

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		20240046		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> FRIENDS OF JEFF OLSOMMER												
<b>Street Address:</b>												
<b>City:</b> GREENTOWN						<b>State:</b> PA			<b>Zip Code:</b> 18426			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	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	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>				
						4	23	2024				
									(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		2	12	2024		4	8	2024				
<b>A. Amount Brought Forward From Last Report</b>						\$ 25,460.61						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 52,129.43						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 77,590.04						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 65,830.20						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 11,759.84						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 31,905.90						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 26,000.00						

## 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>
FRIENDS OF JEFF OLSOMMER	From: <u>2/12/2024</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>	\$ 125.00

<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>	\$ 204.43
<b>All Other Contributions (Part B)</b>	\$ 800.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 1,004.43

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 19,000.00
<b>All Other Contributions (Part D)</b>	\$ 32,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 51,000.00

<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>	\$ 52,129.43
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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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF JEFF OLSOMMER	<b>Reporting Period</b>  <b>From:</b> <u>2/12/2024</u> <b>To:</b> <u>4/8/2024</u>
<b>DATE</b>	
<b>AMOUNT</b>	

<b>Full Name of Contributing Committee</b> FRIENDS OF JOE ADAMS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 204.43
<b>Mailing Address</b>			3	11	2024	
<b>City</b> HAMLIN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18427				

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

<b>PAGE TOTAL</b>
\$ 204.43

## 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> FRIENDS OF JEFF OLSOMMER	<b>Reporting Period</b> From: <u>2/12/2024</u> To: <u>4/8/2024</u>
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				DATE			AMOUNT
Full Name of Contributor JOSEPH CURTIS				MO	DAY	YEAR	\$ 100.00
Mailing Address							
City	BOCA RARIB	State	Zip Code (Plus 4)	3	1	2024	
		FL	33433				
Full Name of Contributor LANCE SPODEK				MO	DAY	YEAR	\$ 100.00
Mailing Address							
City	LORDS VALLEY	State	Zip Code (Plus 4)	3	15	2024	
		PA	18428				
Full Name of Contributor ANTHONY HERZOG				MO	DAY	YEAR	\$ 250.00
Mailing Address							
City	HONESDALE	State	Zip Code (Plus 4)	4	6	2024	
		PA	18431				
Full Name of Contributor VICTORIA GILL				MO	DAY	YEAR	\$ 100.00
Mailing Address							
City	MOSCOW	State	Zip Code (Plus 4)	3	18	2024	
		PA	18444				
Full Name of Contributor DEBORAH FISCHER				MO	DAY	YEAR	\$ 250.00
Mailing Address							
City	MILLFORD	State	Zip Code (Plus 4)	4	3	2024	
		PA	18337				

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

<b>PAGE TOTAL</b>
\$ 800.00

## 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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF JEFF OLSOMMER	<b>Reporting Period</b>  <b>From:</b> <u>2/12/2024</u> <b>To:</b> <u>4/8/2024</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PACAH				3	17	2024	
Mailing Address							
City	CAMP HILL	State	PA	Zip Code (Plus 4)		17011	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
RPAC				3	15	2024	
Mailing Address							
City	LEMOYNE	State	PA	Zip Code (Plus 4)		17043	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 2,500.00
BAKER FOR SENATE				3	27	2024	
Mailing Address							
City	LEHMAN	State	PA	Zip Code (Plus 4)		18627	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 5,000.00
AGENT PAC OF PENNSYLVANIA				3	15	2024	
Mailing Address							
City	MECHANICSBURG	State	PA	Zip Code (Plus 4)		17055	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 10,000.00
NORTHEAST REPUBLICAN HOUSE DELEGATION				3	4	2024	
Mailing Address							
City	WEST PITTSTON	State	PA	Zip Code (Plus 4)		18643	

