

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

<b>Filer Identification Number :</b>		20240031		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> WALSH FOR PA - PAC												
<b>Street Address:</b>												
<b>City:</b> SWEET VALLEY						<b>State:</b> PA		<b>Zip Code:</b> 18656				
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2024		<b>FILING METHOD ( ) CHECK ONE</b>		<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>				
						11	5	2024				
									(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		9	17	2024		10	21	2024				
<b>A. Amount Brought Forward From Last Report</b>						\$		(5,553.71)				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$		25,261.78				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$		19,708.07				
<b>D. Total Expenditures (From Schedule III)</b>						\$		18,671.80				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$		1,036.27				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$		0.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$		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>
WALSH FOR PA - PAC	From: <u>9/17/2024</u> To: <u>10/21/2024</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 98.64

<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>	\$ 550.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 550.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 21,000.00
<b>All Other Contributions (Part D)</b>	\$ 3,613.14
<b>TOTAL for the Reporting Period (3)</b>	\$ 24,613.14

<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>	\$ 25,261.78
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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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
WALSH FOR PA - PAC	From: <u>9/17/2024</u> To: <u>10/21/2024</u>

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
SCOTT FOWLER							
Mailing Address				7	10	2024	
City	LENHARTSVILLE	State	Zip Code (Plus 4)				
		PA	19534				
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
GREGORY GRIFFIN							
Mailing Address				9	11	2024	
City	SWOYERSVILLE	State	Zip Code (Plus 4)				
		PA	18704				
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
RONALD D. KNAPP							
Mailing Address				9	13	2024	
City	NANTICOKE	State	Zip Code (Plus 4)				
		PA	18634				
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
ROSEANN C ERVIN							
Mailing Address				10	21	2024	
City	DRUMS	State	Zip Code (Plus 4)				
		PA	18222				

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

<b>PAGE TOTAL</b>
\$ 550.00

## 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>
WALSH FOR PA - PAC	<b>From:</b> <u>9/17/2024</u> <b>To:</b> <u>10/21/2024</u>

				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 20,000.00
COMMONWEALTH CHILDRES CHOICE FUND				10	2	2024	
Mailing Address							
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17101		
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
REPUBLICAN WOMEN OF LUZENE COUNTY				10	16	2024	
Mailing Address							
City	DALLAS	State	PA	Zip Code (Plus 4)	18612		

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

<b>PAGE TOTAL</b>
\$ 21,000.00

**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>  WALSH FOR PA - PAC	<b>Reporting Period</b>  From: <u>9/17/2024</u> To: <u>10/21/2024</u>
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				DATE	AMOUNT		
<b>Full Name of Contributor</b> DONNA SCHULER				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> City HARVEYS LAKE State PA Zip Code (Plus 4) 18618				5	17	2024	
<b>Employer Name</b> RETIRED				<b>Occupation</b> TEACHER			
<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> DONNA SCHULER				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b> City HARVEYS LAKE State PA Zip Code (Plus 4) 18618				7	9	2024	
<b>Employer Name</b> RETIRED				<b>Occupation</b> TEACHER			
<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> MARK D WALSH				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> City CABOT State PA Zip Code (Plus 4) 16023				5	30	2024	
<b>Employer Name</b> HOME BOYS GUTTERS				<b>Occupation</b> OWNER			
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b> CABOT		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16023
<b>Full Name of Contributor</b> DAVID D GRANTEED				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> City KINGSTON State PA Zip Code (Plus 4) 18704				7	10	2024	
<b>Employer Name</b> DAVE GRANTEED'S SERVICE CENTER INC.				<b>Occupation</b> OWNER			
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b> FORTY FORT		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18704

<b>Full Name of Contributor</b> DANIEL C JONES & ASSOCIATES, INC				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 350.00
<b>Mailing Address</b>				7	31	2024	
<b>City</b> BALA CYNWYD	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19004					
<b>Employer Name</b> RAYMOND JAMES				<b>Occupation</b> SENIOR VICE PRESIDENT			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b> JENKINTOWN	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 19046	

  

<b>Full Name of Contributor</b> ALEXANDER SCOTT FLYNN				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 385.55
<b>Mailing Address</b>				5	30	2024	
<b>City</b> FREELAND	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18224					
<b>Employer Name</b> QSC ENTERPRISE				<b>Occupation</b> DEPARTMENT MANAGER			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b> KINGSTON	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 18704	

  

