### **Campaign Finance Report**

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

Filer Identificati Number :	on 202	40046			Rep File			CANDI	ANDIDATE COMMITTEE V LOBBYIST								
Name of Filing C	Committee, Candi	date or L	obbyist:		FRIE	NDS	S OF .	JEFF OLS	ОММЕ	R							
Street Address:	P.O. BOX 10	01															
City:	GREENTOWN	1						State:	PA			Zip Cod	le: 18	3426			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	- 2	. <b>X</b>	30 DA PRIMA		POST- 3.			AMENDM REPORT		Yes	No	•	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION					Y F	POST-	6.		TERMINA REPORT		Yes	No	~	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2024					IG METHO				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	Sought by Candida	ate:	•					DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County	y
								МО	DAY	YE	AR	, rumber	code			couc	
								11		5	2024		(SEE IN	STRUCTI	ONS FOR C	ODES)	
	Receipts and	МО	DAY	/EAR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	s trom:		3 5	20	024	T	0	4		8	2024						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				0.00						
B. Total Monet	ary Contributions	And Rec	eipts (From S	Sche	dule :	I)	\$			78,1	29.43						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			78,1	29.43						
D. Total Expen	ditures (From Scl	nedule II	I)				\$			66,3	69.59						
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)	)			\$			11,7	59.84						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	nedul	le II)	)	\$			31,9	05.90						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)				\$			51,5	00.00			1			
				AFF	IDA'	VI٦	ΓSE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign he	ere. 1	If this	s is	a Can	ndidate re	eport, o	candio	date sig	jn here.					
I swear (or affirm) correct and comple	) that this report, inc ete.	cluding the	e attached sche	dules	filed	on p	paper (	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , true	9
Sworn to and subs	cribed before me th day of	is	20							s	ignature	of Perso	n Submit	ting Rep	oort		•
	Signat	ure					· -					Prin	ted Name	<b>e</b>			-
My Commission Ex	cpires						_					Ema	il				
	МО	D	AY	YR					Are	ea Cod	e	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of a car	didate's	authorized C	omm	ittee	e, Ca	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	this	politi	cal	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,	
Sworn to and subso	ribed before me this	<b>.</b>	20								S	ignature o	of Candid	ate			۱ -
	day of						-					Printe	d Name				-
M. C	Signature						•					Ema	il				.
My Commission Exp																	
	МО	D	AY	YR					Area	Code		Da	ytime T	elephor	ne Numb	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -							
Name of Filing Committee or Candidate	Reporting	g Period					
FRIENDS OF JEFF OLSOMMER	From:	<u>3/5/202</u>	<u>4</u> To:	4/8/2024			
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor							
TOTAL for the Reporting	(1)	\$	125.00				
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)							
Contributions Received From Political Committees (Part A)	\$	204.43					
All Other Contributions (Part B)	All Other Contributions (Part B)						
TOTAL for the Reporting	\$	1,004.43					
3. Contributions Received Over \$250.00 (From Part C and Part D)							
Contributions Received From Political Committees (Part C)			\$	19,000.00			
All Other Contributions (Part D)			\$	58,000.00			
TOTAL for the Reporting	y Period	(3)	\$	77,000.00			
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)							
TOTAL for the Reporting	g Period	(4)	\$	0.00			
				_			
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	78,129.43			

#### **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		
FRIENDS OF JEFF OLSOMMER	From:	3/5/2024	To:	<u>4/8/2024</u>

Full Name of Contributing Committee FRIENDS OF JOE ADAMS	МО	DAY	YEAR			
Mailing Address PO BOX 100				11	2024	<b>\$</b> 204.43
City HAMLIN	<b>State</b> PA	Zip Code (Plus 4) 18427	ז	11	2021	

**PAGE TOTAL** 204.43

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)