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

<b>PAGE TOTAL</b>
\$ 19,000.00

**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>  FRIENDS OF JEFF OLSOMMER	<b>Reporting Period</b>  <b>From:</b> <u>2/12/2024</u> <b>To:</b> <u>4/8/2024</u>
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				DATE	AMOUNT	
Full Name of Contributor				MO	DAY	YEAR
JOSEPH DEOLEY						
Mailing Address				3	17	2024
City	MILFORD	State	Zip Code (Plus 4)			
		PA	18337			
Employer Name JPD FORENSIC ACCOUNTING				Occupation CPA/OWNER		
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)	
			MILFOND	PA	18337	
Full Name of Contributor				MO	DAY	YEAR
NICHOLAS BARNA						
Mailing Address				4	3	2024
City	HONESDALE	State	Zip Code (Plus 4)			
		PA	18431			
Employer Name BARNA LAW				Occupation ATTORNEY		
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)	
			HONESDALE	PA	18431	
Full Name of Contributor				MO	DAY	YEAR
ROBERT GRIMM						
Mailing Address				4	3	2024
City	WAYMART	State	Zip Code (Plus 4)			
		PA	18472			
Employer Name GRIMM CONSTRUCTION				Occupation OWNER		
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)	
			WAYMART	PA	18472	
Full Name of Contributor				MO	DAY	YEAR
MICHAEL GRACI						
Mailing Address				3	11	2024
City	MOSCOW	State	Zip Code (Plus 4)			
		PA	18444			
Employer Name				Occupation OWNER		
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)	
			LAKE ARIEL	PA	18436	

<b>Full Name of Contributor</b> JEFFREY OLSOMMER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 5,000.00
<b>Mailing Address</b>			3	21	2024	
<b>City</b> HAMLIN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18427				
<b>Employer Name</b> OLSOMMER-CLARK INSURANCE			<b>Occupation</b> INSURANCE AGENT/OWNER			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b> HAMLIN	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 18427	

  

<b>Full Name of Contributor</b> JEFFREY OLSOMMER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 21,000.00
<b>Mailing Address</b>			4	5	2024	
<b>City</b> HAMLIN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18427				
<b>Employer Name</b> OLSOMMER-CLARK INSURANCE			<b>Occupation</b> INSURANCE AGENT/OWNER			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b> HAMLIN	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 18427	

  

<b>Full Name of Contributor</b> LEONARD & MARGENY SCHWARTZ			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 500.00
<b>Mailing Address</b>			3	28	2024	
<b>City</b> PLEASANT MOUNT	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18453				
<b>Employer Name</b> OWNERS-WAYNE HOTEL			<b>Occupation</b> HOSPITALITY			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b> HONESDALE	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 18431	

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

<b>PAGE TOTAL</b>
<b>\$</b> 32,000.00

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.**

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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF JEFF OLSOMMER		From: <u>2/12/2024</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)	\$ 31,905.90
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.)			\$ 31,905.90

**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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF JEFF OLSOMMER	From: <u>2/12/2024</u> To: <u>4/8/2024</u>

				DATE		AMOUNT	
Full Name of Contributor EDWARD NIKLES, SR.				MO 3	DAY 15	YEAR 2024	\$  1,000.00
Mailing Address							
City MILFORD		State PA	Zip Code(Plus 4) 18337				
Employer of Contributor RETIRED				Occupation RETIRED			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code(Plus 4)	Description of Contribution ADVERTISING	
Full Name of Contributor WILLIAM ROSADO				MO 3	DAY 15	YEAR 2024	\$  2,000.00
Mailing Address							
City MOOSEC		State PA	Zip Code(Plus 4) 18507				
Employer of Contributor ROSADO GROUP				Occupation BUSINESSMAN			
Employer Mailing Address/Principal Place of Business			City MILFORD	State PA	Zip Code(Plus 4) 18337	Description of Contribution ADVERTISING	
Full Name of Contributor PETE HELMS				MO 3	DAY 15	YEAR 2024	\$  1,600.00
Mailing Address							
City HAWLEY		State PA	Zip Code(Plus 4) 18428				
Employer of Contributor DAVID R CHANT REALTORS				Occupation REALTOR			
Employer Mailing Address/Principal Place of Business			City HAWLWY	State PA	Zip Code(Plus 4) 18428	Description of Contribution ADVERTISING	
Full Name of Contributor JOHN KIESENDAHL				MO 3	DAY 15	YEAR 2024	\$  1,000.00
Mailing Address							
City HAWLEY		State PA	Zip Code(Plus 4) 18428				
Employer of Contributor WOODLOCH				Occupation HOSPITALITY			
Employer Mailing Address/Principal Place of Business			City HAWLWY	State PA	Zip Code(Plus 4) 18428	Description of Contribution ADVERTISING	

