

# 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 : 20170358		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: COMMONWEALTH LEADERS FUND										
Street Address:										
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	
				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	
A. Amount Brought Forward From Last Report						\$ 127,281.95				
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 528,520.24				
C. Total Funds Available (Sum Of Lines A and B)						\$ 655,802.19				
D. Total Expenditures (From Schedule III)						\$ 650,392.02				
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 5,410.17				
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>
COMMONWEALTH LEADERS FUND	From: <u>3/5/2024</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>	\$ 450.00

<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>	\$ 925.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 925.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 525,000.00
<b>All Other Contributions (Part D)</b>	\$ 2,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 527,000.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 145.24

<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>	\$ 528,520.24
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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.

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

DATE				AMOUNT
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Full Name of Contributing Committee			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 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>	<b>Reporting Period</b>
COMMONWEALTH LEADERS FUND	From: <u>3/5/2024</u> To: <u>4/8/2024</u>

				DATE		AMOUNT	
Full Name of Contributor WILLIAM FREAS				MO	DAY	YEAR	\$ 100.00
Mailing Address							
City	WEST CHESTER	State	Zip Code (Plus 4)	3	15	2024	
		PA	19385				
Full Name of Contributor KENNETH SNARLEY				MO	DAY	YEAR	\$ 100.00
Mailing Address							
City	CARNEGIE	State	Zip Code (Plus 4)	4	2	2024	
		PA	15106				
Full Name of Contributor PETER HESS				MO	DAY	YEAR	\$ 100.00
Mailing Address							
City	FORD CITY	State	Zip Code (Plus 4)	4	2	2024	
		PA	16226				
Full Name of Contributor CAROLINE SHELLEY				MO	DAY	YEAR	\$ 200.00
Mailing Address							
City	LANCASTER	State	Zip Code (Plus 4)	4	1	2024	
		PA	17601				
Full Name of Contributor MARTIN BAUER				MO	DAY	YEAR	\$ 225.00
Mailing Address							
City	MIDDLEBURG	State	Zip Code (Plus 4)	4	1	2024	
		PA	17042				
Full Name of Contributor PATRICIA JEFFER				MO	DAY	YEAR	\$ 100.00
Mailing Address							
City	AHOHOLA	State	Zip Code (Plus 4)	4	3	2024	
		PA	18458				
Full Name of Contributor KATHLEEN STOFKO				MO	DAY	YEAR	\$ 100.00
Mailing Address							
City	ALLENTOWN	State	Zip Code (Plus 4)	4	4	2024	
		PA	18103				

**PAGE TOTAL**

\$ 925.00

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

**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>  COMMONWEALTH LEADERS FUND	<b>Reporting Period</b>  <b>From:</b> <u>3/5/2024</u> <b>To:</b> <u>4/8/2024</u>
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				DATE	AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR
COMMONWEALTH CHILDRENS CHOICE FUND						
Mailing Address				3	20	2024
City	HARRISBURG	State	PA			
		Zip Code (Plus 4)	17101			
Full Name of Contributing Committee				MO	DAY	YEAR
COMMONWEALTH CHILDRENS CHOICE FUND						
Mailing Address				3	22	2024
City	HARRISBURG	State	PA			
		Zip Code (Plus 4)	17101			
Full Name of Contributing Committee				MO	DAY	YEAR
COMMONWEALTH CHILDRENS CHOICE FUND						
Mailing Address				4	1	2024
City	HARRISBURG	State	PA			
		Zip Code (Plus 4)	17101			

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

<b>PAGE TOTAL</b>
\$ 525,000.00

**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>  COMMONWEALTH LEADERS FUND	<b>Reporting Period</b>  <b>From:</b> <u>3/5/2024</u> <b>To:</b> <u>4/8/2024</u>
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			DATE	AMOUNT		
<b>Full Name of Contributor</b> LARRY DEYOUNG			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b>			3	12	2024	
<b>City</b> DEVON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19333				
<b>Employer Name</b> RETIRED			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

<b>Full Name of Contributor</b> JAY ALEXANDER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b>			3	21	2024	
<b>City</b> MONTOURSVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17754				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

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

<b>PAGE TOTAL</b>
\$ 2,000.00

## 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.**

<b>Name of Filing Committee or Candidate</b>  COMMONWEALTH LEADERS FUND	<b>Reporting Period</b>  <b>From:</b> <u>3/5/2024</u> <b>To:</b> <u>4/8/2024</u>
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				DATE			AMOUNT	
Full Name				MO	DAY	YEAR	\$	145.24
FIRST NATIONL BANK OF PA								
Mailing Address								
City		State	Zip Code (Plus 4)					
HARRISBURG		PA	17102	3	29	2024		
Receipt Description				INTEREST EARNED				

