b>Full Name of Contributor</b> Douglas Huston				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 626 Cross Rd				3	5	2024	
<b>City</b> Rockwood	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15557					
<b>Full Name of Contributor</b> Ronald Knoebel				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b> 168 Richards Rd				4	1	2024	
<b>City</b> Elysburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17824					

Full Name of Contributor			MO	DAY	YEAR	\$ 150.00
Kevin Maxwell						
Mailing Address			3	15	2024	
40 Round Barn Rd						
City	State	Zip Code (Plus 4)				
Newmanstown	PA	17073				

Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
Sherri Laird Reff							
Mailing Address				4	1	2024	
1204 Montrose Cir							
City	Mechanicsburg	State	Zip Code (Plus 4)				
		PA	17050				

Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
Craig Repetski							
Mailing Address				3	15	2024	
559 Hemlock Dr							
City	Tobyhanna	State	PA	Zip Code (Plus 4)	18466		

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Jeff Ackerman							
Mailing Address				4	1	2024	
2755 River Rd							
City	Upper Mt Bethel	State	Zip Code (Plus 4)				
		PA	18343				

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
Jason Schaeffer						
Mailing Address			4	1	2024	
02649 Camp Rd						
City	Manheim	State				
		PA				
		Zip Code (Plus 4)				
		17545				

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
Michelle Schuster						
Mailing Address 1921 East Main St			4	1	2024	
City Hegins	State PA	Zip Code (Plus 4) 17938				

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

**PAGE TOTAL**

\$ 1,850.00

## 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.

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

<b>Name of Filing Committee or Candidate</b>  PA CAMPGROUND OWNERS PAC	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2024</u> <b>To:</b> <u>4/8/2024</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Robert Baum				3	13	2024	\$ 500.00
<b>Mailing Address</b> 1638 Marshalls Creek							
<b>City</b> East Stroudsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18504					
<b>Employer Name</b> requested				<b>Occupation</b> Campground Owner			
<b>Employer Mailing Address/Principal Place of Business</b> requested			<b>City</b> requested		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18504	
Dan Socola				3	28	2024	\$ 500.00
<b>Mailing Address</b> 2750 Millers Bottom Rd							
<b>City</b> New Columbia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17856					
<b>Employer Name</b> requested				<b>Occupation</b> Campground Owner			
<b>Employer Mailing Address/Principal Place of Business</b> requested			<b>City</b> requested		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17856	
Debby Yeager				3	27	2024	\$ 500.00
<b>Mailing Address</b> 314 Rosepoint Rd							
<b>City</b> New Castle	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101					
<b>Employer Name</b> requested				<b>Occupation</b> Campground Owner			
<b>Employer Mailing Address/Principal Place of Business</b> requested			<b>City</b> requested		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	

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

PAGE TOTAL	
\$	1,500.00



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.

<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>	
PA CAMPGROUND OWNERS PAC		From: <u>1/1/2024</u> To: <u>4/8/2024</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 RECIEVED - 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: <span style="float: right;">To:</span>
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			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.						<b>PAGE TOTAL</b>  \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
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>
PA CAMPGROUND OWNERS PAC	From <u>1/1/2024</u> To: <u>4/8/2024</u>

DATE				AMOUNT		
To Whom Paid Jay Costa for Senate			MO	DAY	YEAR	\$ 500.00
Mailing Address 314 Newport Rd			3	25	2024	
City Pittsburgh	State PA	Zip Code (Plus 4) 15221	Description of Expenditure Contribution			
To Whom Paid Friends of Mary Jo Daley			MO	DAY	YEAR	\$ 500.00
Mailing Address PO Box 752			3	25	2024	
City Conshohocken	State PA	Zip Code (Plus 4) 19428	Description of Expenditure Contribution			
To Whom Paid Committee to Elect Doyle Heffley			MO	DAY	YEAR	\$ 350.00
Mailing Address 140 Ironwood Rd			3	25	2024	
City Palmerton	State PA	Zip Code (Plus 4) 18071	Description of Expenditure Contribution			
To Whom Paid Friends of Marci Mustello			MO	DAY	YEAR	\$ 250.00
Mailing Address 202 Bellefield Dr			4	3	2024	
City Butler	State PA	Zip Code (Plus 4) 16001	Description of Expenditure Contribution			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 1,600.00

