

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 :		20170358		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: COMMONWEALTH LEADERS 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.	30 DAY POST-ELECTION	6. X	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			
		10	22	2024		11	25	2024				
A. Amount Brought Forward From Last Report						\$ 696,776.11						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 75,318.45						
C. Total Funds Available (Sum Of Lines A and B)						\$ 772,094.56						
D. Total Expenditures (From Schedule III)						\$ 368,211.64						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 403,882.92						
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 LEADERS FUND	From: <u>10/22/2024</u> To: <u>11/25/2024</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 120.00

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)	\$ 950.00
TOTAL for the Reporting Period (2)	\$ 950.00

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)	\$ 74,000.00
TOTAL for the Reporting Period (3)	\$ 74,000.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 248.45

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.)	\$ 75,318.45
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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 Candidate	Reporting Period
	From: To:

DATE			AMOUNT
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Full Name of Contributing Committee			MO	DAY	YEAR	\$0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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

PAGE TOTAL
\$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 Candidate	Reporting Period
COMMONWEALTH LEADERS FUND	From: <u>10/22/2024</u> To: <u>11/25/2024</u>

				DATE			AMOUNT
Full Name of Contributor THOMAS HOOPES				MO 10	DAY 28	YEAR 2024	\$ 100.00
Mailing Address 627 WESTBOURNE RD							
City WEST CHESTER	State PA	Zip Code (Plus 4) 19382					
Full Name of Contributor CHARLES ECKERT				MO 10	DAY 29	YEAR 2024	\$ 150.00
Mailing Address 118 BRYAN DR							
City GREENBURG	State PA	Zip Code (Plus 4) 15601					
Full Name of Contributor JACOB DAILEY				MO 10	DAY 24	YEAR 2024	\$ 250.00
Mailing Address 397 NESTER DR							
City POTTSTOWN	State PA	Zip Code (Plus 4) 19464					
Full Name of Contributor TIMOTHY HOUCK				MO 11	DAY 18	YEAR 2024	\$ 100.00
Mailing Address 623 FRANCIS DR							
City HARRISBURG	State PA	Zip Code (Plus 4) 17109					
Full Name of Contributor HOWARD GREGG III				MO 11	DAY 19	YEAR 2024	\$ 100.00
Mailing Address 127 W OUTER DR							
City STATE COLLEGE	State PA	Zip Code (Plus 4) 16801					
Full Name of Contributor REBECCA BICKEL				MO 11	DAY 25	YEAR 2024	\$ 250.00
Mailing Address 1505 GRAND CYPRESS LN							
City PRESTO	State PA	Zip Code (Plus 4) 15142					

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

PAGE TOTAL

\$ 950.00

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	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$	0.00
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 COMMONWEALTH LEADERS FUND	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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				DATE	AMOUNT
Full Name of Contributor JOHN OLIVER				MO	DAY
Mailing Address 720 OLIVER BLDG 555 SMITHFIELD ST				11	1
City PITTSBURGH	State PA	Zip Code (Plus 4) 15222		2024	\$ 5,000.00
Employer Name RETIRED				Occupation	
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)	
Full Name of Contributor PATRICK GALLAGHER				MO	DAY
Mailing Address 19 OAK KNOLL				11	15
City SEWICKLEY HIGHTS	State PA	Zip Code (Plus 4) 15143		2024	\$ 1,000.00
Employer Name PGT TRUCKING				Occupation FOUNDER AND CEO	
Employer Mailing Address/Principal Place of Business 4200 INDUSTRIAL BOULEVARD		City ALIQUIPPA	State PA	Zip Code (Plus 4) 15001	
Full Name of Contributor THOMAS PETERFFY				MO	DAY
Mailing Address 1255 S OCEAN BLVD				10	28
City PALM BEACH	State FL	Zip Code (Plus 4) 33480		2024	\$ 50,000.00
Employer Name RETIRED				Occupation	
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)	
Full Name of Contributor NICK PANDELIDIS				MO	DAY
Mailing Address 18 ASCOT DR				11	1
City SHREWSBURY	State PA	Zip Code (Plus 4) 19361		2024	\$ 1,000.00
Employer Name RETIRED				Occupation RETIRED	
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)	