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

<b>PAGE TOTAL</b>
\$ 145.24



## 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>	
COMMONWEALTH LEADERS FUND		From: <u>3/5/2024</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 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: <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:	
				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>
COMMONWEALTH LEADERS FUND	From <u>3/5/2024</u> To: <u>4/8/2024</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ATLAS & MIGHT				
<b>Mailing Address</b>	3	6	2024	\$ 17,075.00
<b>City</b> CAMP HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17011	<b>Description of Expenditure</b> SURVEY	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
PAYTRACE				
<b>Mailing Address</b>	4	2	2024	\$ 20.10
<b>City</b> SPOKANE VALLEY	<b>State</b> WA	<b>Zip Code (Plus 4)</b> 99216	<b>Description of Expenditure</b> CREDIT CARD PROCESSING FEE	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
CLEARWORD				
<b>Mailing Address</b>	3	11	2024	\$ 2,500.00
<b>City</b> ASHBURN	<b>State</b> VA	<b>Zip Code (Plus 4)</b> 20147	<b>Description of Expenditure</b> DIRECT MAIL	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
COMMONWEALTH ENTREPRENEURS, LLC				
<b>Mailing Address</b>	4	1	2024	\$ 3,642.92
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	<b>Description of Expenditure</b> RENT APRIL	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
DEBEE CLARK & WEBER				
<b>Mailing Address</b>	4	2	2024	\$ 2,000.00
<b>City</b> OKLAHOMA CITY	<b>State</b> OK	<b>Zip Code (Plus 4)</b> 73154	<b>Description of Expenditure</b> LEGAL	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
POP PAC				
<b>Mailing Address</b>	3	11	2024	\$ 50,000.00
<b>City</b> MEDIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19063	<b>Description of Expenditure</b> CONTRIBUTION	

To Whom Paid			MO	DAY	YEAR	\$ 354.00
US TREASURY						
Mailing Address			3	14	2024	
City MINNEAPOLIS	State MN	Zip Code (Plus 4) 55401	Description of Expenditure TAXES 1190-POL			
To Whom Paid			MO	DAY	YEAR	\$ 10,000.00
FRIENDS OF KIM WARD						
Mailing Address			3	18	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CONTRIBUTION			
To Whom Paid			MO	DAY	YEAR	\$ 34,400.00
ATLAS & MIGHT						
Mailing Address			3	18	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure SURVEY & POLLING			
To Whom Paid			MO	DAY	YEAR	\$ 2,500.00
VOLUNTEERS FOR ARGALL						
Mailing Address			3	18	2024	
City TAMAQUA	State PA	Zip Code (Plus 4) 18252	Description of Expenditure CONTRIBUTION			
To Whom Paid			MO	DAY	YEAR	\$ 24,900.00
PERSONALIZED MARKETING						
Mailing Address			3	20	2024	
City LYNCHBURG	State VA	Zip Code (Plus 4) 24502	Description of Expenditure DIRECT MAIL			
To Whom Paid			MO	DAY	YEAR	\$ 435,000.00
ATLAS & MIGHT						
Mailing Address			3	22	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure DIRECT MAIL, DIGITAL, TEXT			
To Whom Paid			MO	DAY	YEAR	\$ 20,000.00
SRCC						
Mailing Address			3	18	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CONTRIBUTION			
To Whom Paid			MO	DAY	YEAR	\$ 3,000.00
LMT-YARDLEY GOP						
Mailing Address			4	1	2024	
City YARDLEY	State PA	Zip Code (Plus 4) 19067	Description of Expenditure CONTRIBUTION			

<b>To Whom Paid</b> ELEVATE STRATEGY LLC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 10,000.00
<b>Mailing Address</b>			4	1	2024	
<b>City</b> BIRMINGHAM	<b>State</b> AL	<b>Zip Code (Plus 4)</b> 35244	<b>Description of Expenditure</b> CONSULTING			

  

<b>To Whom Paid</b> RAGA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 25,000.00
<b>Mailing Address</b>			4	1	2024	
<b>City</b> WASHINGTON	<b>State</b> DC	<b>Zip Code (Plus 4)</b> 20006	<b>Description of Expenditure</b> CONTRIBUTION			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						<b>\$</b> 640,392.02