Name of Filing Committee or	Candidate		Reporting Period						
FRIENDS OF JEFF OLSOMME	i.R		From:	<u>3/5/</u> 2	2024 <b>T</b> o	<u>4/8/2024</u>			
		I		DATE		AMOUNT			
Full Name of Contributor JOSEPH CURTIS			МО	DAY	YEAR				
Mailing Address 6497 VIA	REGINE				\$ 100.00				
City BOCA RATON	<b>State</b> FL	<b>Zip Code (Plus 4)</b> 33433	3	1	2024				
Full Name of Contributor LANCE SPODEK		МО	DAY	YEAR					
Mailing Address 1891 HEM  City LORDS VALLEY	LOCK FARMS State PA	<b>Zip Code (Plus 4)</b> 18428	3	15	2024	\$ 100.00			
Full Name of Contributor ANTHONY HERZOG		МО	DAY	YEAR					
Mailing Address 8 WHITE T	AIL PLACE					<b>\$</b> 250.00			
City HONESDALE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18431	4	6	2024				
Full Name of Contributor VICTORIA GILL			МО	DAY	YEAR				
Mailing Address 170 WHEE  City MOSCOW	State PA	<b>Zip Code (Plus 4)</b> 18444	3	18	2024	\$ 100.00			
Full Name of Contributor DEBORAH FISCHER	_	МО	DAY	YEAR					
Mailing Address 101 BOSTO City MILFORD	ON CT State	Zip Code (Plus 4)	4	3	2024	\$ 250.00			
	PA	18337							
						PAGE TOTAL			

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

**PAGE TOTAL \$** 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.

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate Reportin						g Period						
FRIENDS OF JEFF OLSOMMER			From:	<u>3/5/2024</u> <b>To:</b>			<u>4/8/2024</u>						
		·		DA	TE		AMOUNT						
Full Name of Contributing Committee PACAH	МО	DAY	YEAR	\$	500.00								
Mailing Address 205 GRANDVIEW AV	E SUITE 207			3	17	2024	]	333.33					
City CAMPHILL	State PA	<b>Zip Code</b> 17011	e (Plus 4)		-7								
Full Name of Contributing Committee RPAC				МО	DAY	YEAR	\$	1,000.00					
Mailing Address 500 N. 12TH STREET	-			3	15	2024		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
City LEMOYNE	State PA	<b>Zip Code</b> 17043	e (Plus 4)										
Full Name of Contributing Committee BAKER FOR SENATE		МО	DAY	YEAR	\$	2,500.00							
Mailing Address PO BOX 59				3	27	2024	7	2,500.00					
City LEHMAN	State PA	<b>Zip Code</b> 18627	e (Plus 4)	3	27	2024							
Full Name of Contributing Committee  AGENT PAC OF PENNSYLVANIA				МО	DAY	YEAR	\$	5,000.00					
Mailing Address 5050 RITTER ROAD		1		3	15	2024							
City MECHANICSBURG	State PA	<b>Zip Code</b> 17055	e (Plus 4)										
Full Name of Contributing Committee				мо	DAY	YEAR							
	NORTHEAST REPUBLICAN HOUSE DELEGATION						\$	10,000.00					
5 322 6	Mailing Address 612 WYOMING AVE				4	2024							
City WEST PITTSTON	State PA	2ip Code 18643	e (Plus 4)										
						Γ		DACE TOTAL					

