

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 :		20190183		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: COMMONWEALTH CHILDRENS CHOICE FUND												
Street Address: 420 N 3RD STREET												
City: HARRISBURG						State: PA			Zip Code: 17101			
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.	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		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			
		9	17	2024		10	21	2024				
A. Amount Brought Forward From Last Report						\$ 7,698,006.98						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 34,274.24						
C. Total Funds Available (Sum Of Lines A and B)						\$ 7,732,281.22						
D. Total Expenditures (From Schedule III)						\$ 5,778,465.65						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 1,953,815.57						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
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
COMMONWEALTH CHILDRENS CHOICE FUND	From: <u>9/17/2024</u> To: <u>10/21/2024</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)	\$ 0.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 0.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 34,274.24

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.)	\$ 34,274.24
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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
	From: To:

DATE				AMOUNT
Full Name of Contributing Committee				
Mailing Address				
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

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	Reporting Period
	From: To:

				DATE			AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00	
Mailing Address								
City	State	Zip Code (Plus 4)						
Employer Name				Occupation				
Employer Mailing Address/Principal Place of Business			City		State		Zip Code (Plus 4)	

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

PAGE TOTAL	
\$	0.00

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 COMMONWEALTH CHILDRENS CHOICE FUND	Reporting Period From: <u>9/17/2024</u> To: <u>10/21/2024</u>
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				DATE		AMOUNT	
Full Name				MO	DAY	YEAR	\$ 34,274.24
FIRST NATIONAL BANK							
Mailing Address 110 N 2ND STREET							
City HARRISBURG		State PA	Zip Code (Plus 4) 17101				
Receipt Description INTEREST EARNED							

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

PAGE TOTAL
\$ 34,274.24

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 CHILDRENS CHOICE FUND		From: <u>9/17/2024</u> To: <u>10/21/2024</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)		\$	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: 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			
				From:		To:	
				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
COMMONWEALTH CHILDRENS CHOICE FUND	From <u>9/17/2024</u> To: <u>10/21/2024</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
GARRITY FOR PA				
Mailing Address PO BOX 62224	9	17	2024	\$ 250,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17106	Description of Expenditure CONTRIBUTION	
To Whom Paid	MO	DAY	YEAR	
SRCC				
Mailing Address PO BOX 792	9	18	2024	\$ 75,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CONTRIBUTION	
To Whom Paid	MO	DAY	YEAR	
COMMONWEALTH LEADERS FUND				
Mailing Address 420 N 3RD STREET	9	23	2024	\$ 250,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CONTRIBUTION	
To Whom Paid	MO	DAY	YEAR	
FRIENDS OF JEREMY SHAFFER				
Mailing Address PO BOX 792	9	24	2024	\$ 10,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CONTRIBUTION	
To Whom Paid	MO	DAY	YEAR	
HRCC				
Mailing Address 500 N 3RD STREET	9	26	2024	\$ 50,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CONTRIBUTION	
To Whom Paid	MO	DAY	YEAR	
COMMONWEALTH LEADERS FUND				
Mailing Address 420 N 3RD STREET	9	26	2024	\$ 250,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CONTRIBUTION	

To Whom Paid			MO	DAY	YEAR	\$ 5,000.00
FRIENDS OF NICK DIFRANESCO						
Mailing Address PO BOX 102			9	26	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CONTRIBUTION			

To Whom Paid			MO	DAY	YEAR	\$ 400,000.00
COMMONWEALTH LEADERS FUND						
Mailing Address 420 N 3RD STREET			9	30	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CONTRIBUTION			

To Whom Paid			MO	DAY	YEAR	\$ 3,642.92
COMMONWEALTH ENTREPRENEURS, LLC						
Mailing Address 420 N 3RD ST			10	1	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure RENT OCTOBER			

To Whom Paid			MO	DAY	YEAR	\$ 2,000.00
DEBEE CLARK & WEBER						
Mailing Address PO BOX 54949			10	1	2024	
City OKLAHOMA CITY	State OK	Zip Code (Plus 4) 73154	Description of Expenditure LEGAL FEES			

To Whom Paid			MO	DAY	YEAR	\$ 3,000.00
ATLAS & MIGHT LLC						
Mailing Address 2135 MARKET STREET			10	1	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure CONSULTING			

To Whom Paid			MO	DAY	YEAR	\$ 20,000.00
WALSH FOR PA						
Mailing Address PO BOX 133			10	2	2024	
City SWEET VALLEY	State PA	Zip Code (Plus 4) 18626	Description of Expenditure CONTRIBUTION			