<b>Full Name of Contributor</b> ALEXANDER SCOTT FLYNN				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 192.53
<b>Mailing Address</b>				6	29	2024	
<b>City</b> FREELAND	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18224					
<b>Employer Name</b> QSC ENTERPRISE				<b>Occupation</b> DEPARTMENT MANAGER			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b> KINGSTON	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 18704	

  

<b>Full Name of Contributor</b> ALEXANDER SCOTT FLYNN				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 385.06
<b>Mailing Address</b>							
<b>City</b> FREELAND	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18224					
<b>Employer Name</b> QSC ENTERPRISE				<b>Occupation</b> DEPARTMENT MANAGER			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b> KINGSTON	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 18704	

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

**PAGE TOTAL****\$** 3,613.14

## 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>	
WALSH FOR PA - PAC		From: <u>9/17/2024</u> To: <u>10/21/2024</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 RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period		(3)	\$ 0.00
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.)			\$ 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  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

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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
WALSH FOR PA - PAC	From <u>9/17/2024</u> To: <u>10/21/2024</u>

				DATE		AMOUNT	
To Whom Paid OGC LAW				MO	DAY	YEAR	\$ 2,280.00
Mailing Address				5	27	2024	
City	PITTSBURGH	State	PA	Zip Code (Plus 4)	15216	Description of Expenditure LAWYER FEES	
To Whom Paid JAMES WALSH				MO	DAY	YEAR	\$ 2,500.00
Mailing Address				5	17	2024	
City	SWEET VALLEY	State	PA	Zip Code (Plus 4)	18656	Description of Expenditure PARTIAL REIMBURSEMENT FROM LOAN TO WALSH FOR PA PAC	
To Whom Paid MARY JANE CALZOLA, PROTHONOTARY OFFICE				MO	DAY	YEAR	\$ 300.00
Mailing Address				5	23	2024	
City	WILKES-BARRE	State	PA	Zip Code (Plus 4)	18711	Description of Expenditure FEE FOR TRANSCRIPT	
To Whom Paid WIX.COM				MO	DAY	YEAR	\$ 122.08
Mailing Address				6	12	2024	
City		State		Zip Code (Plus 4)		Description of Expenditure JUNE, JULY, AUGUST & SEPTEMBER (\$30.52 EA MONTH)	
To Whom Paid JAMES WALSH				MO	DAY	YEAR	\$ 7,010.23
Mailing Address				10	8	2024	
City	SWEET VALLEY	State	PA	Zip Code (Plus 4)	18656	Description of Expenditure FINAL REIMBURSEMENT FROM LOAN TO WALSH FOR PA PAC	
To Whom Paid DICKS				MO	DAY	YEAR	\$ 105.98
Mailing Address				10	3	2024	
City	WILKES BARRE	State	PA	Zip Code (Plus 4)	18702	Description of Expenditure 10' LIFT TENT FOR UPCOMING GOLF TOURNAMENT	

<b>To Whom Paid</b> WIX.COM			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 58.51
<b>Mailing Address</b>			9	18	2024	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> 9/18 (\$12.72) & 10/11 (45.79) CHARGES			
<b>To Whom Paid</b> LUZERNE BANK			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 8.00
<b>Mailing Address</b>			6	28	2024	
<b>City</b> DALLAS	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18612	<b>Description of Expenditure</b> SERVICE CHARGES 2X \$2 EA ON 6/28 & 7/31			
<b>To Whom Paid</b> SCHNEE LEGAL SERVICE LLC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,770.00
<b>Mailing Address</b>			10	11	2024	
<b>City</b> LITITZ	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17543	<b>Description of Expenditure</b> LEGAL FEES FOR SUPREME COURT CASES			
<b>To Whom Paid</b> VALLEY PRINTER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 897.00
<b>Mailing Address</b>			10	18	2024	
<b>City</b> SWEET VALLEY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18656	<b>Description of Expenditure</b> HOODLES			
<b>To Whom Paid</b> LUZERNE CO REPUBLICANS LLC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b>			10	18	2024	
<b>City</b> PLAINS	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18702	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> LAKE LEHMAN WRESTLING			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,500.00
<b>Mailing Address</b>			10	18	2024	
<b>City</b> SWEET VALLEY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18656	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> LAKE LEHMAN CHEER BOOSTER CLUB (LLCBC)			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 120.00
<b>Mailing Address</b>			10	18	2024	
<b>City</b> LEHMAN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18627	<b>Description of Expenditure</b> DONATION			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 18,671.80