<b>Full Name of Contributor</b> DEBRA K. GUNNIP			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 400.00
<b>Mailing Address</b>			3	15	2024	
<b>City</b> GREENTOWN	<b>State</b> PA	<b>Zip Code(Plus 4)</b> 18426				
<b>Employer of Contributor</b> DAVIS R CHANT REALTORS			<b>Occupation</b> REALTOR			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b> HAWLWY	<b>State</b> PA	<b>Zip Code(Plus 4)</b> 18428	<b>Description of Contribution</b> ADVERTISING	

  

<b>Full Name of Contributor</b> REPUBLICAN PARTY OF PENNSYLVANIA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 25,905.90
<b>Mailing Address</b>			4	8	2024	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code(Plus 4)</b> 17110				
<b>Employer of Contributor</b> N/A			<b>Occupation</b> N/A			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code(Plus 4)</b>	<b>Description of Contribution</b> CAMPAIGN LITERATURE & POSTAGE	
<b>Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.</b>						<b>PAGE TOTAL</b> 31,905.90

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF JEFF OLSOMMER	From <u>2/12/2024</u> To: <u>4/8/2024</u>

				DATE	AMOUNT		
To Whom Paid				MO	DAY	YEAR	\$ 100.00
PIKE COUNTY COUNCIL REPUBLICAN WOMEN				3	20	2024	
Mailing Address				3	20	2024	\$ 100.00
City	MILFORD	State	PA	Zip Code (Plus 4)	18337	Description of Expenditure	
To Whom Paid				MO	DAY	YEAR	\$ 160.00
PIKE COUNTY COUNCIL REPUBLICAN WOMEN				3	22	2024	
Mailing Address				3	22	2024	\$ 160.00
City	MILFORD	State	PA	Zip Code (Plus 4)	18337	Description of Expenditure	
To Whom Paid				MO	DAY	YEAR	\$ 4,050.00
BAILEY DESIGN & ADVERTISING				4	6	2024	
Mailing Address				4	6	2024	\$ 4,050.00
City	HONESDALE	State	PA	Zip Code (Plus 4)	18431	Description of Expenditure	
To Whom Paid				MO	DAY	YEAR	\$ 2,286.25
ENCORE OUTDOOR, LLC				2	21	2024	
Mailing Address				2	21	2024	\$ 2,286.25
City	COVINGTON TWP	State	PA	Zip Code (Plus 4)	18424	Description of Expenditure	
To Whom Paid				MO	DAY	YEAR	\$ 298.00
ENCORE OUTDOOR, LLC				2	29	2024	
Mailing Address				2	29	2024	\$ 298.00
City	COVINGTON TWP	State	PA	Zip Code (Plus 4)	18424	Description of Expenditure	
To Whom Paid				MO	DAY	YEAR	\$ 1,690.00
ENCORE OUTDOOR, LLC				3	4	2024	
Mailing Address				3	4	2024	\$ 1,690.00
City	COVINGTON TWP	State	PA	Zip Code (Plus 4)	184	Description of Expenditure	