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

19,000.00

### 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					Reporting Period						
FRIENDS OF JEFF OLSOMMER				Fron	n:	<u>3/5/2</u>	<u>024</u> To	<u>4</u> <b>To:</b> <u>4/8/2024</u>			
					DA	ATE		Α	MOUNT		
Full Name of Contributor					мо	DAY	YEAR		1 000 00		
JOSEPH DEOLEY					1-10	DAI	ILAK	\$	1,000.00		
Mailing Address 307 STAWBERRY AL	LEY				3	17	2024				
City MILFORD	State	Zip	Code (Plus	4)							
	PA	183	337								
Employer Name JPD FORENSIC ACCOL	JNTING				Occupat	tion	CPA/OW	/NER			
Employer Mailing Address/Principal Place of Business City						State		Zip Cod	de (Plus 4)		
306 APPLE ALY			MILFORD			PA		18337			
Full Name of Contributor					мо	DAY	YEAR		1 000 00		
NICHOLAS BARNA						<i>-</i>	· LAN	\$	1,000.00		
Mailing Address 831 COURT STREET	·			4	3	2024					
City HONESDALE	State	Zip	Code (Plus	4)							
	PA	184	431								
Employer Name BARNA LAW					Occupat	tion	ATTORN	IEY			
Employer Mailing Address/Principal Plac	e of Business		City		State			Zip Cod	de (Plus 4)		
207 TENTH STREET			HONESDA	LE	PA			18431			
Full Name of Contributor											
ROBERT GRINELI					МО	DAY	YEAR	\$	1,500.00		
Mailing Address PO BOX 172					4	3	2024				
City WAYMART	State	Zip	Code (Plus	4)	]		2024				
	PA	184	472								
Employer Name GRIMM CONSTRUCTION	ON				Occupat	tion	OWNER				
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Cod	de (Plus 4)		
P O BOX X			WAYMART	•		PA		18472			
Full Name of Contributor					мо	DAY	YEAR		2 000 00		
MICHAEL GRACI					1-10	DAI	ILAK	\$	2,000.00		
Mailing Address PO BOX 1082				3	11	2024					
City MOSCOW	State	Zip Code (Plus 4)									
	PA	184	444								
Employer Name					Occupation OWNER						
Employer Mailing Address/Principal Place of Business City					State			Zip Code (Plus 4)			
616 HAMLIN HWY			616 HAMLIN HWY LAKE ARIEL					18436			

Full Name of Contributor JEFFREY OLSOMMER				мо	DAY	YEAR	\$	5,000.00	
Mailing Address PO BOX 893				3	21	2024	7		
City HAMLIN	State	Zip	Code (Plus 4)		21	2024	1		
	PA	184	127						
Employer Name OLSOMMER-CLARKE	INSURANCE			Occupat	ion	INSURA	NCE AGEI	NT/OWNER	
Employer Mailing Address/Principal Plac	ce of Business		City		State		Zip Code	(Plus 4)	
610 HAMLIN HWY			HAMLIN		PA		18427		
Full Name of Contributor				. MO	DAY	VEAD			
JEFFREY OLSOMMER				МО	DAY	YEAR	<b>\$</b>	21,000.00	
Mailing Address PO BOX 893				4	5	2024	1		
City HAMLIN	State	Zip	Code (Plus 4)	]	3	2027	Ī		
	PA	184	127						
Employer Name OLSOMMER-CLARKE	INSURANCE			Occupat	ion	INSURA	NCE AGEI	NT/OWNER	
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Code	(Plus 4)	
610 HAMLIN HWY			HAMLIN		PA		18427		
Full Name of Contributor				мо	DAY	YEAR	\$	F00.00	
LEONARD & Amp; MARGERY SCHWARTZ	7						] *	500.00	
Mailing Address 1868 BETHANY TPK	E			3	28	2024			
City PLEASANT MOUNT	State	Zip	Code (Plus 4)						
	PA I	184	153				l		
Employer Name OWNERS-WAYNE HO	ΓEL			Occupat	ion	HOSPIT	ALITY		
Employer Mailing Address/Principal Place	ce of Business		City		State		Zip Code	(Plus 4)	
1202 MAIN STREET			HONESDALE		PA		18431		
Full Name of Contributor JEFFREY OLSOMMER				мо	DAY	YEAR	\$	500.00	
Mailing Address PO BOX 893					-1	2024	1		
City HAMLIN	State	Zip	Code (Plus 4)	2	1	2024			
	PA	184	127						
Employer Name OLSOMMER-CLARKE 1	INSURANCE			Occupation INSURANCE AGENT/OWNER					
Employer Mailing Address/Principal Plac	ce of Business		City		State		Zip Code		
601 HAMLIN HWY			HAMLIN		PA		18427		
Full Name of Contributor					•				
JEFFREY OLSOMMER				МО	DAY	YEAR	\$	25,000.00	
Mailing Address PO BOX 893						2024	1		
City HAMLIN	State	Zip	Code (Plus 4)	2	7	2024			
	PA	184	127						
Employer Name OLSOMMER-CLARKE	-			Occupat	ion	INSURA	NCE AGEI	NT/OWNER	
Employer Mailing Address/Principal Place			City		State	2	Zip Code		
601 HAMLIN HWY			HAMLIN		PA		18427	,	
Full Name of Contributor							<u> </u>		
PAUL M. MEAGHER, JR.				МО	DAY	YEAR	\$	500.00	
Mailing Address 119 MILLER DRIVE				2	r	2024	7		
City HONESDALE	State	Zip	Code (Plus 4)	2	2	2024	1		
	PA	184	131						
Employer Name MEAGHER INSURANC				Occupat	ion	INSURA	NCE AGEI	NT/OWNER	
Employer Mailing Address/Principal Place			City	State Zip Code (Plus 4)			-		
416 MAIN STREET			HONESDALE		PA		18431	-	
TTO PINTIN STINELI		L	HONLODALL		1''^		10401		

