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 2024	10046				port ed B		CAND	ANDIDATE COMMITTEE LOBBYIST									
Name of Filing C	Committee, Candid	ate or L	obbyist:		FRI	END	S OF	JEFF OL	SOI	MMER								
Street Address:																		
City:	GREENTOWN					State:				PA			Zip Code: 18426					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA		POS	ST-	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		POS	ST-	6.		TERMINA REPORT?		Yes	1	No	/
report type)	ANNUAL REPORT	7.	Year 2024					NG METH CHECK (PAPER		\	DI	SKETT	E
Name of Office S	Sought by Candida	te:	-		-			DATE	OF I	ELEC	TIO	N	District Number	Office Code	Pa	rty C	ode C	ounty ode
	,							МО	D	ΑY	YE	AR	rumber	Touc				-
								1	1		5	2024		(SEE IN	STRUCT	ONS	FOR COI	DES)
•	Receipts and	МО	DAY	YEAR	2			МО	D.	AY	YE	AR	FO	R OFFI	CE USI	ON	ILY	
Expenditures	from:		4 9	2	024	T	0		5	1	3	2024						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				11,7	'59.84						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule	e I)	\$				40,1	.27.60						
C. Total Funds	Available (Sum Of	f Lines A	and B)				\$				51,8	87.44						
D. Total Expenditures (From Schedule III)											49,5	17.30						
E. Ending Cash Balance (Subtract Line D From Line C)							\$				2,3	70.14						
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	chedu	le II	I)	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$				75,0	00.00						
				AFF	ID	AVI	T SE	CTION										
	s a Committee rep	-	_						-	-		_						
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sc	hedules	s file	d on	paper	or by elec	tron	nic me	dium,	are to t	he best of	my knov	wledge	and	belief	true
Sworn to and subs	cribed before me this day of	5	20						_		S	ignature	of Persor	Submit	ting Re	port		
	Signatu						- -		_				Print	ed Name	•			
My Commission Ex	-								_				Emai	ı				
	мо	D	AY	YR						Area	a Cod	е	Daytim	e Teleph	one Nu	ımbe	er	
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	ee, C	andid	ate shal	l sig	gn hei	re.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and beli	ief this	poli	tical	comm	ittee has	not v	violate	ed any	y provisi	ons of the	act of J	une 3,1	.937	(P.L. 1	333,
Sworn to and subso	ribed before me this								_			Si	gnature o	f Candid	ate			-
	day of						-		_				Printe	d Name				-
Mu Committee:	Signature						-		_				Emai	ı				
My Commission Exp	oires 						_		_									
	МО	Di	AY	YR			-		7	Area C	ode		Da	ytime T	elepho	ne N	umber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
FRIENDS OF JEFF OLSOMMER	From:	4/9/202	<u>4</u> То:	<u>5/13/2024</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)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	12,000.00
All Other Contributions (Part D)			\$	28,100.00
TOTAL for the Reporting	Period	(3)	\$	40,100.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	Period	(4)	\$	27.60
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 Page 1			\$	40,127.60

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 Ca	ndidate	F	Reporting Period							
		F	From:		То	•				
				DATE			AMOUNT			
Full Name of Contributing Commit	tee		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.

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.

(Exclu	de contributions fron	n political comm	itte	es re _l	oortea	in Part	A)		
Name of Filing Committe	e or Candidate		Reporting Period						
			From: To				o :		
		1			DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.0	
City	State	Zip Code (Plus 4))						
	•	•	•		•	•		PAGE TOTAL	

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

9/8/2025 6:30:40 AM

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.