To Whom Paid GREENE DREHER VOLUNTEER FIRE ASSOC.			MO	DAY	YEAR	\$ 225.00
Mailing Address			4	6	2024	
City NEW FOUNDLAND	State PA	Zip Code (Plus 4) 18445	Description of Expenditure MEETING EXPENSE			
To Whom Paid HORTON PLACE			MO	DAY	YEAR	\$ 900.00
Mailing Address			3	11	2024	
City MOSCOW	State PA	Zip Code (Plus 4) 18444	Description of Expenditure SIGN FRAMES			
To Whom Paid HRCC			MO	DAY	YEAR	\$ 12,000.00
Mailing Address			3	11	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure DONATION			
To Whom Paid HRCC			MO	DAY	YEAR	\$ 12,000.00
Mailing Address			3	21	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure DONATION			
To Whom Paid HRCC			MO	DAY	YEAR	\$ 12,000.00
Mailing Address			4	4	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure DONATION			
To Whom Paid PIKE T-SHIRT, LLC			MO	DAY	YEAR	\$ 3,719.30
Mailing Address			2	29	2024	
City MATAMORAS	State PA	Zip Code (Plus 4) 183356	Description of Expenditure SIGNS			
To Whom Paid RGB POLITICS			MO	DAY	YEAR	\$ 3,359.14
Mailing Address			2	25	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure ADVERTISING			
To Whom Paid RGB POLITICS			MO	DAY	YEAR	\$ 7,750.00
Mailing Address			3	11	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure ADVERTISING			

<b>To Whom Paid</b> RGB POLITICS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 286.20
<b>Mailing Address</b>			3	17	2024	
<b>City</b> CAMP HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17011	<b>Description of Expenditure</b> ADVERTISING			

<b>To Whom Paid</b> STEVE'S SIGN WORKS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,067.00
<b>Mailing Address</b>			2	29	2024	
<b>City</b> HAMLIN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18427	<b>Description of Expenditure</b> SIGNS			

<b>To Whom Paid</b> TOM QUICK INC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,750.00
<b>Mailing Address</b>			4	5	2024	
<b>City</b> MILFORD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18337	<b>Description of Expenditure</b> MEETING EXPENSE			

<b>To Whom Paid</b> STEVE'S SIGN WORKS, INC.			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 297.86
<b>Mailing Address</b>			4	8	2024	
<b>City</b> HAMLIN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18427	<b>Description of Expenditure</b> SIGNS			

<b>To Whom Paid</b> JEFFREY OLSOMMER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 706.05
<b>Mailing Address</b>			4	8	2024	
<b>City</b> HAMLIN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18427	<b>Description of Expenditure</b> REIMBURSE-DINNER TICKETS BASKET ITEMS-SUPPLIES			

<b>To Whom Paid</b> DEBRA K GUNNIO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 162.60
<b>Mailing Address</b>			4	8	2024	
<b>City</b> GREENTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18426	<b>Description of Expenditure</b> POSTAGE			

<b>To Whom Paid</b> ANEDOT			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 22.80
<b>Mailing Address</b>			3	31	2024	
<b>City</b> NEW ORLEANS	<b>State</b> LA	<b>Zip Code (Plus 4)</b> 70112	<b>Description of Expenditure</b> PROCESSING FEES			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 65,830.20

**SCHEDULE IV**  
**STATEMENT OF UNPAID DEBTS**  
Use this Section to itemize all unpaid debts and obligations  
which are outstanding at the end of the reporting period

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF JEFF OLSOMMER	<b>Reporting Period</b>  From: 2/12/2024 To: 4/8/2024
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				DATE		Outstanding Balance of Debt	
Name of Creditor JEFFREY OLSOMMER				MO	DAY	YEAR	\$ 5,000.00
Mailing Address				3	21	2024	
City HAMLIN		State PA	Zip Code (Plus 4) 18427	Description of Debt LOAN TO COMMITTEE			
Name of Creditor JEFFREY OLSOMMER				MO	DAY	YEAR	\$ 21,000.00
Mailing Address				4	5	2024	
City HAMLIN		State PA	Zip Code (Plus 4) 18427	Description of Debt LOAN TO COMMITTEE			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 26,000.00