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 2	20180	035				Repo Filed	-		CAN	NDII	DATE		СОМИ	MITTEE	✓	LOBI	BYIS	Т	
Name of Filing C	ommittee, Ca	ndida	te or Lo	bbyis	t:	E	CKEF	R, TOI	RRI	EN TA	AXP.	AYERS	FO	R		·				
Street Address:																				
City:	NEW OXF	ORD							State:			PA			Zip Code: 17350					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1	1.	2ND F PRIMA		PRE-	2.	30 PRI			Р	POST- 3.			AMENDMENT REPORT?		Yes	\	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION		1.	2ND F ELECT		PRE-	5.	30 ELE			Р	OST-	6. X	(TERMINA REPORT		Yes	П	No	/
report type)	report type) ANNUAL REPORT 7. Year 2024 FILI							G ME		_			PAPER		√	DIS	KETTE			
Name of Office S	ought by Can	didate):				-			DAT	E O	F ELE	CTI	ON	District Number	Office Code	Par	ty Co	de Cou	
REPRESENTATI	VE IN THE GE	=NFRA	AL ASS	FMRI \	Y					мо		DAY	Y	/EAR	193	STH	REP	ı	01	
					· 						11		5	2024		(SEE INS	TRUCTI	ONS FO	OR CODE	S)
Summary of Expenditures		d	МО	DA		YEAR				МО		DAY		/EAR	FO	R OFFIC	E USE	ONL	.Υ	
			1	.0	22	20	24	TO			11	:	25	2024						
A. Amount Bro				-					\$,539.66						
B. Total Moneta	ary Contributi	ons Aı	nd Reco	eipts (From	Sched	lule I)	<u> </u>	\$,470.00						
C. Total Funds	Available (Su	m Of L	ines A	and B	3)				\$				36	,009.66						
D. Total Expend	ditures (From	Sched	dule III	[)					\$				6,	793.04						
E. Ending Cash	Balance (Sub	tract	Line D	From	Line C	:)		-	\$				29,	216.62						
F. Value Of In-							e II)		\$			0.00								
G. Unpaid Debt	s And Obligat	ions (From S	chedu	ıle IV))			\$				18,	778.00						
						AFFI	DAV	IT S	EC	CTIC	N									
PART I - If this is		-	-		_															
I swear (or affirm) correct and comple		t, inclu	ding the	attach	ed sch	edules	filed o	n pape	er o	r by e	lectr	onic m	ediur	n, are to t	the best o	f my knov	/ledge	and b	elief , t	rue
Sworn to and subs	cribed before m day of	e this		20										Signature	of Perso	n Submitt	ing Rep	ort		
	Sig	gnature	1	•				_							Prin	ted Name				_
My Commission Ex	_										-				Ema	il				
	МО		DA	Υ		YR						Are	ea Co	ode	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candi	date's	autho	rized (Commi	ittee,	Cand	ida	te sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		t of my	knowle	dge an	d belie	f this p	politica	l com	mit	tee h	as no	ot viola	ted a	ny provis	ions of the	e act of Ju	ne 3,1	937 (P.L. 13	33,
Sworn to and subsc		this												s	ignature o	of Candida	te	-		— I
	day of 			20 -				_							Printe	d Name				-
	Signat	ture						_												_
My Commission Exp	ires														Ema	il				
MO DAY YR								_				Area	Code		Da	aytime Te	lephor	ie Nu	mber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

-	_			
Name of Filing Committee or Candidate	Reporting	g Period		
ECKER, TORREN TAXPAYERS FOR	From:	10/22/202	<u>.4</u> To:	11/25/2024
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)			\$	950.00
All Other Contributions (Part B)			\$	1,420.00
TOTAL for the Reporting	Period	(2)	\$	2,370.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	3,100.00
All Other Contributions (Part D)			\$	2,000.00
TOTAL for the Reporting) Period	(3)	\$	5,100.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	7,470.00

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.