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

PAGE TOTAL

58,000.00

\$

## 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			Reporting Period						
			From:			To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.00	
Mailing Address							7		
City	State	Zip Code (Plu	ıs 4)						
Receipt Description		<b>.</b>			•	•			
Futor Crowd Total of Book	F an Cabadula I Batailad	Summer Base Se		4				PAGE TOTAL	
Enter Grand Total of Part	E on Schedule I, Detailed	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 Period	I							
FRIENDS OF JEFF OLSOMMER	From:	3/5/2024 <b>To:</b>	<u>4/8/2024</u>						
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 PART 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)	\$	31,905.90						
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,		\$	31,905.90						

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidate Ro				Reporting Period					
	From:			То:					
	DATE AMOUN								
Full Name of Contributor	МО	DAY	YEAR						
Mailing Address						<b>7</b> \$		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:	-	<b>-</b>	•	•	•				
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Deta				d Summary Page, PAGE TOTAL				L	
Section 2.						\$		0.00	

# IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

				П						
Name of Filing Committee or Candidate				Rep	ortir	ng Po	eriod			
FRIENDS OF JEFF OLSOMMER				Fro	From: <u>3/5/202</u>			24 <b>To</b> : 4/8/2024		
							DATE			AMOUNT
Full Name of Contributor					мо		DAY	YEAR		
EDWARD NIKLES, SR.							27		\$	1,000.00
Mailing Address 104 BENNETT AVE						3	15	2024	Ψ	1,000.00
City MILFORD	State		Zip Code(Plus 4)							
	PA		18337							
Employer of Contributor RETIRED					Осс	upat	tion RE	TIRED		
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	State	e 2	Zip (	Code(Plus 4)	Descrip	otion of	Contribution
								ADVER	TISING	
Full Name of Contributor WILLIAM ROSADO					МО		DAY	YEAR		
Mailing Address 319 GLENMAURA DR	IVE				3		15	2024	\$	2,000.00
City MOOSIC	State		Zip Code(Plus 4)							
	PA		18507							
Employer of Contributor ROSADO G	L ROUP				Occ	upat	tion BI	JSINESSI	MAN	
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	State		Zip (	Code(Plus 4)	1		Contribution
Employer Mailing Address/Principal Place ROUTES 6 & Description (209)	e of Business		E <b>y</b> LFORD	<b>State</b> PA	e 2	<b>Zip (</b>	Code(Plus 4)	Descrip		Contribution
	e of Business		-		e 2	183	Code(Plus 4)	Descrip	otion of (	
ROUTES 6 & Damp; 209	e of Business		-		e 2	183	Code(Plus 4)	<b>Descrip</b> ADVER	otion of	1,600.00
ROUTES 6 & Description	e of Business		-		e 2	183	Code(Plus 4) 37 DAY	Descrip ADVER	otion of (	
Full Name of Contributor PETE HELMS  Mailing Address 2483 ROUTE 6			LFORD		e 2	183	Code(Plus 4) 37 DAY	Descrip ADVER	otion of (	
ROUTES 6 & Description ROUTES 6 & Description ROUTES 6 & Description ROUTE 6 R	State	МІ	Zip Code(Plus 4)		MO	183	DAY  15	Descrip ADVER	otion of (	
