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 2003 | 194 | | | Rep File | | | CAND | DATE | | соми | ITTEE | ✓ | LOBI | BYIST | | |
|--|---------------------------------------|------------|-------------------------|------|-------------|-------|----------------|--------------------|--------------------------------|---------------------------------------|------------|--------------------|----------------|----------|-----------|----------|-----|
| Name of Filing C | Committee, Candid | ate or L | obbyist: | Ī | PA D | EEF | R FAR | MERS AS | SSOCIA | ATION | PAC (| PDFA PA | AC) | | | | _ |
| Street Address: | Street Address: 200 N 3RD ST STE 1500 | | | | | | | | | | | | | | | | |
| City: | HARRISBURG | | | | | | | State: | PA Zip Code: 17101-1585 | | | | | 585 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY P PRIMARY | RE- | 2 | | 30 DA PRIMA | | POST- | OST- 3. X AMENDMENT YE REPORT? | | | | | No | • | / |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY ELECTION | PRE- | - 5 | i. | 30 DA ELECT | | POST- | 6. | | TERMINA REPORT | | Yes | No | • | 1 |
| report type) | ANNUAL REPORT | 7. | Year 2024 | | | | | IG METH CHECK O | | | | PAPER | | / | DISKE | TTE | |
| Name of Office S | Sought by Candida | te: | - | | | | | DATE C | F ELE | CTIO | N | District Number | Office Code | Par | ty Code | Count | ty |
| | , | | | | | | | МО | DAY | YE | AR | Number | code | <u> </u> | | code | |
| | | | | | | | | 11 | | 5 | 2024 | | (SEE IN | ISTRUCTI | ONS FOR C | ODES) | |
| • | Receipts and | МО | DAY YE | AR | | | ' | МО | DAY | YE | AR | FC | R OFFI | CE USE | ONLY | | |
| Expenditures | s trom: | | 4 9 | 20 |)24 | T | 0 | 5 | 5 | 13 | 2024 | | | | | | |
| A. Amount Bro | ught Forward Froi | n Last R | eport | | | | \$ | | | 9,1 | .98.61 | | | | | | |
| B. Total Monet | ary Contributions | And Rec | eipts (From Sc | hec | lule I | I) | \$ | | | | 0.00 | | | | | | |
| C. Total Funds | Available (Sum O | f Lines A | and B) | | | | \$ | | | 9,1 | .98.61 | | | | | | |
| D. Total Expen | ditures (From Sch | edule II | I) | | | | \$ | | | | 0.00 | | | | | | |
| E. Ending Cash | Balance (Subtrac | t Line D | From Line C) | | | | \$ | | | 9,1 | 98.61 | | | | | | |
| F. Value Of In- | Kind Contribution | s Receiv | ed (From Sche | dul | e II) |) | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | ts And Obligations | (From S | Schedule IV) | | | | \$ | | | | 0.00 | | | • | | | |
| | | | А | FF) | [DA] | VI | ΓSE | CTION | | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, trea | surer sign her | e. I | f this | s is | a Can | didate r | eport, o | candio | date sig | jn here. | | | | | |
| I swear (or affirm) correct and comple |) that this report, inc ete. | luding the | attached sched | ules | filed | on į | paper (| or by elect | tronic m | edium | , are to t | the best o | f my kno | wledge | and belie | ef , tru | ie, |
| Sworn to and subs | cribed before me this day of | 5 | 20 | | | | | | | s | ignature | of Perso | n Submit | ting Rep | ort | | - |
| | Signatu | re | | | | | - | | | | | Prin | ted Nam | e | | | - |
| My Commission Ex | cpires | | | | | | | | | | | Ema | il | | | | - |
| | мо | D | AY | YR | | | | | Are | ea Cod | e | Daytim | e Telepi | hone Nu | mber | | |
| Part II- If this is | a report of a can | didate's | authorized Co | mm | ittee | e, Ca | andida | ate shall | sign h | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of red. | ny knowle | edge and belief t | his | politio | cal | commi | ittee has r | not viola | ted an | y provis | ions of th | e act of J | lune 3,1 | 937 (P.L | . 1333 | , |
| Sworn to and subsc | ribed before me this | | | | | | | | | | s | ignature (| of Candid | late | | | - |
| | day of | | | | | | - | | | | | Drinte | d Name | | | | - |
| | Signature | | | | | | - | | | | | | .a .101116 | | | | _ |
| My Commission Exp | _ | | | | | | | | | | | Ema | il | | | | |
| | мо | D | AY | ΥR | | | • | | Area | Code | | D | aytime 1 | elephor | e Numb | er | ۱ ا |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate Reporting Period | | | | | | |
|--|----------|----------------|--------------|-----------|--|--|
| PA DEER FARMERS ASSOCIATION PAC (PDFA PAC) | From: | <u>4/9/202</u> | <u>4</u> To: | 5/13/2024 | | |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | | | |
| TOTAL for the Reporting | g 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) | \$ | 0.00 | | | | |
| TOTAL for the Reporting | (2) | \$ | 0.00 | | | |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 0.00 | | |
| All Other Contributions (Part D) | | | \$ | 0.00 | | |
| TOTAL for the Reporting | g Period | (3) | \$ | 0.00 | | |
| 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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa | | | \$ | 0.00 | | |