To Whom Paid			MO	DAY	YEAR	\$ 7,000.00
FRIENDS OF 166						
Mailing Address 53 MEADOWS LANE			10	2	2024	
City HAVERFORD	State PA	Zip Code (Plus 4) 19041	Description of Expenditure CONTRIBUTION			

To Whom Paid			MO	DAY	YEAR	\$ 7.50
FIRST NATIONAL BANK						
Mailing Address 110 N 2ND STREET			10	2	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure BANK FEES			

To Whom Paid			MO	DAY	YEAR	\$ 20.00
PAYTRACE						
Mailing Address 12709 MIRABEAU PKWY BUILDING A SUITE 100			10	2	2024	
City SPOKANE VALLEY	State WA	Zip Code (Plus 4) 99216	Description of Expenditure CREDIT CARD FEES			
To Whom Paid			MO	DAY	YEAR	\$ 300.00
ERESOURCES						
Mailing Address 233 SW THIRD ST			10	3	2024	
City OCALA	State FL	Zip Code (Plus 4) 34471	Description of Expenditure WEBSITE			
To Whom Paid			MO	DAY	YEAR	\$ 500,000.00
HRCC						
Mailing Address 500 N 3RD STREET 4TH FLOOR			10	8	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CONTRIBUTION			
To Whom Paid			MO	DAY	YEAR	\$ 68.60
FIRST NATIONAL BANK						
Mailing Address 110 N 2ND STREET			10	10	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure BANK FEES			
To Whom Paid			MO	DAY	YEAR	\$ 250,000.00
SRCC						
Mailing Address PO BOX 792			10	10	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CONTRIBUTION			
To Whom Paid			MO	DAY	YEAR	\$ 5,000.00
TAXPAYERS FOR SCOTT BARGER						
Mailing Address PO BOX 261			10	14	2024	
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648	Description of Expenditure CONTRIBUTION			
To Whom Paid			MO	DAY	YEAR	\$ 10,000.00
FRIENDS OF JOHN LAWRENCE						
Mailing Address PO BOX 331			10	14	2024	
City WEST GROVE	State PA	Zip Code (Plus 4) 19390	Description of Expenditure CONTRIBUTION			
To Whom Paid			MO	DAY	YEAR	\$ 25,000.00
FRIENDS OF MARTINA WHITE						
Mailing Address PO BOX 16041			10	14	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19114	Description of Expenditure CONTRIBUTION			

To Whom Paid			MO	DAY	YEAR	\$ 10,000.00
FRIENDS OF JOE PITTMAN						
Mailing Address 119 S 3RD ST			10	15	2024	
City INDIANA	State PA	Zip Code (Plus 4) 15701	Description of Expenditure CONTRIBUTION			
To Whom Paid			MO	DAY	YEAR	\$ 500,000.00
HRCC						
Mailing Address 500 N 3RD STREET 4TH FLOOR			10	15	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CONTRIBUTION			
To Whom Paid			MO	DAY	YEAR	\$ 200,000.00
COMMONWEALTH LEADERS FUND						
Mailing Address 420 N 3RD STREET			10	16	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CONTRIBUTION			
To Whom Paid			MO	DAY	YEAR	\$ 300,000.00
SRCC						
Mailing Address PO BOX 792			10	17	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CONTRIBUTION			
To Whom Paid			MO	DAY	YEAR	\$ 1,050,000.00
COMMONWEALTH LEADERS FUND						
Mailing Address 420 N 3RD STREET			10	17	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CONTRIBUTION			
To Whom Paid			MO	DAY	YEAR	\$ 1,100,000.00
COMMONWEALTH LEADERS FUND						
Mailing Address 420 N 3RD STREET			10	18	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CONTRIBUTION			
To Whom Paid			MO	DAY	YEAR	\$ 47,426.63
COMMONWEALTH PARTNERS CHAMBER OF ENTREPRENEURS						
Mailing Address 420 N 3RD STREET			10	18	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure ADMIN JULY - SEPTEMBER			
To Whom Paid			MO	DAY	YEAR	\$ 5,000.00
FRIENDS OF MATT KRUTH						
Mailing Address 125 BERWYN ROAD			10	21	2024	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15237	Description of Expenditure CONTRIBUTION			

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

PAGE TOTAL

\$ 5,328,465.65

