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 2017	70358			Rep File			CAI	NDI	DATE		COM	AITTEE	Y	LUB	Б113	•	
Name of Filing C	Committee, Candid	date or L	obbyist:		СОМ	MOI	NWE	ALTH	LEA	DERS	FUNE							
Street Address:																		
City:	HARRISBURG	i						State	e:	PA			Zip Co	de: 17	7101			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2		30 DA PRIMA		Р	POST- 3. X		AMENDMENT REPORT?		Yes] [No	\	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5		30 DA ELECT		Р	POST-	6.		TERMINA REPORT		Yes		No	\
report type)	ANNUAL REPORT	7.	Year 2024					ILING METHOD () CHECK ONE					PAPER		\	DIS	KETTE	
Name of Office S	- Sought by Candida	ite:						DAT	ΕO	F ELE	CTIO	N	District Number	Office Code	Pa	rty Co	de Co	
								МО		DAY	YE	AR		•	•			
									11		5	2024		(SEE IN	STRUCT	ONS F	OR CODE	S)
	Receipts and	МО	DAY	YEAR	l l			МО		DAY	YI	EAR	FC	R OFFI	CE USE	ONL	Y	
Expenditures	from:		4 9	2	024	T	0		5		L3	2024						
A. Amount Brought Forward From Last Report						\$	•			5,4	110.17							
B. Total Monetary Contributions And Receipts (From Schedule I)					I)	\$			3,	217,0)49.69							
C. Total Funds Available (Sum Of Lines A and B)					\$			3,2	222,4	159.86								
D. Total Expen	ditures (From Sch	edule II	I)				\$			3,2	216,0	51.25						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$				6,4	08.61						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II))	\$					0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule I\	/)			\$					0.00			'			
								CTIC										
	s a Committee report, income	-	_									_		f my knov	wledge	and b	elief ,	true
•	ece. scribed before me thi	is										ianatura	of Perso	n Submit	tina Do	nort		
	day of		_ 20									ngnature	or reiso	II Subiliit	tilly Ke	port		
	Signati	ıre					-						Prin	ted Name	•			
My Commission Ex	· —						-		•				Ema	il				
	МО		AY	YR							ea Coc	le	Daytin	ie Teleph	ione Nu	ımber		=
	a report of a can					•												
No 320) as amende		•	eage and bei	ier tnis	politic	cai	comm	ittee n	as no	ot viola	ed an	y provis	ions of th	e act of J	une 3,1	.937 (P.L. 13	
SWORN TO AND SUBSC	ribed before me this day of	•	20									s	ignature (of Candid	ate			_
							-						Printe	d Name				-
My Commission Exp	Signature pires								•				Ema	il				- $ $
	мо	D	AY	YR						Area	Code		D	aytime T	elepho	ne Nu	nber	- $ $

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	y Period		
COMMONWEALTH LEADERS FUND	From:	4/9/202	<u>4</u> To:	5/13/2024
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	782.76
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)	\$	3,479.00		
TOTAL for the Reporting) Period	(2)	\$	3,479.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	3,200,000.00
All Other Contributions (Part D)			\$	12,500.00
TOTAL for the Reporting	Period	(3)	\$	3,212,500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	37.93
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			\$	3,216,799.69

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 C	Name of Filing Committee or Candidate				porting Period					
		Fi	rom:		То	:				
		•		DATE			AMOUNT			
Full Name of Contributing Comm	ittee		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.

