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 2016 | 0003 | | | | port ed B | | CANDI | DATE COMMITTEE V LOBBY | | | | | BYIST | | | |
|-------------------------------------------|---------------------------------|-------------|------------------------|--------|-------|--------------|----------------|-------------|------------------------|--------|------------|--------------------|----------------|----------|-----------|----------|----------|
| Name of Filing C | Committee, Candid | ate or L | obbyist: | | KEE | EFER | WETZ | ZEL, DAV | /N COI | ММІТ | TEE FR | IENDS (|)F | | | | |
| Street Address: | 150 ORE BAN | K ROAD |) | | | | | | | | | | | | | | |
| City: | DILLSBURG | | | | | | | State: | PA | | | Zip Cod | le: 17 | 7019-9 | 334 | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | | | | | 30 DA PRIMA | | POST- 3. | | | AMENDM REPORT? | | Yes | No | | |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. X | 2ND FRIDAY ELECTION | PRE | - | 5. | 30 DA ELECT | | POST- | 6. | | TERMINA REPORT? | | Yes | No | | \ |
| report type) | ANNUAL REPORT | 7. | Year 2024 FILING METH | | | | | | | | PAPER | | \checkmark | DISKE | TTE | | |
| Name of Office S | Sought by Candida | te: | | | | | | DATE O | F ELE | СТІО | N | District Number | Office Code | Par | ty Code | Coun | |
| | - , | | | | | | | МО | DAY | YE | AR | 31 | STS | REF | , | 67 | |
| SENATOR IN TH | HE GENERAL ASS | ∃MBLY | | | | | | 11 | | 5 | 2024 | | (SEE IN | STRUCTI | ONS FOR C | ODES) |) |
| Summary of Expenditures | Receipts and | МО | DAY | YEAR | l | | | МО | DAY | YE | AR | FO | R OFFI | CE USE | ONLY | | |
| Expenditures | s trom: | | 5 14 | 2 | 024 | ↓ T | 0 | 9 | : | 16 | 2024 | | | | | | |
| A. Amount Bro | ught Forward Fron | n Last R | eport | | | | \$ | | | 110,7 | '02.44 | | | | | | |
| B. Total Moneta | ary Contributions | And Rec | eipts (From 9 | Sche | dule | e I) | \$ | | | 47,9 | 46.31 | | | | | | |
| C. Total Funds | Available (Sum Of | Lines A | and B) | | | | \$ | | | 158,6 | 48.75 | | | | | | |
| D. Total Expend | ditures (From Sch | edule II | I) | | | | \$ | | | 14,4 | 54.39 | | | | | | |
| E. Ending Cash | Balance (Subtrac | t Line D | From Line C) |) | | | \$ | | 1 | 144,1 | 94.36 | | | | | | |
| F. Value Of In- | Kind Contributions | Receiv | ed (From Sch | hedu | le II | I) | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Obligations | (From S | Schedule IV) | | | | \$ | | | | 0.00 | | | | | | |
| | | | | AFF | ΊD | AVI | ΓSE | CTION | | | | | | | | | |
| | s a Committee rep | • | - | | | | | | • • | | | | | | | | |
| I swear (or affirm) correct and comple |) that this report, inc ete. | uding the | attached sche | edules | file | ed on | paper (| or by elect | ronic m | edium, | , are to t | the best o | f my kno | wledge | and belie | ef , tru | ue. |
| Sworn to and subs | cribed before me this day of | ì | 20 | | | | | | | s | ignature | of Perso | n Submit | ting Rep | oort | | _ |
| | Signatu | re | <u> </u> | | | | - - | | | | | Prin | ted Name | • | | | _ |
| My Commission Ex | kpires | | | | | | | | | | | Ema | il | | | | - |
| | мо | D | AY | YR | | | | | Are | ea Cod | е | Daytim | e Teleph | one Nu | mber | | |
| Part II- If this is | a report of a can | lidate's | authorized C | Comn | nitte | ee, C | andida | ate shall | sign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of r | ny knowle | edge and belief | f this | poli | itical | commi | ittee has n | ot viola | ted an | y provis | ions of the | e act of J | une 3,1 | 937 (P.L | . 1333 | 3, |
| Sworn to and subsc | ribed before me this | | | | | | | | | | s | ignature o | of Candid | ate | | | - |
| | day of | | | | | | - | | | | | Printe | d Name | | | | - |
| | Signature | | | | | | - | | | | | | | | | | _ |
| My Commission Exp | _ | | | | | | | | | | | Ema | il | | | | |
| | МО | D. | AY | YR | | | • | | Area | Code | | Da | aytime T | elephor | e Numb | er | - |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| , - | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------|-----------|-----------|
| Name of Filing Committee or Candidate | Reporting | g Period | | |
| KEEFER WETZEL, DAWN COMMITTEE FRIENDS OF | <u>5/14/202</u> | <u>4</u> To: | 9/16/2024 | |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reporting | g Period | (1) | \$ | 140.00 |
| 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) | \$ | 300.00 | | |
| TOTAL for the Reporting | \$ | 300.00 | | |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 37,500.00 |
| All Other Contributions (Part D) | | | \$ | 10,000.00 |
| TOTAL for the Reporting | g Period | (3) | \$ | 47,500.00 |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) | | | | |
| TOTAL for the Reporting | g Period | (4) | \$ | 6.31 |
| | | | | |
| Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa | | | \$ | 47,946.31 |