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 | | | | | |
|---------------------------------------|-------|-------------------|------------------|------|------|----|--------|--|
| | | Fi | rom: | | То | : | | |
| | | · | | DATE | | | AMOUNT | |
| Full Name of Contributing Committee | | | МО | DAY | YEAR | | | |
| Mailing Address | | | | | | \$ | 0.00 | |
| City | State | Zip Code (Plus 4) | | | | | | |

PAGE TOTAL
0.00

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 | | | | | | | | | |
|--|-------|------------------|----------|----|------|------|----|--------|--|
| | | | From: To | | |): | | | |
| | | | | | DATE | | | AMOUNT | |
| Full Name of Contributor | | | | МО | DAY | YEAR | | | |
| 1 | | | | | | | ı | | |
| Mailing Address | | | | | | | \$ | 0.00 | |
| Mailing Address City | State | Zip Code (Plus 4 |) | | | | \$ | 0.00 | |

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.

| Name of Filing Committee or Candidate | | | Reporting | | | | | |
|---------------------------------------|----------------------|----------|-------------|------|-----|------|---------------|------------|
| | | | From: | | | То: | | |
| | | | | DA | TE | | P | AMOUNT |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | 0.0 |
| Mailing Address | | | | | | | - \$ | 0.0 |
| City | State | Zip Cod | e (Plus 4) | | | | | |
| | | | | | | | | PAGE TOTAL |
| Enter Grand Total of Part C on Scheo | dule I, Detailed Sun | nmary Pa | age, Sectio | n 3. | | | \$ | 0.00 |

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 | | | | orting Pe | riod | | | | |
|--|---------------------|--------------|----------|------------|----------|------|---------|-------------|--|
| Fr | | | | | rom: To: | | | | |
| DATE | | | | | | | AMOUNT | | |
| Full Name of Contributor | | | | МО | DAY | YEAR | \$ | 0.00 | |
| Mailing Address | | | | | | | 7 | | |
| City | State | Zip Code (Pl | ıs 4) | | | | | | |
| Employer Name | | • | | Occupation | | | | | |
| Employer Mailing Address/Principal Pla | ice of Business | City | | • | State | | Zip Cod | le (Plus 4) | |
| Enter Grand Total of Part C on Sch | edule I, Detailed S | ummary Pag | e, Secti | on 3. | | | P. | O.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 | | | | | | | \neg | | |
| City | State | Zip Code (I | Plus 4) | | | | | | |
| Receipt Description | • | • | | | 1 | • | • | | |
| Futor Coand Total of Bank | Cabadula I Detailed | Commence De | Caatle | | | | | PAGE TOTAL | |
| Enter Grand Total of Part I | e on Schedule I, Detailed | Summary Page, | Section | 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 | | | | | | | | |
|--|------------------|----------------------------|------------------|--|--|--|--|--|--|
| PA DEER FARMERS ASSOCIATION PAC (PDFA PAC) | From: | <u>4/9/2024</u> To: | <u>5/13/2024</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 PAR | T 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) | \$ | 0.00 | | | | | | |
| 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, | | \$ | 0.00 | | | | | | |

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Car | Reporting Period | | | | | | | |
|---------------------------------|----------------------|------------------------|---------|---------|-----|-------------|------------|------|
| | From: | | : | | | | | |
| | | | | DATE | | | AMOUNT | |
| Full Name of Contributor | МО | DAY | YEAR | | | | | |
| Mailing Address | | | | | | 7 \$ | C | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | | |
| Description of Contribution: | • | | • | • | | • | | |
| | | | | | - | | | |
| Enter Grand Total of Part F o | n Schedule II, In-Ki | nd Contributions Detai | led Sum | mary Pa | ge, | | PAGE TOTAL | |
| Section 2. | | | | | | \$ | 0 | .00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | | | Re | porting | Period | | | | |
|---|------------------|------|------------------|---------|-------------------|----------------|--------|-------|-------------------|
| | From: | | | | | To: | | | |
| DATE | | | | | | | AMOUNT | | |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 0.00 |
| City | State | | Zip Code(Plus 4) | | | | | | |
| Employer of Contributor | • | | | | Occupation | | | | |
| Employer Mailing Address/Principal Plac | ce of Business | Cit | ty | Stat | e Zi _l | p Code(Plus 4) | Descri | iptio | n of Contribution |
| Enter Grand Total of Part G on Sch | edule II, In-Kir | nd (| Contributions D | etaile | ed | | | | PAGE TOTAL |
| Summary Page, Section 3. | , | | | | | | | | 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | | | | Reporting Period | | | | | |
|---------------------------------------|---------------------|-------------------|------------|------------------|----------|----|------------|--|--|
| | From | | | То: | | | | | |
| DATE | | | | | | | AMOUNT | | |
| To Whom Paid | | | | DAY | YEAR | | | | |
| Mailing Address | | | | | | \$ | 0.00 | | |
| City | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| Enter Grand Total of Expenditures of | on Bago 1 Bonort C | Cover Page Item [| | | | | PAGE TOTAL | | |
| Lines Grand Total of Expenditures C | ni rage 1, keport C | over rage, Item L | , . | | | \$ | 0.00 | | |