

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 :		20240048		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: COMMITTEE TO ELECT STEPH WAGGETT FOR STATE REP												
Street Address: 330 BROADWAY AVE.												
City: BROWNSVILLE						State: PA			Zip Code: 15417			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	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				
Summary of Receipts and Expenditures from:						MO	DAY	YEAR	FOR OFFICE USE ONLY			
						3	5	2024				TO
						4	8	2024				
A. Amount Brought Forward From Last Report						\$ 2,415.00						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 25,850.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 28,265.00						
D. Total Expenditures (From Schedule III)						\$ 21,422.00						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 6,843.00						
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
COMMITTEE TO ELECT STEPH WAGGETT FOR STATE REP	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)	\$ 1,450.00
TOTAL for the Reporting Period (2)	\$ 1,450.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 15,500.00
All Other Contributions (Part D)	\$ 8,900.00
TOTAL for the Reporting Period (3)	\$ 24,400.00

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.)	\$ 25,850.00
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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)				

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)**

Name of Filing Committee or Candidate COMMITTEE TO ELECT STEPH WAGGETT FOR STATE REP				Reporting Period From: <u>3/5/2024</u> To: <u>4/8/2024</u>			
				DATE		AMOUNT	
Full Name of Contributor THOMAS QUIGLEY				MO	DAY	YEAR	\$ 100.00
Mailing Address 560 PINE ST				3	8	2024	
City ROYERSFORD	State PA	Zip Code (Plus 4) 19468					
Full Name of Contributor BARBARA KELLY				MO	DAY	YEAR	\$ 100.00
Mailing Address 203 SOLOMON AVE.				3	9	2024	
City CARMICHAELS	State PA	Zip Code (Plus 4) 15320					
Full Name of Contributor NICK HADEN				MO	DAY	YEAR	\$ 100.00
Mailing Address 2301 VENTANA DR.				3	7	2024	
City CORAOPOLIS	State PA	Zip Code (Plus 4) 15108					
Full Name of Contributor AL BOVE				MO	DAY	YEAR	\$ 100.00
Mailing Address 218 FARMINGTON DR.				3	14	2024	
City VENETIA	State PA	Zip Code (Plus 4) 15367					
Full Name of Contributor SAM BOYD				MO	DAY	YEAR	\$ 100.00
Mailing Address 440 ROLLING MEADOWS RD.				3	22	2024	
City WAYNESBURG	State PA	Zip Code (Plus 4) 15370					
Full Name of Contributor ANDREW D. SHOTTER JR.				MO	DAY	YEAR	\$ 200.00
Mailing Address 617 W. GREENE ST.				3	22	2024	
City CARMICHAELS	State PA	Zip Code (Plus 4) 15320					

Full Name of Contributor ANDREW D. SHOTTER JR.			MO	DAY	YEAR	\$ 100.00
Mailing Address 617 W. GREENE ST.			3	27	2024	
City CARMICHAELS	State PA	Zip Code (Plus 4) 15320				
Full Name of Contributor CHARLES VOLPE			MO	DAY	YEAR	\$ 250.00
Mailing Address 336 OAKFORD RD			3	27	2024	
City CLARKS SUMMIT	State PA	Zip Code (Plus 4) 18411				
Full Name of Contributor DIANE SHOTTER			MO	DAY	YEAR	\$ 100.00
Mailing Address 617 W. GREENE ST.			3	27	2024	
City CARMICHAELS	State PA	Zip Code (Plus 4) 15320				
Full Name of Contributor DAVID LAMATRICE			MO	DAY	YEAR	\$ 100.00
Mailing Address 2019 ELMBROOK LANE			3	28	2024	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15243				
Full Name of Contributor TED HARHAI			MO	DAY	YEAR	\$ 100.00
Mailing Address 344 HELEN AVE			3	25	2024	
City MONESSEN	State PA	Zip Code (Plus 4) 15062				
Full Name of Contributor JEANNE SONGER			MO	DAY	YEAR	\$ 100.00
Mailing Address 440 ROLLING MEADOWS RD.			3	22	2024	
City WAYNESBURG	State PA	Zip Code (Plus 4) 15370				

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

PAGE TOTAL

\$ 1,450.00

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 COMMITTEE TO ELECT STEPH WAGGETT FOR STATE REP	Reporting Period From: <u>3/5/2024</u> To: <u>4/8/2024</u>
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DATE				AMOUNT			
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 10,000.00
FRIENDS OF CAMERA BARTOLOTTA				3	5	2024	
Mailing Address PO BOX 25							
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17108	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
REDWING PAC				3	22	2024	
Mailing Address 221 BROOKSIDE BLVD							
City	PITTSBURGH	State	PA	Zip Code (Plus 4)		15421	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 5,000.00
MID-ATLANTIC LABORERS POLITICAL LEAGUE				4	2	2024	
Mailing Address 1875 EXPOLORE ST. SUITE 900							
City	RESTON	State	VA	Zip Code (Plus 4)		20190	