ROUTES 6 & Description ROUTES 6 & Description ROUTES 6 & Description ROUTE 6 R	State PA HANT REALTORS	МІ	Zip Code(Plus 4)		МО	183: 3	DAY  15	Descrip ADVER YEAR 2024	tion of C	
Full Name of Contributor PETE HELMS  Mailing Address 2483 ROUTE 6  City HAWLEY  Employer of Contributor DAVIS R CH	State PA HANT REALTORS	MI	Zip Code(Plus 4)	PA	MO Occi	183: 3	DAY  15  tion RE Code(Plus 4)	Descrip ADVER  YEAR  2024  EALTOR  Descrip	tion of C	1,600.00
Full Name of Contributor PETE HELMS  Mailing Address 2483 ROUTE 6  City HAWLEY  Employer of Contributor DAVIS R CH	State PA HANT REALTORS	MI	Zip Code(Plus 4) 18428	PA	MO Occi	3 3 Zip (	DAY  15  tion RE Code(Plus 4)	Descrip ADVER  YEAR  2024  EALTOR  Descrip	\$ ption of (	1,600.00  Contribution
Full Name of Contributor PETE HELMS  Mailing Address 2483 ROUTE 6  City HAWLEY  Employer of Contributor DAVIS R CHEMPLOYEE Mailing Address/Principal Place 2483 ROUTE 6  Full Name of Contributor	State PA HANT REALTORS Se of Business	MI	Zip Code(Plus 4) 18428	PA	MO Occor	3 3 Zip (	DAY  DAY  15  tion RE Code(Plus 4) 28	PEALTOR  ADVER  ADVER  ADVER	\$ ption of (	1,600.00
Full Name of Contributor PETE HELMS  Mailing Address 2483 ROUTE 6  City HAWLEY  Employer of Contributor DAVIS R CH Employer Mailing Address/Principal Place 2483 ROUTE 6  Full Name of Contributor JOHN KIESENDAHL	State PA HANT REALTORS Se of Business	MI	Zip Code(Plus 4) 18428	State PA	MO Occor	3 3 Zip (	DAY  DAY  15  tion RE Code(Plus 4) 28	YEAR  2024  EALTOR Descrip ADVER	\$ ption of (	1,600.00  Contribution
Full Name of Contributor PETE HELMS  Mailing Address 2483 ROUTE 6  City HAWLEY  Employer of Contributor DAVIS R CH Employer Mailing Address/Principal Place 2483 ROUTE 6  Full Name of Contributor JOHN KIESENDAHL  Mailing Address 731 WELCOME LAKE	State PA HANT REALTORS Se of Business	MI	Zip Code(Plus 4) 18428 Ey AWLER	State PA	MO Occor	3 3 Zip (	DAY  DAY  15  tion RE Code(Plus 4) 28	YEAR  2024  EALTOR Descrip ADVER	\$ ption of (	1,600.00  Contribution
Full Name of Contributor PETE HELMS  Mailing Address 2483 ROUTE 6  City HAWLEY  Employer of Contributor DAVIS R CH Employer Mailing Address/Principal Place 2483 ROUTE 6  Full Name of Contributor JOHN KIESENDAHL  Mailing Address 731 WELCOME LAKE	State PA HANT REALTORS Se of Business ROAD State PA	MI	Zip Code(Plus 4) 18428 Ey AWLER Zip Code(Plus 4)	State PA	MO Occident	3 3 Zip (	DAY  15  tion RE Code(Plus 4) 28  DAY  15	YEAR  2024  EALTOR Descrip ADVER	s TISING \$ ption of 0	1,600.00  Contribution
Full Name of Contributor PETE HELMS  Mailing Address 2483 ROUTE 6  City HAWLEY  Employer of Contributor DAVIS R CHEMPLOY Employer Mailing Address/Principal Place 2483 ROUTE 6  Full Name of Contributor JOHN KIESENDAHL  Mailing Address 731 WELCOME LAKE  City HAWLEY	State PA HANT REALTORS ROAD State PA	MI	Zip Code(Plus 4) 18428  Zip Code(Plus 4) 18428	State PA	MO Occo	3 3 Cupat	DAY  15  tion RE Code(Plus 4) 28  DAY  15	PEAR  ADVER  YEAR  2024  EALTOR  Descrip  ADVER  YEAR  2024	s  ption of the state of the st	1,600.00  Contribution