Reporting Period

				_						
FRIENI	DS OF JEFF OLSOMMER			From:	<u>4/</u>	<u>′9/2024</u>	То:		5/13/2024	
					DA	TE		AMOUNT		
Full Na	ame of Contributing Committee				мо	DAY	YEAR			
NORTH	HEAST LEADERSHIP FUND					57(1		4	7,000.00	
Mailing	g Address				4	16	2024		•	
City	WILKES-BARRE	State	Zip Cod	e (Plus 4)	7		2024			
		PA	18711							
Full Na	ame of Contributing Committee				мо	DAY	YEAR			
PRESIDENTIAL COALITION, LLC						5711	12/110	_	500.00	
Mailing	g Address		4	24	2024					
City	WASHINGTON	State	Zip Cod	e (Plus 4)						
		DC	20003							
Full Na	ame of Contributing Committee				мо	DAY	YEAR			
MID-A	TLANTIC LABORERS' POLITICAL L	EAGUE			110	2111		\$	2,500.00	
Mailing	g Address				4	24	2024		•	
City	RESTON	State	Zip Cod	e (Plus 4)	7	27	2024			
		VA	20190							
Full Na	ame of Contributing Committee				мо	DAY	YEAR			
PENNS	SYLVANIA BANKERS PUBLIC AFFA:	IRS COM.				5711	127110	_ \$	2,000.00	
Mailing	g Address				5	3	2024		•	
City	HARRISBURG	State	Zip Cod	e (Plus 4)	,		2024			
		PA	17110							
_									PAGE TOTAL	

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

Name of Filing Committee or Candidate

PAGE TOTAL \$ 12,000.00

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 of Candidate					eporting Period						
FRIENDS OF JEFF OLSOMMER				Fron	1:	4/9/2	<u>024</u> To	:	5/13/2024		
					DA	ATE			AMOUNT		
Full Name of Contributor					мо	DAY	YEAR				
JEFFREY OLSOMMER					МО	DAT	ILAK	\$	23,500.00		
Mailing Address					5	3	2024				
City HAMLIN	State	Zip Code (Plus 4)			5		2021				
	PA I	18	427								
Employer Name OLSOMMER-CLARKE I	NSURANCE				Occupation INSURANCE AGENT/OWN						
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Co	de (Plus 4)		
			HAMLIN			PA		18427	,		
Full Name of Contributor				мо	DAY	YEAR	L	1 000 00			
PAUL EDWARDS					1-10	DAI	ILAK	\$	1,000.00		
Mailing Address					4	24	2024				
City HONESDALE	State	Zip	Code (Plus	4)							
	PA	18	431				-				
Employer Name RETIRED					Occupat	ion	RETIRE)			
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Co	de (Plus 4)		
								_			
Full Name of Contributor					мо	DAY	YEAR	s	300.00		
WILLIAM CLAUSS								1			
Mailing Address	Chata	71	Codo (Diss	4)	4	13	2024	1			
City TAFTON	State	_	Code (Plus	4)							
	PA	18	464					<u> </u>			
Employer Name DAVIS R CHANT REAL					Occupat	1	REALTO				
Employer Mailing Address/Principal Plac	e of Business		City			State		•	de (Plus 4)		
			HAWLEY			PA		18428	3		
Full Name of Contributor					мо	DAY	YEAR	\$	300.00		
DONALD & amp; JANET OLSOMMER] *	300.00		
Mailing Address	ı				4	9	2024	1			
City MOSCOW	State	Zip	Code (Plus	4)							
	PA	18	444		l			l			
Employer Name RETIRED					Occupation RETIRE			ED			
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Code (Plus 4)			

Full Name of Contributor				мо	DAY	YEAR		500.00	
JOSEPH HARCUM				МО	DAT	ILAK	\$	500.00	
Mailing Address				4	16	2024	1		
City EQUINUNK	State	Zij	p Code (Plus 4)		10	2027			
	PA	18	3417						
Employer Name DUCK HARBOR COMP	ANY			Occupation OWNER					
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Co	de (Plus 4)	
			EQUINUNK		PA		18417		
Full Name of Contributor				мо	DAY	YEAR		1 000 00	
MARK VOLPE	1-10	DAI	ILAK	\$	1,000.00				
Mailing Address					16	2024			
City MILFORD	State	Zij	p Code (Plus 4)	4	10				
	PA	18	3337						
Employer Name RETIRED				Occupat	ion	RETIRE	D		
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Co	de (Plus 4)	
Full Name of Contributor				мо	DAY	YEAR			
CHARLIE GILLINDER				МО	DAT	TEAR	\$	1,500.00	
Mailing Address				- 4	15	2024			
City MATAMORAS	State	Zij	p Code (Plus 4)		15	2027			
	PA	18	336						
Employer Name RETIRED				Occupat	ion	RETIRE	D		
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Co	de (Plus 4)	
•						Ē		PAGE TOTAL	