\$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A)

Nam	lame of Filing Committee or Candidate				porting Period				
CON	MMONWEALTH LEADERS FUND			Fro	m:	<u>4/9/</u>	2024 T o) :	5/13/2024
						DATE			AMOUNT
MICHA	ame of Contributor AEL HOUGHTON				МО	DAY	YEAR		
	g Address	State	Zin Codo (Blue 4	`	4	9	2024	\$	250.00
City	ERIE	PA	Zip Code (Plus 4 16504	,	4	9	2024		
Full Na	ame of Contributor				мо	DAY	YEAR		
GLOR	IA OTTO				110	DA.	ILAN		
Mailin	g Address	,	.					\$	100.00
City	ADAH	State	Zip Code (Plus 4)		4	9	2024		
		PA	15410						
	Full Name of Contributor HARRY MAUSSER					DAY	YEAR		
	g Address							\$	100.00
City	HEGINS	State	Zip Code (Plus 4)	4	9	2024	*	100.00
_		PA	17938	•					
Full Na	ame of Contributor	•							
JOHN	FETCHEN				МО	DAY	YEAR		
Mailin	g Address							\$	70.00
City	EAGLE	State	Zip Code (Plus 4	.)	4	17	2024		
		PA	15067						
Full Na	ame of Contributor				мо	DAY	YEAR		
GREG	ODHNER				140	DA!	ILAN		
Mailin	g Address							\$	100.00
City	HUNTINGDON VALLEY	State	Zip Code (Plus 4)	4	16	2024		
		PA	19006						
Full Na	ame of Contributor				мо	DAY	YEAR		
ROBE	RT HOLSTEIN				110	DA.	ILAN		
Mailin	g Address							\$	100.00
City	LITTLESTOWN	State	Zip Code (Plus 4)	4	9	2024		
		PA	17340						
Full Na	ame of Contributor				мо	DAY	YEAR		
MICHA	AEL HOUGHTON								
Mailin	g Address	T	Г					\$	250.00
City	ERIE	State	Zip Code (Plus 4)	4	9	2024		
		PA	16504			1	1	I	

Full N	ame of Contributor			МО	DAY	YEAR	
JOYCE	JABLONSKI						
Mailin	g Address						\$ 100.00
City	WARMINSTER	State	Zip Code (Plus 4)	4	9	2024	
		PA	18974				
Full N	ame of Contributor			МО	DAY	YEAR	
CRAIC	G PAYLOR			1.10	DAI	ILAK	
Mailin	g Address						\$ 250.00
City	MCCONELLSBURG	State	Zip Code (Plus 4)	4	11	2024	
		PA	17233				
Full N	ame of Contributor	-			5.00		
CARL	MANTHEY			МО	DAY	YEAR	
Mailin	g Address						\$ 100.00
City	CHESTER SPRINGS	State	Zip Code (Plus 4)	4	9	2024	
		PA	19425				
Full N	ame of Contributor	<u> </u>		мо	DAY	VEAD	
JANET	Γ LARSON			MO	DAY	YEAR	
Mailin	g Address						\$ 60.00
City	BYRNEDALE	State	Zip Code (Plus 4)	4	9	2024	
		PA	15827				
Full N	ame of Contributor	•	•	МО	DAY	VEAD	
STEPH	HEN SAHD			МО	DAY	YEAR	
Mailin	g Address						\$ 100.00
City	LANCASTER	State	Zip Code (Plus 4)	4	9	2024	
		PA	17601				
Full N	ame of Contributor			мо	DAY	YEAR	
KEVIN	N RAVAIOLI			1.10	DAI	LAK	
Mailin	g Address						\$ 200.00
City	DOYLESTOWN	State	Zip Code (Plus 4)	4	9	2024	
		PA	18902				
Full N	ame of Contributor		·	МО	DAY	YEAR	
JOHN	Z00G			МО	DAY	TEAR	
Mailin	g Address						\$ 150.00
City	NEWTOWN	State	Zip Code (Plus 4)	4	9	2024	
		PA	18940				
Full N	ame of Contributor				D.637	VE -	
 WILLI	AM FITTS			МО	DAY	YEAR	
	g Address						\$ 250.00
City	NEW CASTLE	State	Zip Code (Plus 4)	4	11	2024	
		PA	16105				
Full Name of Contributor					Day	VELD	<u> </u>
TERENCE EDDIS				МО	DAY	YEAR	
	g Address						\$ 200.00
City	PARKSIDE	State	Zip Code (Plus 4)	4	9	2024	
		PA	19015				
				1		L	1