Full Name of Contributor				П				]	
Full Name of Contributor					МО	DAY	YEAR		
DEBRA K. GUNNIP								\$ 400.00	
Mailing Address 105 DEER ROA	D				3	15	2024	400.00	
City GREENTOWN	State	z	ip Code(Plus 4)						
	PA	1	.8426						
Employer of Contributor DAVIS	R CHANT REALTORS	5			Occup	ation R	ALTOR		
Employer Mailing Address/Principa	I Place of Business	City		State	Zip	Code(Plus 4)	Descri	ption of Contribution	
2483 ROUTE 6		HAW	VLEY	PA	18	428	ADVERTISING		
Full Name of Contributor		-	-		МО	DAY	YEAR		
REPUBLICAN PARTY OF PENNSYLV	/ANIA								
Mailing Address 3501 N. FRONT	STREET SUITE 200				4	8	2024	<b>\$</b> 25,905.90	
City HARRISBURG	State	z	ip Code(Plus 4)						
	PA	1	7110						
Employer of Contributor N/A	•				Occup	ation N	′A		
Employer Mailing Address/Principa	I Place of Business	City		State	Zip	Code(Plus 4)	Description of Contribution		
N/A							CAMPAIGN LITERATURE & POSTAGE		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed								PAGE TOTAL	
Summary Page, Section 3.						31,905.90			

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period					
FRIENDS OF JEFF OLSOMMER	From	3/5/2024	То:	<u>4/8/2024</u>		

							AMOUNT			
To Whom Paid			МО	DAY	YEAR					
PIKE COUNTY COUNCIL REPUB	LICAN WOMEN									
Mailing Address PO BOX 98	3	20	2024	\$	100.00					
City MILFORD	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	PA	18337	ADVER	ADVERTISING						
To Whom Paid			МО	DAY	VEAD					
PIKE COUNTY COUNCIL REPUB	LICAN WOMEN		МО	DAT	YEAR					
Mailing Address PO BOX 98			3	22	2024	\$	160.00			
City MILFORD	Descrip	tion of Exp	enditure							
	PA	18337	TICKETS							
To Whom Paid			МО	DAY	YEAR					
BAILEY DESIGN & amp; ADVER	TISING		МО	DAT	TEAR					
Mailing Address 3305 LAKE	ARIEL HWY SUITE 3		4	6	2024	\$	4,050.00			
City HONESDALE State Zip Code (Plus 4)				tion of Exp	enditure					
	PA	18431	ADVERTISING							
To Whom Paid	•	<u> </u>		l						
ENCORE OUTDOOR, LLC			МО	DAY	YEAR					
Mailing Address 24 PINEWO	OD DRIVE		2	21	2024	\$	2,286.25			
City COVINGTON TWP	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	PA	18424	ADVER <sup>-</sup>	ΓISING						
To Whom Paid	·	·		L						
ENCORE OUTDOOR, LLC			МО	DAY	YEAR					
Mailing Address 24 PINEWO	OD DRIVE		2	29	2024	\$	298.00			
City COVINGTON TWP	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure					
	PA	18424	ADVER <sup>-</sup>	ΓISING						
To Whom Paid		·		<u></u>						
ENCORE OUTDOOR, LLC			МО	DAY	YEAR					
Mailing Address 24 PINEWO	OD DRIVE		3	4	2024	\$	1,690.00			
City COVINGTON TWP	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure					
, 3312313	PA	18424	ADVER							
		1	1							