Nam	ame of Filing Committee or Candidate				Reporting Period						
ECKI	ER, TORREN TAXPAYERS FOR			Fro	om:	10/22/20	<u>)24</u> To		11/25/2024		
			•			DATE			AMOUNT		
	ame of Contributing Committee				мо	DAY	YEAR				
	NGAGE PA POLITICAL ACTION CO	DMMITTEE						l			
	g Address		T		11	14	2024	\$	250.00		
City	MECHANICSBURG	State PA	Zip Code (Plus 4	4)							
	ame of Contributing Committee ATES LLP				мо	DAY	YEAR				
Mailing	g Address				11	14	2024	\$	200.00		
City	PITTSBURGH	State PA	Zip Code (Plus 4 15222-2602	4)	11	14	2024				
	ame of Contributing Committee SYLVANIANS FOR TOMORROW				мо	DAY	YEAR				
Mailing	g Address				11	14	2024	 	250.00		
City	HARRISBURG	State PA	Zip Code (Plus 4	4)	11	14	2024				
Full Na	ame of Contributing Committee										
DISPA	C (DISTRIBUTORS PAC)				МО	DAY	YEAR				
Mailing	g Address				11	14	2024	\$	250.00		
City	HARRISBURG	State PA	Zip Code (Plus 4 17102	4)	11		2024				

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

PAGE TOTAL \$ 950.00

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)

Nan	ne of Filing Committee or Car	Reporting P	Reporting Period						
	CER, TORREN TAXPAYERS FO			From:	10/22/	2024 T o) :	11/25/2024	
					DATE			AMOUNT	
Full N	ame of Contributor			мо	DAY	YEAR			
Richar	rd Lewis			MO	DAT	TEAR			
Mailin	g Address						\$	25.00	
City	GETTYSBURG	State	Zip Code (Plus 4)	11	14	2024			
		PA	17325						
Full N	ame of Contributor	-	-	MO.	DAY	VEAD			
Anne	Couldridge			МО	DAY	YEAR			
Mailin	g Address					İ	\$	100.00	
City	Carlisle	State	Zip Code (Plus 4)	11	14	2024			
		PA	17015						
Full N	ame of Contributor		·						
Paul E	Berg			МО	DAY	YEAR			
Mailin	g Address						\$	200.00	
City	Hanover	State	Zip Code (Plus 4)	11	14	2024			
		PA	17331						
Full N	ame of Contributor		-	МО	DAY	YEAR			
Lori H	erbst			MO	DAT	TEAR			
Mailin	g Address						\$	20.00	
City	East Berlin	State	Zip Code (Plus 4)	11	14	2024			
		PA	17316						
Full N	ame of Contributor			MO	DAY	VEAD			
Antho	ny Austin			МО	DAY	YEAR			
Mailin	g Address						\$	20.00	
City	Gardners	State	Zip Code (Plus 4)	11	14	2024			
		PA	17324						
Full N	ame of Contributor			, wo	DAY	VEAD			
Julie a	and William Geyer			МО	DAY	YEAR			
Mailin	g Address						\$	25.00	
City	New Oxford	State	Zip Code (Plus 4)	11	14	2024			
		PA	17350						
Full N	ame of Contributor					VESS			
Brad a	and Kay Hollabaugh			МО	DAY	YEAR			
Mailin	g Address						\$	50.00	
Maiiiii					I	I		50.00	
City	Biglerville	State	Zip Code (Plus 4)	11	14	2024		30.00	

