

# 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 : 20240039		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: MARC ANDERSON FOR PA HOUSE											
Street Address:											
City: DILLSBURG				State: PA		Zip Code: 17019					
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3. X	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	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	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		4	9	2024		5	13	2024			
A. Amount Brought Forward From Last Report					\$ 27,600.59						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 8,119.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 35,719.59						
D. Total Expenditures (From Schedule III)					\$ 35,688.86						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 30.73						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 25,782.15						
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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MARC ANDERSON FOR PA HOUSE	From: <u>4/9/2024</u> To: <u>5/13/2024</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 170.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 575.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 575.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 1,500.00
<b>All Other Contributions (Part D)</b>	\$ 5,874.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 7,374.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 8,119.00
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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
	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)				

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

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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MARC ANDERSON FOR PA HOUSE	<b>From:</b> <u>4/9/2024</u> <b>To:</b> <u>5/13/2024</u>

				DATE		AMOUNT	
Full Name of Contributor MIMI LEIGH CULBERTSON				MO 4	DAY 10	YEAR 2024	\$ 250.00
Mailing Address							
City	DILLSBURG	State PA	Zip Code (Plus 4) 17019				
Full Name of Contributor TOMYE HARBOLD				MO 4	DAY 24	YEAR 2024	\$ 100.00
Mailing Address							
City	FRANKLINTOWN	State PA	Zip Code (Plus 4) 17323				
Full Name of Contributor MICHAEL GINDER				MO 4	DAY 4	YEAR 2024	\$ 125.00
Mailing Address							
City	DILLSBURG	State PA	Zip Code (Plus 4) 17019				
Full Name of Contributor FRANCE BURKHOLDER				MO 4	DAY 27	YEAR 2024	\$ 100.00
Mailing Address							
City	DILLSBURG	State PA	Zip Code (Plus 4) 17019				

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

<b>PAGE TOTAL</b>
\$ 575.00

## 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.

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MARC ANDERSON FOR PA HOUSE	<b>From:</b> <u>4/9/2024</u> <b>To:</b> <u>5/13/2024</u>

				DATE			AMOUNT		
Full Name of Contributing Committee					MO	DAY	YEAR	\$	1,500.00
FRIENDS OF AARON BERNSTINE									
Mailing Address					4	15	2024		
City	NEW GALILEE		State	PA				Zip Code (Plus 4)	161413822

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

PAGE TOTAL
\$ 1,500.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  MARC ANDERSON FOR PA HOUSE	<b>Reporting Period</b>  <b>From:</b> <u>4/9/2024</u> <b>To:</b> <u>5/13/2024</u>
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			DATE	AMOUNT
<b>Full Name of Contributor</b> ANDREW LEWIS			<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b> City HOWARD State PA Zip Code (Plus 4) 16841			4	15
			2024	\$ 874.00
<b>Employer Name</b> BERKS HOME			<b>Occupation</b> G.M.	
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>	<b>State</b>
			<b>Zip Code (Plus 4)</b>	

<b>Full Name of Contributor</b> NANCY LEE ANDERSON			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b>
<b>Mailing Address</b> City DILLSBURG State PA Zip Code (Plus 4) 17019			4	19	2024	5,000.00
<b>Employer Name</b> N/A			<b>Occupation</b> RETIRED			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	

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

<b>PAGE TOTAL</b>
\$ 5,874.00

## 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: <span style="float: right;">To:</span>
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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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
MARC ANDERSON FOR PA HOUSE		From: <u>4/9/2024</u> To: <u>5/13/2024</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	25,782.15
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.)		\$	25,782.15



**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 0.00

**SCHEDULE II  
PART G  
IN-KIND CONTRIBUTIONS RECEIVED  
VALUE OVER \$250.00**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MARC ANDERSON FOR PA HOUSE	From: <u>4/9/2024</u> To: <u>5/13/2024</u>

				DATE	AMOUNT		
Full Name of Contributor PA ECONOMIC GROWTH PAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				4	15	2024	
City YORK	State PA	Zip Code(Plus 4) 17402					
Employer of Contributor N/A				Occupation N/A			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution MAILERS POSTAGE, ETC IN-KIND CONTRIBUTIONS	

Full Name of Contributor PA ECONOMIC GROWTH PAC				MO	DAY	YEAR	\$ 9,173.45
Mailing Address				4	15	2024	
City YORK	State PA	Zip Code(Plus 4) 17402					
Employer of Contributor N/A				Occupation N/A			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution MAILERS POSTAGE, ETC IN-KIND CONTRIBUTIONS	

