

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: PO BOX 295												
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 PRIMARY	POST-	3. X	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			
						4	9	2024				TO
						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

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

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

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)	\$ 575.00
TOTAL for the Reporting Period (2)	\$ 575.00

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

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.)	\$ 8,119.00
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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	Reporting Period
MARC ANDERSON FOR PA HOUSE	From: <u>4/9/2024</u> To: <u>5/13/2024</u>

DATE	AMOUNT
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Full Name of Contributor	MO	DAY	YEAR	
MIMI LEIGH CULBERTSON				
Mailing Address 230 ROBSON RD.				
City DILLSBURG	State	Zip Code (Plus 4)		
	PA	17019	4	10 2024
				\$ 250.00

Full Name of Contributor	MO	DAY	YEAR	
TOMYE HARBOLD				
Mailing Address 34 S. WATER ST.				
City FRANKLINTOWN	State	Zip Code (Plus 4)		
	PA	17323	4	24 2024
				\$ 100.00

Full Name of Contributor	MO	DAY	YEAR	
MICHAEL GINDER				
Mailing Address 10 HARTMAN LANE				
City DILLSBURG	State	Zip Code (Plus 4)		
	PA	17019	4	4 2024
				\$ 125.00

Full Name of Contributor	MO	DAY	YEAR	
FRANCE BURKHOLDER				
Mailing Address GETTYSBURG PIKE				
City DILLSBURG	State	Zip Code (Plus 4)		
	PA	17019	4	27 2024
				\$ 100.00

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

PAGE TOTAL
\$ 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.

Name of Filing Committee or Candidate	Reporting Period
MARC ANDERSON FOR PA HOUSE	From: <u>4/9/2024</u> To: <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		
254 STATE RTE. 168									
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.)**

Name of Filing Committee or Candidate MARC ANDERSON FOR PA HOUSE	Reporting Period From: <u>4/9/2024</u> To: <u>5/13/2024</u>
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				DATE	AMOUNT		
Full Name of Contributor NANCY LEE ANDERSON				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 1271 GETTYSBURG PIKE #103				4	19	2024	
City DILLSBURG	State PA	Zip Code (Plus 4) 17019					
Employer Name N/A				Occupation RETIRED			
Employer Mailing Address/Principal Place of Business N/A			City		State	Zip Code (Plus 4)	
Full Name of Contributor ANDREW LEWIS				MO	DAY	YEAR	\$ 874.00
Mailing Address 273 TWO MILE ROAD				4	15	2024	
City HOWARD	State PA	Zip Code (Plus 4) 16841					
Employer Name BERKS HOME				Occupation G.M.			
Employer Mailing Address/Principal Place of Business SAME AS ABOVE			City		State	Zip Code (Plus 4)	

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

PAGE TOTAL
\$ 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: 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	
MARC ANDERSON FOR PA HOUSE		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 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)		\$	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: 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
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 P.O. BOX 21432				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 N/A		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 P.O. BOX 21432				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 N/A		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 P.O. BOX 21432				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 N/A		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 P.O. BOX 21432				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	

Full Name of Contributor HIGHER INFORMATION GROUP			MO	DAY	YEAR	\$ 1,125.00
Mailing Address 400 N. BLUE RIBBON AVE.			4	22	2024	
City LINGLESTOWN	State PA	Zip Code(Plus 4) 17112				
Employer of Contributor JOHN FRISCH, OWNER			Occupation OWNER			
Employer Mailing Address/Principal Place of Business ABOVE		City	State	Zip Code(Plus 4)	Description of Contribution PRINTED CAMPAIGN MATERIALS	

Full Name of Contributor PA ECONOMIC GROWTH			MO	DAY	YEAR	\$ 6,078.00
Mailing Address PO BOX 21432			4	19	2024	
City YORK	State PA	Zip Code(Plus 4) 17402				
Employer of Contributor N/A			Occupation			
Employer Mailing Address/Principal Place of Business N/A		City	State	Zip Code(Plus 4)	Description of Contribution IN-KIND CONTRIBUTION MARKETING	

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

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

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
AMAZON				
Mailing Address AMAZON.COM	4	9	2024	\$ 27.99
City	State	Zip Code (Plus 4)	Description of Expenditure	
			COPIER TONER	
To Whom Paid	MO	DAY	YEAR	
AMAZON				
Mailing Address AMAZON.COM	4	14	2024	\$ 11.23
City	State	Zip Code (Plus 4)	Description of Expenditure	
			CAMPAIGN STICKERS	
To Whom Paid	MO	DAY	YEAR	
AMAZON				
Mailing Address AMAZON.COM	4	9	2024	\$ 11.23
City	State	Zip Code (Plus 4)	Description of Expenditure	
			CAMPAIGN STICKERS	
To Whom Paid	MO	DAY	YEAR	
AMAZON				
Mailing Address AMAZON.COM	4	9	2024	\$ 25.99
City	State	Zip Code (Plus 4)	Description of Expenditure	
			THANK YOU'S	
To Whom Paid	MO	DAY	YEAR	
STAPLES				
Mailing Address 128 S. 32ND ST.	4	20	2024	\$ 52.99
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure	
			PAPER CUTTER	
To Whom Paid	MO	DAY	YEAR	
STAPLES				
Mailing Address 128 S. 32ND ST.	4	21	2024	\$ 36.63
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure	
			OFFICE SUPPLIES	

To Whom Paid			MO	DAY	YEAR	\$ 26.97
BJ'S			4	14	2024	
Mailing Address 3805 HARTZDALE DR.			4	14	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure BUBBLE GUM - LITTLE LEAGUE			

To Whom Paid			MO	DAY	YEAR	\$ 80.00
DILLSBURG SENIOR CENTER			4	15	2024	
Mailing Address 1 N. 2ND ST.			4	15	2024	
City DILLSBURG	State PA	Zip Code (Plus 4) 17019	Description of Expenditure ROOM RENTAL			

To Whom Paid			MO	DAY	YEAR	\$ 3.56
STAPLES			4	13	2024	
Mailing Address 128 S. 32ND ST.			4	13	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure PRINTING / FAXING			

To Whom Paid			MO	DAY	YEAR	\$ 127.20
STAPLES			4	20	2024	
Mailing Address 128 S. 3RD ST.			4	20	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure PRINTING			

To Whom Paid			MO	DAY	YEAR	\$ 13.91
STAPLES			4	20	2024	
Mailing Address 128 S. 32ND ST.			4	20	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure COPIES			

To Whom Paid			MO	DAY	YEAR	\$ 38.16
STAPLES			4	12	2024	
Mailing Address 128 S. 32ND ST.			4	12	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure PC RENTAL, PRINTING			

To Whom Paid			MO	DAY	YEAR	\$ 9,874.00
ATLAS & MIGHT			4	11	2024	
Mailing Address 2135 MARKET ST. FLOOR 2			4	11	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure MARKETING MAILS			

To Whom Paid			MO	DAY	YEAR	\$ 25,359.00
JFH STRATEGIES			4	19	2024	
Mailing Address 908 9TH STREET			4	19	2024	
City WINDBER	State PA	Zip Code (Plus 4) 15963	Description of Expenditure CAMPAIGN MARKETING MATERIALS			

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

PAGE TOTAL

\$ 35,688.86