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

PAGE TOTAL
\$ 15,500.00

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
COMMITTEE TO ELECT STEPH WAGGETT FOR STATE REP	From: <u>3/5/2024</u> To: <u>4/8/2024</u>

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 5,000.00
DAVID WHITE				3	7	2024	
Mailing Address 2747 SPRINGDALE RD.							
City SECANE	State PA	Zip Code (Plus 4) 19018					
Employer Name DWD MECHANICAL				Occupation OWNER			
Employer Mailing Address/Principal Place of Business		City		State		Zip Code (Plus 4)	
1005 KEDRON AVE.		MORTON		PA		19070	
Full Name of Contributor				MO	DAY	YEAR	\$ 1,500.00
RAY BOLOGNA				3	11	2024	
Mailing Address PO BOX 984							
City CORAOPOLIS	State PA	Zip Code (Plus 4) 15108					
Employer Name RETIRED				Occupation RETIRED			
Employer Mailing Address/Principal Place of Business		City		State		Zip Code (Plus 4)	
Full Name of Contributor				MO	DAY	YEAR	\$ 500.00
CHARLES BAILY				3	13	2024	
Mailing Address 100 COUNTRY LANE							
City WAYNESBURG	State PA	Zip Code (Plus 4) 15370					
Employer Name RETIRED				Occupation RETIRED			
Employer Mailing Address/Principal Place of Business		City		State		Zip Code (Plus 4)	
Full Name of Contributor				MO	DAY	YEAR	\$ 500.00
MARK FOX				3	18	2024	
Mailing Address 332 ELM DR.							
City WAYNESBURG	State PA	Zip Code (Plus 4) 15370					
Employer Name FOX FORD				Occupation OWNER			
Employer Mailing Address/Principal Place of Business		City		State		Zip Code (Plus 4)	
743 EAST HIGH ST.		WAYNESBURG		PA		15470	

Full Name of Contributor JOHN BOKAT			MO 4	DAY 2	YEAR 2024	\$ 500.00
Mailing Address 187 AIR SHAFT RD						
City RICES LANDING	State PA	Zip Code (Plus 4) 15357				
Employer Name COMPLIANCE SERVICES			Occupation OWNER			
Employer Mailing Address/Principal Place of Business 106 C N. MARKET ST.		City CARMICHAELS	State PA	Zip Code (Plus 4) 15320		

Full Name of Contributor CLINTON BLANEY			MO 3	DAY 22	YEAR 2024	\$ 900.00
Mailing Address 373 KENNEL RD.						
City WAYNESBURG	State PA	Zip Code (Plus 4) 15370				
Employer Name RETIRED			Occupation RETIRED			
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
\$ 8,900.00

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:
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			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	
COMMITTEE TO ELECT STEPH WAGGETT FOR STATE REP		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:
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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.						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
COMMITTEE TO ELECT STEPH WAGGETT FOR STATE REP	From <u>3/5/2024</u> To: <u>4/8/2024</u>

				DATE	AMOUNT		
To Whom Paid USPS				MO	DAY	YEAR	\$ 9.85
Mailing Address 111 N. MARKET ST.				3	11	2024	
City CARMICHAELS	State PA	Zip Code (Plus 4) 15320	Description of Expenditure POSTAGE				
To Whom Paid EAGLE CONSULTING GROUP				MO	DAY	YEAR	\$ 12,290.00
Mailing Address 107 N 45TH ST.				3	21	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 171112631	Description of Expenditure MAILERS				
To Whom Paid EAGLE CONSULTING GROUP				MO	DAY	YEAR	\$ 1,500.00
Mailing Address 107 N 45TH ST				3	8	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 171112631	Description of Expenditure CONSULTING SERVICES				
To Whom Paid EAGLE CONSULTING GROUP				MO	DAY	YEAR	\$ 3,500.00
Mailing Address 107 N 45TH ST				3	28	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 171112631	Description of Expenditure DIGITAL ADS				
To Whom Paid BEE GRAPHICS				MO	DAY	YEAR	\$ 1,009.90
Mailing Address 504 FRONT ST.				3	14	2024	
City FREDERICKTOWN	State PA	Zip Code (Plus 4) 15333	Description of Expenditure SIGNS				
To Whom Paid ANEDOT				MO	DAY	YEAR	\$ 112.70
Mailing Address 1340 POYDRAS ST.				3	22	2024	
City NEW ORLEANS	State LA	Zip Code (Plus 4) 70112	Description of Expenditure DONATION PROCESSING SERVICES				

To Whom Paid BARRY KOVATCH PRINTING			MO	DAY	YEAR	\$ 600.00
Mailing Address 849 HENDERSON AVE.			3	22	2024	
City WASHINGTON	State PA	Zip Code (Plus 4) 15301	Description of Expenditure SIGNS			

To Whom Paid KAG SINGWORKS			MO	DAY	YEAR	\$ 2,400.00
Mailing Address 444 ST. CLAIR AVE.			3	28	2024	
City CLAIRTON	State PA	Zip Code (Plus 4) 15025	Description of Expenditure SIGNS			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 21,422.45