\$ 250.00
\$ 100.00
\$ 100.00
\$ 249.00
\$ 100.00
\$ 100.00
\$ 100.00
\$ 100.00
\$ 100.00
\$ 100.00 \$ 100.00
\$ 100.00
\$ 100.00
\$ 100.00
\$ 100.00
\$ 100.00
\$ 100.00 \$ 100.00

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

PAGE TOTAL \$ 3,479.00

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	ne of Filing Committee or Candidate		Reporting) Period				
COMMONWEALTH LEADERS FUND			From:	<u>4</u> /	<u>/9/2024</u>	То:	<u>5/:</u>	13/2024
				DA	TE		АМ	OUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
COMMONWEALTH CHILDRENS CHOICE	OMMONWEALTH CHILDRENS CHOICE FUND						\$	200,000.00
Mailing Address			4	10	2024		, , , , , , , , , , , , , , , , , , , ,	
City HARRISBURG	State	Zip Code	e (Plus 4)]		2024		
	PA	17101						
Full Name of Contributing Committee				мо	DAY	YEAR		
COMMONWEALTH CHILDRENS CHOICE	FUND			MO	DAT	TEAR	 	3,000,000.00
Mailing Address			5	1	2024]	-,,	
City HARRISBURG	State	Zip Code	e (Plus 4)]		2024		
	PA	17101						

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

PAGE TOTAL\$ 3,200,000.00

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			Rep	orting Pe	orting Period				
COMMONWEALTH LEADERS FUND			Fro	m:	<u>4/9/2</u>	<u>024</u> To	5/13/2024		
			•	D/	ATE		AMOUNT		
Full Name of Contributor				МО	DAY	VEAD			
GREG SUTLIFF				МО	DAY	YEAR	\$ 1,000.00		
Mailing Address				4	16	2024	7		
City CAMP HILL	State	Zip Code	(Plus 4)		10	2024			
	PA	17011							
Employer Name RETIRED				Occupat	tion				
Employer Mailing Address/Principal Place of Business City				State		Zip Code (Plus 4)			
Full Name of Contributor				МО	DAY	YEAR	500.00		
RICHARD MCCOY				1-10	DAI	ILAK	\$ 500.00		
Mailing Address					17	2024			
City WEST CHESTER	State	Zip Code (Plus 4)		4					
	PA	19382					1		
Employer Name RETIRED				Occupat	tion				
Employer Mailing Address/Principal Plac	e of Business	City			State Zip Code (Plus 4)				
Full Name of Contributor		-							
	Full Name of Contributor			MO	DAY	VEAD	1		
SANDY INSALACO, SR.				МО	DAY	YEAR	\$ 5,000.00		
SANDY INSALACO, SR. Mailing Address									
	State	Zip Code	(Plus 4)	MO 4	DAY 19	YEAR 2024			
Mailing Address	State PA	Zip Code 18702	(Plus 4)						
Mailing Address		-	(Plus 4)		19				
Mailing Address City WILKES BARRE	PA	-	(Plus 4)	- 4	19				
Mailing Address City WILKES BARRE Employer Name RETIRED Employer Mailing Address/Principal Place Full Name of Contributor	PA	18702	(Plus 4)	- 4	19		Zip Code (Plus 4)		
Mailing Address City WILKES BARRE Employer Name RETIRED Employer Mailing Address/Principal Place Full Name of Contributor MICHAEL DEROSA	PA	18702	(Plus 4)	- 4 Occupat	19	2024	Zip Code (Plus 4)		
Mailing Address City WILKES BARRE Employer Name RETIRED Employer Mailing Address/Principal Place Full Name of Contributor MICHAEL DEROSA Mailing Address	e of Business	18702		- 4 Occupat	19	2024	Zip Code (Plus 4) \$ 1,000.00		
Mailing Address City WILKES BARRE Employer Name RETIRED Employer Mailing Address/Principal Place Full Name of Contributor MICHAEL DEROSA	e of Business State	City Zip Code	(Plus 4)	Occupat	19 tion State DAY	2024 YEAR	Zip Code (Plus 4) \$ 1,000.00		
Mailing Address City WILKES BARRE Employer Name RETIRED Employer Mailing Address/Principal Place Full Name of Contributor MICHAEL DEROSA Mailing Address City MALVERN	e of Business State PA	18702		Occupat	19 state DAY 24	2024 YEAR 2024	Zip Code (Plus 4) \$ 1,000.00		
Mailing Address City WILKES BARRE Employer Name RETIRED Employer Mailing Address/Principal Place Full Name of Contributor MICHAEL DEROSA Mailing Address City MALVERN Employer Name COMMONWEALTH EQU	e of Business State PA JITY PARTNERS	2ip Code 19355		Occupat	19 State DAY 24	2024 YEAR 2024	Zip Code (Plus 4) \$ 1,000.00 AL PARTNERR		
Mailing Address City WILKES BARRE Employer Name RETIRED Employer Mailing Address/Principal Place Full Name of Contributor MICHAEL DEROSA Mailing Address City MALVERN	e of Business State PA JITY PARTNERS	2ip Code 19355		Occupat	19 state DAY 24	2024 YEAR 2024	Zip Code (Plus 4) \$ 1,000.00		