							17.62 3
Full N	ame of Contributor			МО	DAY	YEAR	
Stanle	ey Eyster			1.10	DAI	ILAK	
Mailin	g Address						\$ 50.00
City	east Berlin	State	Zip Code (Plus 4)	11	14	2024	
		PA	17316				
Full N	ame of Contributor	-	•	мо	DAY	YEAR	
Rober	t Stober			140	DAI	ILAK	
Mailin	g Address						\$ 100.00
City	New Oxford	State	Zip Code (Plus 4)	11	14	2024	
		PA	17350				
Full N	ame of Contributor						
Steve	Oldt			МО	DAY	YEAR	
Mailin	g Address						\$ 200.00
City	Shippensburg	State	Zip Code (Plus 4)	11	14	2024	
		PA	17257				
Full N	ame of Contributor	•				\ 	
Harolo	d Senter			МО	DAY	YEAR	
Mailin	g Address						\$ 100.00
City	New Oxford	State	Zip Code (Plus 4)	11	14	2024	
		PA	17350				
Full N	ame of Contributor	=		мо	DAY	YEAR	
Stella	Thomas			МО	DAT	TEAR	
Mailin	g Address						\$ 20.00
City	East Berlin	State	Zip Code (Plus 4)	11	14	2024	
		PA	17316				
Full N	ame of Contributor			мо	DAY	YEAR	
Williar	m and Joy Rosoff					1 27.11	
Mailin	g Address			<u> </u>			\$ 200.00
City	East Berlin	State	Zip Code (Plus 4)	11	14	2024	
		PA	17316				
Full N	ame of Contributor			мо	DAY	YEAR	
Rober	t Martin			1-10	DAI	ILAK	
Mailin	g Address						\$ 50.00
City	New Oxford	State	Zip Code (Plus 4)	11	14	2024	
		PA	17350				
Full N	ame of Contributor			мо	DAY	YEAR	
Micha	el and Melissa Shafer			MO	DAT	TEAR	
Mailin	g Address						\$ 250.00
City	Center Valley	State	Zip Code (Plus 4)	11	14	2024	
		PA	18034				
Full N	ame of Contributor	-		МО	DAY	VEAD	
SNH				МО	DAY	YEAR	
Mailin	g Address						\$ 10.00
City	east Berlin	State	Zip Code (Plus 4)	11	14	2024	
		PA	17316				
			•				

PAGE TOTAL

\$ 1,420.00

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

PART C

Contributions Received From Political Committees

Name of Filing Committee or Candidate

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

ECKER, TORREN TAXPAYERS FOR			From:	<u>10/22/2024</u> To:			11/25/2024
				DA	TE		AMOUNT
Full Name of Contributing Commit PA TRUCK PAC	ttee			мо	DAY	YEAR	\$ 500.00
Mailing Address				11	14	2024]
City CAMP HILL	State	Zip Code	e (Plus 4)		-	2024	
	PA	17011-	6409				
Full Name of Contributing Committee PUBLIC ACCOUNTANT PAC					DAY	YEAR	\$ 500.00
Mailing Address				11	14	2024	
City HARRISBURG	State	Zip Code	e (Plus 4)				
	PA	171010	000				
Full Name of Contributing Commit WALMART INC. PAC FOR RESPON		г		мо	DAY	YEAR	
Mailing Address	131BLE GOVERNMEN	I					\$ 600.00
City BENTONVILLE	State	Zip Code	e (Plus 4)	11	14	2024	
S. DEMISITIZEE	AR	72716-	-				
Full Name of Contributing Commit	ttee	·		мо	DAY	YEAR	
PA ASSN OF NURSE ANESTHETIS	STS PAC						\$ 500.00
Mailing Address	<u> </u>	1		11	14	2024	
City WORTHINGTON	State	-	e (Plus 4)				
	ОН	43085-	2259		<u> </u>	<u> </u>	
Full Name of Contributing Commit				мо	DAY	YEAR	
SANOFI US SERVICES INC EMPLO	OYEES PAC						\$ 1,000.00
Mailing Address		1		11	14	2024	
City WASHINGTON	State		e (Plus 4)				
	DC	20004				<u> </u>	<u> </u>