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

PAGE TOTAL\$ 28,100.00

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 Perio	od	
FRIENDS OF JEFF OLSOMMER	From:	4/9/2024 To:	5/13/2024

						AMOUNT		
Full Name			МО	DAY	VEAD		27.60	
TOM QUICK INN			МО	DAY	YEAR	\$	27.60	
Mailing Address			4	24	2024			
City MILFORD	State	Zip Code (Plus 4)			2021			
	PA	18337						
Receipt Description REFUND	•	•						

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

PAGE TOTAL \$27.60

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								
FRIENDS OF JEFF OLSOMMER	From:	4/9/2024 To :	<u>5/13/2024</u>						
. 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	g Period				
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				 		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:		•	•			•		
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	portin	ng Pe	riod				
				Fro	m:			To:			
							DATE			АМО	UNT
Full Name of Contributor					мо		DAY	YEAR			
Mailing Address										\$	0.00
City	State		Zip Code(Plus 4)								
Employer of Contributor					Оссі	upati	ion				
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	Stat	e Z	Zip Co	ode(Plus 4)	Descr	ipt	tion of Contr	ribution
Enter Grand Total of Part G on Sch	edule II, In-Kir	nd (Contributions D	etaile	ed		-			PAG	E TOTAL
Summary Page, Section 3.	,										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period					
FRIENDS OF JEFF OLSOMMER	From	4/9/2024	То:	5/13/2024		

	L L										
					DATE		AMOUNT				
To Who	om Paid			МО	DAY	YEAR					
BAILEY	DESIGN & DVERTISING										
Mailing Address				4	23	2024	\$	11,749.70			
City HONESDALE State Zip Code (Plus 4)					Description of Expenditure						
PA 18431				ADVERTISING							
To Whom Paid				МО	DAY	YEAR					
BAILEY	DESIGN & DVERTISING			МО	DAT	TEAR					
Mailing	Address			5	3	2024	\$	9,301.76			
City HONESDALE State Zip Code (Plus 4)				Description of Expenditure							
PA 18431				ADVERTISING							
To Who	om Paid			МО	DAY	YEAR					
ENCOR	E OUTDOOR, LLC			МО	DAT	TEAR					
Mailing Address				4	24	2024	\$	4,165.00			
City COVINGTON TWP State Zip Code (Plus 4)			Description of Expenditure								
PA 18424				ADVERTISING							
To Who	om Paid			МО	DAY	YEAR					
ı				МО	DAT	TEAK					
ERIE IN	NSURANCE										
	NSURANCE Address			5	3	2024	\$	415.00			
Mailing		State	Zip Code (Plus 4)		3 tion of Exp		\$	415.00			
Mailing	Address	State PA	Zip Code (Plus 4) 16530		tion of Exp		\$	415.00			
Mailing	Address ERIE			Descrip INSURA	tion of Exp	enditure	\$	415.00			
Mailing City To Who	Address ERIE			Descrip	tion of Exp		\$	415.00			
Mailing City To Who	Address ERIE om Paid			Descrip INSURA	tion of Exp	enditure	\$	415.00 125.00			
Mailing City To Who GRESHA Mailing	Address ERIE om Paid AM'S CHOPHOUSE			Description INSURA	tion of Exp	YEAR 2024					
Mailing City To Who GRESHA Mailing	Address ERIE Om Paid AM'S CHOPHOUSE Address	PA	16530	Description INSURA MO 4 Description	DAY	YEAR 2024 enditure					
Mailing City To Who GRESH, Mailing City	Address ERIE Om Paid AM'S CHOPHOUSE Address	PA State	16530 Zip Code (Plus 4)	MO 4 Descript MEETIN	DAY 16 tion of Exp RCE DAY 16 Exp G EXPENS	YEAR 2024 enditure					
Mailing City To Who GRESHA Mailing City	Address ERIE DM Paid AM'S CHOPHOUSE Address HAWLEY	PA State	16530 Zip Code (Plus 4)	Description INSURA MO 4 Description	DAY 16 tion of Exp	YEAR 2024 enditure					
Mailing City To Who GRESHA Mailing City To Who JEFFRE	Address ERIE Om Paid AM'S CHOPHOUSE Address HAWLEY	PA State	16530 Zip Code (Plus 4)	MO 4 Descript MEETIN	DAY 16 tion of Exp RCE DAY 16 Exp G EXPENS	YEAR 2024 enditure					
Mailing To Who GRESHA Mailing City To Who JEFFRE	Address ERIE DM Paid AM'S CHOPHOUSE Address HAWLEY DM Paid EY OLSOMMER	PA State	16530 Zip Code (Plus 4)	MO 4 Descript MO 4 Descript MEETIN MO 5	DAY 16 tion of Exp DAY 1A DAY	YEAR 2024 enditure E YEAR 2024	\$	125.00			