Full Name of Contributor				мо	DAY	YEAR	5 000 00
MARK SITLER				1-10	DAI	ILAK	\$ 5,000.00
Mailing Address				4	3	2024	
City WILLIAMSPORT	State	Zip	Zip Code (Plus 4)		5	2024	
	l _{PA}	177	01				
Employer Name HARTMAN (GROUP			Occupat	ion (OWNER	& VP
Employer Mailing Address/Pri	ncipal Place of Business		City		State		Zip Code (Plus 4)
			MONTOURSVILL	E	PA		17754

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

PAGE TOTAL
\$ 12,500.00

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					
COMMONWEALTH LEADERS FUND	From:	<u>4/9/2024</u> To:	5/13/2024			

			D	ATE		AMOUNT				
Full Name			МО	DAY	VEAD		27.00			
FIRST NATIONAL BANK OF PA	МО	DAY	YEAR	\$	37.93					
Mailing Address			4	30	2024					
City HARRISBURG	State	Zip Code (Plus 4)			2021					
	PA	17102								
Receipt Description INTEREST EARN	Receipt Description INTEREST EARNED									

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

PAGE TOTAL \$ 37.93

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									
COMMONWEALTH LEADERS FUND	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 Candidate				Reporting Period					
F				From: To:					
				DATE			AMOUNT		
Full Name of Contributor			мо	DAY	YEAR				
Mailing Address						7 \$	0.00		
City	State	Zip Code (Plus 4)							
Description of Contribution:	•	•	•	•					
				_	Г				
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Deta Section 2.				nmary Pa	ge,		PAGE TOTAL		
						\$	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate			Rep	porting	Period				
	F			Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Place of Business City State Zip C					Code(Plus 4)	Descri	ption	of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed							PAGE TOTAL		
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
COMMONWEALTH LEADERS FUND	From	4/9/2024	То:	<u>5/13/2024</u>	