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

PAGE TOTAL \$ 3,100.00

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 or Candidate				Reporting Period						
ECKER, TORREN TAXPAYERS FOR				Fror	m:	10/22/2	<u>024</u> To):	11/2	<u>5/2024</u>
					D	ATE			AMOUN [*]	т
Full Name of Contributor					мо	DAY	YEAR			F00.00
John Lott					1-10	DAI	ILAK	\$		500.00
Mailing Address					11	14	2024			
City Aspers	State	Zip	Code (Plus	4)		14	2027			
	l _{PA}	17	304							
Employer Name Bear Mountain Orcha	rds				Occupat	tion	Preside	nt		
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip C	ode (Plu	s 4)
			Aspers			PA		1730)4	
Full Name of Contributor					МО	DAY	YEAR			F00.00
Ryan Heishman					1.0	5711	,	\$		500.00
Mailing Address	•				11	14	2024	.		
City Carlisle	State	Zip	Code (Plus	4)						
	l _{PA}	17	015							
Employer Name Allen Distribution					Occupat	tion	Preside	nt		
Employer Mailing Address/Principal Place	ce of Business		City			State		Zip C	ode (Plu	s 4)
			Carlisle			PA		1701	.5	
Full Name of Contributor										
Larry Gladfelter					МО	DAY	YEAR	\$		500.00
Mailing Address					11	14	2024			
City New Oxford	State	Zip	Code (Plus	4)] ''	14	2024			
	_{PA}	_{17:}	350							
Employer Name retired					Occupat	tion	retired			
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip C	ode (Plu	s 4)
			New Oxfo	rd		PA		1735	50	
Full Name of Contributor								Т		
Lela Reichart					МО	DAY	YEAR	\$		500.00
Mailing Address							2024	7		
City New Oxford	State	Zip	Code (Plus	4)	11	14	2024	•		
	PA	_{17:}	350							
Employer Name Sterman Masser Inc					Occupat	tion	Vice Pre	esident	t	
Employer Mailing Address/Principal Plac	ce of Business		City			State		Zip C	ode (Plu	s 4)
Sacrament			to	PA			17968			
Sucraine				PAGE TOTAL			OTAL			
Enter Grand Total of Part C on Sche	dule Ι, Detailed Sι	umm	nary Page,	Section	on 3.					- ··· -

2,000.00

\$

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		Report	ing Peri	od			
			From:			To:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	•	•			1			
Futor Count Total of Doub	For Cabadula I Batailad	I Comment Page Co		4			ı	PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	4.			\$	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 Peri	od	
ECKER, TORREN TAXPAYERS FOR	From:	<u>10/22/2024</u> To:	11/25/2024
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	र	
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 Period							
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period						
				Fro	m:		To:			
						DATE			AMOUNT	-
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi _l	p Code(Plus 4)	Descr	ipti	ion of Contribut	ion
Enter Grand Total of Part G on Sch	edule II. In-K	ind	Contributions D	etaile	ed				PAGE TO	TAL
Summary Page, Section 3.					-					0.00

SCHEDULE III **STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate	F	Reporting Period				
ECKER, TORREN TAXPAYERS FOR	F	From	10/22	2/2024	То:	11/25/2024
			DATE			AMOUNT
To Whom Paid		мо	DAY	YEAR		
Mercersbura Printina						

				DATE			AMOUNI		
To Whom Paid				DAY	YEAR				
Mercersburg Printing					ILAK				
Mailing Address				30	2024	\$	3,360.42		
City Mercersburg	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	17236	fundrais	ser mailer					
To Whom Paid				DAY	YEAR				
Mayfair Hotel			МО	DAI	ILAK				
Mailing Address			11	15	2024	\$	1,520.44		
City New York	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	ı			
	NY 10019			travel expenses					
To Whom Paid			мо	DAY	YEAR				
Jonny's Flight			140		ILAK				
Mailing Address			11	5	2024	\$	250.00		
City East Berlin	State	Zip Code (Plus 4)	Descrip						
	PA	17316	Contribution						
To Whom Paid			мо	DAY	YEAR				
JLH Fundraising			140		ILAK				
Mailing Address			10	31	2024	\$	1,662.18		
City Mechanicsburg	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	17050	fundraiser services						
							PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						s s	6 793 04		

					PAGE TOTAL			
Enter Grand Total of Expenditures of	n Page 1, Report C	over Page, Item D.		\$	6,793.04			

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 Period							
ECKER, TORREN TAXPAYERS FOR				From:	<u>10/22/2024</u> To:				11/25/2024	
						DATE			Outstandi Balance o	
Name of Creditor Torren Ecker					МО	DAY	YEAR			
Mailing Address					11	27	2024	4	\$	18,778.00
City New Oxford State Zip				Plus 4)	Description of Debt					
		PA	17350		loan to committee carry overeports				from pre	vious
									PAG	E TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						\$		18,778.00		