To Wh									
	om Paid			МО	DAY	YEAR			
RGB POLITICS				1-10		ILAK			
Mailing Address			4	23	2024	\$	5,295.14		
City CAMP HILL State Zip Code (Plus 4)				Description of Expenditure					
PA 17011				ADVERTISING					
To Wh	om Paid			мо	DAY	YEAR			
RGB P	OLITICS			МО	DAT	TEAR			
Mailing Address					3	2024	\$	17,514.00	
City CAMP HILL State Zip Code (Plus 4)				Description of Expenditure					
PA 17011				ADVERTISING					
To Whom Paid				мо	DAY	YEAR			
WARRIOR FOOTBALL				МО	DAT	ILAK			
Mailing Address			4	21	2024	\$	600.00		
City MOSCOW State Zip Code (Plus 4)			Description of Expenditure						
PA 18444			DONATION						
To Wh	om Paid			мо	DAY	YEAR			
ANEDO	ОТ			МО		ILAK			
1						2024	\$	72.30	
Mailing	g Address			4	15	2024		72.50	
Mailing City	g Address NEW ORLEANS	State	Zip Code (Plus 4)	<u> </u>	15 tion of Exp		<u> </u>	72.50	
		State LA	Zip Code (Plus 4) 70112	Descrip		enditure	<u> </u>	72.30	
City		LA	70112	Descrip	lion of Exp	enditure	T	PAGE TOTAL	

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

Name of Filing Committee or Candidate Reporting				ng Period	1					
FRIENDS C	OF JEFF OLSOMMER			From:		<u>4/9/2024</u>	То:		<u>5/13/2024</u>	
						DATE			tstanding lance of Debt	
Name of C	reditor				мо	DAY	YEAR			
JEFFREY O	LSOMMER				110		12/110			
Mailing Ad	dress				3	21	2024	\$	5,000.00	
City HA	MLIN	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
		PA	18427		LOAN TO COMMITTEE					
Name of C	reditor					DAY	VEAD			
JEFFREY O	LSOMMER				МО	DAY	YEAR			
Mailing Address					4	5	2024	\$	21,000.00	
City HAMLIN State Zip Code (Plus 4)				Descrip	tion of Deb	t				
		PA	18427		LOAN TO COMMITTEE					
Name of C	reditor					DAY	VEAD			
JEFFREY O	LSOMMER				МО	DAY	YEAR			
Mailing Ad	dress				2	1	2024	\$	500.00	
City HA	MLIN	State	Zip Code (P	lus 4)	Description of Debt					
		PA	18427		LOAN TO COMMITTEE					
Name of C	reditor					DAY	VEAD			
JEFFREY O	LSOMMER				МО	DAY	YEAR			
Mailing Ad	dress				2	7	2024	\$	25,000.00	
City HA	MLIN	State	Zip Code (P	lus 4)	Description of Debt					
		PA	18427		LOAN TO COMMITTEE					
Name of C	reditor					DAY	VEAD			
JEFFREY O	LSOMMER				МО	DAY	YEAR			
Mailing Ad	dress				5	3	2024	\$	23,500.00	
City HA	MLIN	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t	•		
		PA	18427		LOAN T	О СОММІТ	TEE			
									PAGE TOTAL	
Enter 0	Grand Total of Unpaid Deb	ts on Page 1, Repo	ort Cover Pa	ge, Item	G.			\$	75,000.00	