					DATE			AMOUNT	
To W	nom Paid			МО	DAY	YEAR			
ATLAS	S & MIGHT			110					
Mailin	g Address			4	10	2024	\$	165,000.00	
City	CAMP HILL	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	17011	MAIL					
To W	nom Paid			мо	DAY	YEAR			
ONPO	INT			140		ILAK			
Mailing Address					9	2024	\$	581.51	
City ASHBURN State Zip Code (Plus 4)				Description of Expenditure					
		VA	20147	DIRECT	MAIL				
To W	nom Paid			мо	DAY	YEAR			
NOVA	BROKERAGE & MA	NAGEMENT SOLUTIONS		140		IZAK			
Mailin	g Address			4	9	2024	\$	2,141.63	
City ASHBURN State Zip Code (Plus 4)			Description of Expenditure						
		VA	20147	DIRECT MAIL					
To W	nom Paid			мо	DAY	YEAR			
ATLAS	S & MIGHT			140		IZAK			
Mailin	g Address			5	1	2024	\$	3,000,000.00	
City	CAMP HILL	State	Zip Code (Plus 4)	Description of Expenditure					
		PA	17011	DIRECT MAIL, DIGITAL, TEXT					
To W	nom Paid			мо	DAY	YEAR			
CLEAF	RWORD			140		ILAK			
Mailin	g Address			4	9	2024	\$	4,000.00	
City	ASHBURN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
VA 20147				DIRECT	MAIL				
To W	nom Paid			мо	DAY	YEAR			
BONN	IIE LANGBORGH DESIGN	, LLC		1.10		LAN			
Mailin	g Address			4	11	2024	\$	445.00	
City	VIENNA	State	Zip Code (Plus 4)	Description of Expenditure					
		VA	22180	DIRECT	MAIL ART				
		•		-					

To Wi	nom Paid		мо	DAY	YEAR					
ELEVATE STRATEGY LLC						ILAK				
Mailing Address				5	1	2024	\$	12,514.69		
City BIRMINGHAM State Zip Code (Plus 4)					Description of Expenditure					
AL 35244					CONSULTING					
To Wi	nom Paid		-							
PERS	ONALIZED MARKETING COMMUN	ICATIONS		МО	DAY	YEAR				
Mailin	g Address			4	12	2024	\$	10,740.20		
City	LYNCHBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l			
		VA	24502	DIRECT	MAIL					
To Wi	nom Paid	•	•		l					
ONPO	INT			МО	DAY	YEAR				
Mailin	g Address			4	15	2024	\$	50.00		
City	ASHBURN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		VA	20147	DIRECT	MAIL					
To Wi	nom Paid	•		мо	DAY	YEAR				
RCAC				rio		ILAK				
Mailin	g Address			4	15	2024	\$	10,000.00		
City	PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	15220	CONTRI	BUTION					
To Wi	nom Paid			мо	DAY	YEAR				
OLD 7	TOWN DELI			МО	DAT	TEAR				
Mailin	g Address			4	16	2024	\$	1,082.00		
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	17101	IN-KINE	FOR FUN	DRAISER				
To Wi	nom Paid			МО	DAY	YEAR				
CLEA	RWORD			МО	DAT	TEAR				
Mailin	g Address			5	8	2024	\$	2,500.00		
City	ASHBURN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		VA	20147	DIRECT	MAIL					
To Wi	nom Paid				l _{DAY}	VEAD				
USP	OSTAL SERVICE			МО	DAY	YEAR				
Mailin	g Address			5	1	2024	\$	256.00		
City	City HARRISBURG State Zip Code (Plus 4)				tion of Exp	enditure				
PA 17108				РО ВОХ						
To Whom Paid				мо	DAY	YEAR				
DEBEE CLARK & amp; WEBER, PLLC						LAIN				
Mailin	g Address			5	2	2024	\$	2,000.00		
City	OKLAHOMA CITY	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•			
		ок	73154	LEGAL						
JON 75157										

To Whom Paid	мо	DAY	YEAR				
COMMONWEALTH ENTREPRENEURS, LLC				DAI	ILAK		
Mailing Address			5	2	2024	\$	3,642.92
City HARRISBURG State Zip Code (Plus 4)			Description of Expenditure				
	PA	17101	RENT M	AY			
To Whom Paid			мо	DAY	YEAR		
PAYTRACE			140		ILAK		
Mailing Address			5	2	2024	\$	21.40
City SPOKANE VALLEY	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
WA 99216 CREDIT CARD PROCESSING							
		PAGE TOTAL					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							3,214,975.35