								AGE 13			
To Whom Paid				мо	DAY	YEAR					
GREENE DREHEI  Mailing Address	DREHER VOLUNTEER FIRE ASSOC.				6	2024	\$	225.00			
_											
City NEW FOU	City NEW FOUNDLAND State Zip Code (Plus 4)				Description of Expenditure						
		PA	18445	MEETIN	G EXPENS	<u> </u>					
To Whom Paid HORTON PLACE				мо	DAY	YEAR					
Mailing Address	324 SPRING HILL R	OAD		3	11	2024	\$	900.00			
City MOSCOV		State	Zip Code (Plus 4)	Descript	ion of Exp						
1,103001	v	PA	18444	SIGN FF		ciiaitai c					
To Whom Paid											
HRCC				МО	DAY	YEAR					
Mailing Address	500 N. 3RD STREET	4TH FLOOR		3	11	2024	\$	12,000.00			
City HARRISE	BURG	State	Zip Code (Plus 4)	Descript	ion of Exp	enditure					
		PA	17101	DONATION							
To Whom Paid				МО	DAY	YEAR					
HRCC											
Mailing Address	500 N. 3RD STREET	4TH FLOOR		3	21	2024	\$	12,000.00			
City HARRISE	BURG	State	Zip Code (Plus 4)	Description of Expenditure							
		PA	17101	DONATI	ON						
To Whom Paid				мо	DAY	YEAR					
HRCC				_			<b>.</b>	12 000 00			
Mailing Address	500 N. 3RD STREET	4TH FLOOR	<b>I</b>	4	4	2024	\$	12,000.00			
City HARRISE	BURG	State	Zip Code (Plus 4)	Description of Expenditure							
		PA	17101	DONATI	ON						
To Whom Paid				мо	DAY	YEAR					
PIKE T-SHIRT, L				_			<b>.</b>	2 710 20			
Mailing Address	111 HULST DRIVE S	FUITE 706		2	29	2024	\$	3,719.30			
City MATAMO	RAS	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure					
		PA	18336	SIGNS							
To Whom Paid RGB POLITICS				мо	DAY	YEAR					
Mailing Address	3031 LOGAN STREE	 Т		2	25	2024	\$	3,359.14			
City CAMP HI	LL	State	Zip Code (Plus 4)	Descript	ion of Exp	enditure					
PA 17011				ADVERT							
To Whom Paid				MO	DAY	VEAD					
RGB POLITICS				МО	DAY	YEAR					
Mailing Address	3031 LOGAN STREE	Т		3	11	2024	\$	7,750.00			
City CAMP HI	LL	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure					
		PA	17011	ADVERT	ISING						