Full Name of Contributor PAUL SILVIS				MO	DAY	YEAR	\$ 2,500.00
Mailing Address 600 SILLTOP LANE				10	28	2024	
City PORT MATILDA	State PA	Zip Code (Plus 4) 16870					
Employer Name SIKOTEK				Occupation FOUNDER			
Employer Mailing Address/Principal Place of Business 225 PENNTECH DR			City BELLEFONTE		State PA		Zip Code (Plus 4) 16823

Full Name of Contributor PAIGE WINGERT				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 605 DUBS CHURCH RD				10	28	2024	
City HANOVER	State PA	Zip Code (Plus 4) 17331					
Employer Name LS BRAND				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business 300 FAME AVE			City HANOVER		State PA		Zip Code (Plus 4) 17331

Full Name of Contributor RYAN MELLINGER				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 4433 AUGUSTA DR				10	28	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17112					
Employer Name PRIME TRANSFER				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business 1525 OREGON PIKE			City LANCASTER		State PA		Zip Code (Plus 4) 17601

Full Name of Contributor DAVID CRANSTON				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 361 COBBLESTONE CIRCLE				11	1	2024	
City MC KEES ROCKS	State PA	Zip Code (Plus 4) 15136					
Employer Name CRANSTON MATERIAL HANDLING EQUIPMENT CORP				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business 190 BILMAR DR SUITE 300			City PITTSBURGH		State PA		Zip Code (Plus 4) 15205

Full Name of Contributor NATE BENEFIELD				MO	DAY	YEAR	\$ 2,500.00
Mailing Address 95 KENSINGTON DR				10	28	2024	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011					
Employer Name COMMONWEALTH FOUNDATION				Occupation CPO			
Employer Mailing Address/Principal Place of Business 223 STATE STREET			City HARRISBURG		State PA		Zip Code (Plus 4) 17101

Full Name of Contributor MATT BROUILLETTE				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 5 PLUM STREET				10	28	2024	
City ANNVILLE	State PA	Zip Code (Plus 4) 17003					
Employer Name COMMONWEALTH PARTNERS				Occupation PRESIDENT & CEO			
Employer Mailing Address/Principal Place of Business 420 N 3RD STREET			City HARRISBURG		State PA		Zip Code (Plus 4) 17101

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

PAGE TOTAL

\$ 74,000.00

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 LEADERS FUND	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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				DATE		AMOUNT	
Full Name				MO	DAY	YEAR	\$248.45
FIRST NATIONAL BANK OF PA							
Mailing Address110 N 2ND STREET							
CityHARRISBURG		StatePA	Zip Code (Plus 4)17101				
Receipt Description							

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

PAGE TOTAL
\$ 248.45

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 LEADERS FUND		From: <u>10/22/2024</u> To: <u>11/25/2024</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 LEADERS FUND	From <u>10/22/2024</u> To: <u>11/25/2024</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
CAMBRIA COUNTY REPUBLICAN COMMITTEE				
Mailing Address 1222 SCALP AVE	10	29	2024	\$ 5,000.00
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15904	Description of Expenditure CONTRIBUTION	
To Whom Paid	MO	DAY	YEAR	
DAVE SUNDAY FOR ATTORNEY GENERAL				
Mailing Address 210 KELKER STREET	10	31	2024	\$ 150,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17102	Description of Expenditure CONTRIBUTION	
To Whom Paid	MO	DAY	YEAR	
CLEARWORD				
Mailing Address 20130 LAKEVIEW CENTER PLAZA	11	12	2024	\$ 6,310.00
City ASHBURN	State VA	Zip Code (Plus 4) 20147	Description of Expenditure DIRECT MAIL	
To Whom Paid	MO	DAY	YEAR	
SPECIALTY DATA SOLUTIONS				
Mailing Address 114 W 2ND STREET	11	18	2024	\$ 725.00
City FREDERICK	State MD	Zip Code (Plus 4) 21701	Description of Expenditure DIRECT MAIL	
To Whom Paid	MO	DAY	YEAR	
DEBEE CLARK				
Mailing Address PO BOX 54949	11	2	2024	\$ 2,000.00
City OKLAHOMA CITY	State OK	Zip Code (Plus 4) 73154	Description of Expenditure LEGAL FEES	
To Whom Paid	MO	DAY	YEAR	
COMMONWEALTH ENTREPRENEURS, LLC				
Mailing Address 420 N 3RD STREET	11	5	2024	\$ 3,642.92
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure RENT	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL \$ 167,677.92

