Campaign Finance Report

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

Filer Identificat Number :	ion	20240	031			Repo Filed			CANDI	DATE		СОМІ	MITTEE	✓	LOBI	BYIST			
Name of Filing (Committee, C	andida	te or Lo	bbyist:	,	WALSH	H FO	R F	PA - PAC										
Street Address:	8 POST	OFFIC	E ROAD																
City:	SWEET \	VALLEY	(State: PA Zip						Zip Code: 18656					
TYPE OF REPORT	6TH TUESDA			2ND FRIDA PRIMARY	Y PRE-	· 2.		DA IMA		POST-	3.		AMENDN REPORT		Yes	Γ	lo	\checkmark	
(place X to the right of	6TH TUESDA' PRE-ELECTIO			2ND FRIDA ELECTION						POST- 6. X			TERMIN/ REPORT	Yes	٢	lo	\checkmark		
report type)	ANNUAL RE	PORT	7.	Year 2024					G METHO				PAPER		\checkmark	DISK	ETTE		
Name of Office S	L Sought by Ca	ndidate	e:						DATE O	F ELEC	CTIC	N	District Number	Office Code	Par	ty Cod	e Cou Cod		
									мо	DAY	Y	EAR	Code		<u> </u>			-	
									11		5	2024]	(SEE INS	STRUCTIONS FOR CODES)				
Summary of		nd	мо	DAY	YEAR				мо	DAY	Y	EAR	FC	R OFFIC	E USE	ONLY	(
Expenditures	s from:		1	0 22	20)24 ·	ТО		11	2	5	2024							
A. Amount Bro	ught Forward	d From	Last Re	port				\$			1,0	036.27							
B. Total Monet	ary Contribut	tions A	nd Rece	ipts (From	Schee	dule I)		\$		0.00									
C. Total Funds	Available (Si	um Of I	Lines A	and B)				\$			1,0	036.27							
D. Total Expen	ditures (Fron	n Sche	dule III)				\$				597.88							
E. Ending Cash	Balance (Su	btract	Line D F	rom Line (C)			\$			4	38.39							
F. Value Of In-	Kind Contrib	utions	Receive	d (From S	chedul	le II)		\$				0.00							
G. Unpaid Deb	ts And Obliga	ations ((From S	chedule IV)			\$				0.00							
					AFF	IDAV	IT S	SE	CTION										
PART I - If this i	s a Committe	e repo	rt, treas	urer sign	here. I	l f this i	s a (Can	didate re	eport, c	andi	date sig	gn here.						
I swear (or affirm correct and compl		ort, inclu	iding the	attached scl	nedules	filed o	1 рар	oer o	or by elect	ronic me	dium	, are to f	the best o	f my knov	vledge	and be	lief , t	rue	
Sworn to and subs	scribed before ı day of	me this		20							9	Signature	e of Perso	n Submitt	ing Rep	ort		_	
	s	ignatur	e				_						Prin	ted Name				_	
My Commission E	xpires						_						Ema	il					
	мо		DA	Y	YR					Are	a Coo	le	Daytin	e Teleph	one Nu	mber			
Part II- If this is	a report of a	a candi	idate's a	uthorized	Comm	nittee,	Cand	dida	ate shall	sign he	re.								
I swear (or affirm) No 320) as amend	ed.		y knowle	dge and beli	ef this	politica	l cor	nmi	ttee has n	ot violat	ed ar	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P	.L. 133	33,	
Sworn to and subso	cribed before m day of	ne this		20								s	ignature (of Candida	ite				
[_]													Printe	ed Name				-	
My Commission Exp		ature					_						Ema	il				-	
	M	10	DA	Y	YR		_			Area (Code		D	aytime Te	elephon	e Nur	ber	-	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	of Filing Committee or Candidate Reporting Period							
WALSH FOR PA - PAC	From:	<u>10/22/202</u>	2 <u>4</u> To:	<u>11/25/2024</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)	\$	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			\$	0.00				

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.

Name of Filing Committee or Candidat	Name of Filing Committee or Candidate				Period				
					From: To:				
		·			DATE			AMOUNT	
Full Name of Contributing Committee			м	10	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	•)						
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	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)									
Name of Filing Committee or Candida	te		Rep	orting P	eriod				
			Fror	m:		Тс):		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address	_	_					\$	0.00	
City	State	Zip Code (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 0.00									

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					
						То:		
				DA	TE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	age, Sectio	n 3.			\$	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				orting Pe	riod				
Fro						Т	To:		
				D	ATE		АМ	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupat	tion				
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section							P#	AGE 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 Candidat	Name of Filing Committee or Candidate			ing Peric	d			
						То:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Plus 4)					
Receipt Description						•		
		_	.				PAGE TO	TAL
Enter Grand Total of Part E on Sche	Section	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 Perio	od	
WALSH FOR PA - PAC	From:	<u>10/22/2024</u> To:	<u>11/25/2024</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate Rep			Period	·			
F						То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,		PAGE TOTA	AL.
						\$		0.00

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Period		
						То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor		•		Occupa	tion		•
Employer Mailing Address/Principal Plac	e of Business C	lity	State	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	Contributions D	etaile	d			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
WALSH FOR PA - PAC	WALSH FOR PA - PAC					То:	<u>11/25/2024</u>
				AMOUNT			
To Whom Paid			мо	DAY	YEAR		
SAM'S CLUB							
Mailing Address	11	4	2024	\$	97.88		
City WILKE BARRE State Zip Code (Plus 4)				tion of Exp	enditure		
	PA	18702	TRUNK	OR TREAT	CANDIES	S/SET-UI	2
To Whom Paid			мо	DAY	YEAR		
IREM GOLF ASSOCIATION			MO	DAT	TLAN		
Mailing Address 70 RIDGWAY DRIVE			11	10	2024	\$	500.00
City DALLAS	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
PA 18612				AISER DOV 125	VNPAYME	INT GOLI	F TOURNAMENT
							PAGE TOTAL
Enter Grand Total of Expenditures of	on Page 1, Report C	over Page, Item I	D .			\$	597.88