								_ 10			
To Whom Paid				мо	DAY	YEAR					
RGB POLITICS						1 = Aux					
Mailing Addres	3031 LOGAN STREE	3031 LOGAN STREET					\$	286.20			
City CAMP HILL State Zip Code (Plus 4)					Description of Expenditure						
		PA	17011	ADVERT	ISING						
To Whom Paid				мо	DAY	YEAR					
STEVE'S SIGN	I WORKS			140		TEAK					
Mailing Addres	ss P.O. BOX 454			2	29	2024	\$	2,067.00			
City HAMLIN State Zip Code (Plus 4)					tion of Exp	enditure					
		PA	18427	SIGNS							
To Whom Paid				мо	DAY	YEAR					
Mailing Addres	ss 411 BROAD STREET			4	5	2024	\$	1,750.00			
City MILFO	RD	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure					
		PA	18337	MEETIN	G EXPENS	E					
To Whom Paid	I I WORKS, INC.			мо	DAY	YEAR					
Mailing Addres	ss PO BOX 454			4	8	2024	\$	297.86			
City HAMLIN State Zip Code (Plus 4)					l tion of Exp	enditure					
		PA	18427	SIGNS							
To Whom Paid					DAY	VEAD					
JEFFREY OLSO	OMMER			МО	DAY	YEAR					
Mailing Addres	ss P.O. BOX 893			4	8	2024	\$	706.05			
City HAMLI	:N	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		PA	18427	REIMBURSE-DINNER TICKETS BASKET ITEMS- SUPPLIES							
To Whom Paid				мо	DAY	YEAR					
DEBRA K GUN											
Mailing Addres	ss 105 DEER ROAD			4	8	2024	\$	162.60			
City GREEN	NTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		PA	18426	POSTAG	iE						
To Whom Paid ANEDOT				мо	DAY	YEAR					
Mailing Addres	ss 1340 POYDRAS STR	EET SUITE 1770		3	31	2024	\$	22.80			
City NEW (	DRLEANS	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure	<u> </u>				
LA 70112				PROCES	SING FEE	S					
To Whom Paid				МО	DAY	YEAR					
HONESDALE NATIONAL BANK				1-10		ILAK					
Mailing Addres	ss PO BOX 350			2	6	2024	\$	8.00			
City HONES	SDALE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		PA	18431	BANK S	ERVICE CH	IARGE					
	·										

To Whom Paid				DAY	YEAR				
COMMONWEALTH OF PENNSYLVANIA			МО						
Mailing Address 500 NORTH OFFICE BUILDING				6	2024	\$	100.00		
City HARRISBURG State Zip Code (Plus 4)				Description of Expenditure					
	PA	17120	FILING FEE						
To Whom Paid			МО	DAY	YEAR				
DELUXE CHECKS			1-10		12/11				
Mailing Address 801 S. MARQUETT	E AVE		2	2	2024	\$	431.39		
City MINNEAPOLIS	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure				
MN 55402 CHECKS/DEPOSIT SLIPS									
							PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	66,369.59			

## STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate Reporting				ng Period						
FRIENDS OF JEFF	OLSOMMER			From:		<u>3/5/2024</u>	To:		4/8/2024	
						DATE			Outstanding Balance of Debt	
Name of Creditor					мо	DAY	YEAR			
JEFFREY OISOMM	ER				MO	DAI	ILAK			
Mailing Address	PO BOX 893				3	21	2024	<u>ا</u> ا	5,000.00	
City HAMLIN		State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
		PA	18427		LOAN TO COMMITTEE					
Name of Creditor										
JEFFREY OISOMM	ER				МО	DAY	YEAR			
Mailing Address	PO BOX 893				4	5	2024	1 5	21,000.00	
City HAMLIN		State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
		PA	18427		LOAN T	О СОММІТ	TEE			
Name of Creditor							\			
JEFFREY OISOMM	ER				МО	DAY	YEAR			
Mailing Address	PO BOX 893				2	1	2024	1 '	500.00	
City HAMLIN		State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
		PA	18427		LOAN TO COMMITTEE					
Name of Creditor										
JEFFREY OISOMM	ER				МО	DAY	YEAR			
Mailing Address	PO BOX 893				2	7	2024	<u> </u>	25,000.00	
City HAMLIN		State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
		PA	18427		LOAN T	О СОММІТ	TEE			
									PAGE TOTAL	
Enter Grand 1	Total of Unpaid Debt	s on Page 1, Repo	rt Cover Pa	ge, Item	G.			\$	51,500.00	