Full Name of Contributor PA ECONOMIC GROWTH PAC				MO	DAY	YEAR	\$ 3,405.70
Mailing Address				4	15	2024	
City YORK	State PA	Zip Code(Plus 4) 17402					
Employer of Contributor N/A				Occupation N/A			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution MAILERS POSTAGE, ETC IN-KIND CONTRIBUTIONS	

Full Name of Contributor PA ECONOMIC GROWTH PAC				MO	DAY	YEAR	\$ 5,000.00
Mailing Address				4	19	2024	
City YORK	State PA	Zip Code(Plus 4) 17402					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	

<b>Full Name of Contributor</b> HIGHER INFORMATION GROUP			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,125.00
<b>Mailing Address</b>			4	22	2024	
<b>City</b> LINGLESTOWN	<b>State</b> PA	<b>Zip Code(Plus 4)</b> 17112				
<b>Employer of Contributor</b> JOHN FRISCH, OWNER			<b>Occupation</b> OWNER			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code(Plus 4)</b>	<b>Description of Contribution</b> PRINTED CAMPAIGN MATERIALS	

  

<b>Full Name of Contributor</b> PA ECONOMIC GROWTH			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 6,078.00
<b>Mailing Address</b>			4	19	2024	
<b>City</b> YORK	<b>State</b> PA	<b>Zip Code(Plus 4)</b> 17402				
<b>Employer of Contributor</b> N/A			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>	<b>Zip Code(Plus 4)</b>	<b>Description of Contribution</b> IN-KIND CONTRIBUTION MARKETING	

  

<b>Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.</b>					<b>PAGE TOTAL</b> 25,782.15	
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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MARC ANDERSON FOR PA HOUSE	From <u>4/9/2024</u> To: <u>5/13/2024</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
AMAZON				
<b>Mailing Address</b>	4	9	2024	\$ 27.99
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
			COPIER TONER	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
AMAZON				
<b>Mailing Address</b>	4	14	2024	\$ 11.23
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
			CAMPAIGN STICKERS	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
AMAZON				
<b>Mailing Address</b>	4	9	2024	\$ 11.23
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
			CAMPAIGN STICKERS	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
AMAZON				
<b>Mailing Address</b>	4	9	2024	\$ 25.99
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
			THANK YOU'S	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
STAPLES				
<b>Mailing Address</b>	4	20	2024	\$ 52.99
<b>City</b> CAMP HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17011	<b>Description of Expenditure</b>	
			PAPER CUTTER	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
STAPLES				
<b>Mailing Address</b>	4	21	2024	\$ 36.63
<b>City</b> CAMP HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17011	<b>Description of Expenditure</b>	
			OFFICE SUPPLIES	

To Whom Paid			MO	DAY	YEAR	\$ 26.97
BJ'S						
Mailing Address			4	14	2024	
City	CAMP HILL	State	Zip Code (Plus 4)		Description of Expenditure	
	PA		17011		BUBBLE GUM - LITTLE LEAGUE	
To Whom Paid			MO	DAY	YEAR	\$ 80.00
DILLSBURG SENIOR CENTER						
Mailing Address			4	15	2024	
City	DILLSBURG	State	Zip Code (Plus 4)		Description of Expenditure	
	PA		17019		ROOM RENTAL	
To Whom Paid			MO	DAY	YEAR	\$ 3.56
STAPLES						
Mailing Address			4	13	2024	
City	CAMP HILL	State	Zip Code (Plus 4)		Description of Expenditure	
	PA		17011		PRINTING / FAXING	
To Whom Paid			MO	DAY	YEAR	\$ 127.20
STAPLES						
Mailing Address			4	20	2024	
City	CAMP HILL	State	Zip Code (Plus 4)		Description of Expenditure	
	PA		17011		PRINTING	
To Whom Paid			MO	DAY	YEAR	\$ 13.91
STAPLES						
Mailing Address			4	20	2024	
City	CAMP HILL	State	Zip Code (Plus 4)		Description of Expenditure	
	PA		17011		COPIES	
To Whom Paid			MO	DAY	YEAR	\$ 38.16
STAPLES						
Mailing Address			4	12	2024	
City	CAMP HILL	State	Zip Code (Plus 4)		Description of Expenditure	
	PA		17011		PC RENTAL, PRINTING	
To Whom Paid			MO	DAY	YEAR	\$ 9,874.00
ATLAS & MIGHT						
Mailing Address			4	11	2024	
City	CAMP HILL	State	Zip Code (Plus 4)		Description of Expenditure	
	PA		17011		MARKETING MAILS	
To Whom Paid			MO	DAY	YEAR	\$ 25,359.00
JFH STRATEGIES						
Mailing Address			4	19	2024	
City	WINDBER	State	Zip Code (Plus 4)		Description of Expenditure	
	PA		15963		CAMPAIGN MARKETING MATERIALS	

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

**PAGE TOTAL**

\$ 35,688.86