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 | | | | | | |
|---------------------------------------|---------|-------------------|------------------|------|------|----|--------|--|--|
| | | F | rom: | | То | : | | | |
| | | • | | DATE | | | AMOUNT | | |
| Full Name of Contributing Co | mmittee | | мо | DAY | YEAR | | | | |
| Mailing Address | | | | | | \$ | 0.00 | | |
| City | State | Zip Code (Plus 4) | | | | | | | |

PAGE TOTAL
0.00

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

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 P | eriod | | |
|------------------------|--------------|--------------------|-------------------|-------------|--------|-----------------|------------------|
| KEEFER WETZ | ZEL, DAWN CO | MMITTEE FRIENDS OF | | From: | 5/14/2 | 2024 T o | 9/16/2024 |
| | | | 1 | | DATE | | AMOUNT |
| Full Name of Co | ntributor | | | МО | DAY | YEAR | |
| Nancy Jo Mack | | | | 1-10 | אמ | ILAK | |
| Mailing Address | 603 Sunse | et Dr | | | | | \$ 100.00 |
| City Dillsburg | J | State | Zip Code (Plus 4) | 9 | 13 | 2024 | |
| | | PA | 17019 | | | | |
| Full Name of Co | ntributor | | | МО | DAY | YEAR | |
| Michael D Callal | nan | | | 1-10 | DA! | ILAK | |
| Mailing Address | 112 Maple | St. | | | | | \$ 50.00 |
| City Dillsburg | J | State | Zip Code (Plus 4) | 8 | 27 | 2024 | |
| | | PA | 17019 | | | | |
| Full Name of Co | ntributor | | | МО | DAY | YEAR | |
| Ann M. Holmes | | | | | | | |
| Mailing Address | 2701 Golf | Dr | | | | | \$ 25.00 |
| City York | | State | Zip Code (Plus 4) | 8 | 27 | 2024 | |
| | | PA | 17408 | | | | |
| Full Name of Co | ntributor | | | МО | DAY | YEAR | |
| Kimberly A Holn | nes | | | 1-10 | DAI | ILAK | |
| Mailing Address | 2701 Golf | Drive | | | | | \$ 25.00 |
| City York | | State | Zip Code (Plus 4) | 8 | 27 | 2024 | |
| | | PA | 17408 | | | | |
| Full Name of Co | ntributor | | | МО | DAY | YEAR | |
| Julia A Hutson | | | | MO | DAT | TEAR | |
| Mailing Address | 450 Clover | r St | | | | | \$ 100.00 |
| City Etters | | State | Zip Code (Plus 4) | 8 | 8 | 2024 | |
| | | PA | 17319 | | | | |
| | | | | | | 1 | |

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

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 | ne of Filing Committee or Candidate Repo | | | | g Period | | | | | |
|-----------------------------------------------------------------|------------------------------------------|----------------|------------|------------|----------|------|------------|---------------|--|--|
| KEEFER WETZEL, DAWN COMMITTEE FR | RIENDS OF | | From: | <u>5/1</u> | .4/2024 | То: | <u>9/1</u> | <u>6/2024</u> | | |
| | | | | DA | TE | | АМС | DUNT | | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | | | |
| KEYSTONE STRATEGIC ADVOCACY LLC | | | | | | | \$ | 500.00 | | |
| Mailing Address | | | | 5 | 14 | 2024 | | | | |
| City | State | Zip Code | e (Plus 4) | | | | | | | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | | | |
| Pennsylvania Bankers Public Affairs Con | nmittee | | | | | | \$ | 500.00 | | |
| Mailing Address 3897 North Front Str | eet | | | 5 | 14 | 2024 | | | | |
| City Harrisburg | State | Zip Code | e (Plus 4) | | | | | | | |
| | PA | 17110 | | | | | | | | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | | | |
| Friends of Kim Ward | | | | | | | \$ | 10,000.00 | | |
| Mailing Address PO box 83 | - | | | 6 | 28 | 2024 | | | | |
| City Harrisburg | State | Zip Code | e (Plus 4) | | | | | | | |
| | PA | 17108 | | | | | | | | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | | | |
| Pennsylvania Restaurant and Loging PA | С | | | 140 | DAI | ILAK | | 500.00 | | |
| Mailing Address 00 State St | | | | 5 | 14 | 2024 |] | | | |
| City harrisburg | State | Zip Code | (Plus 4) | | - | 2024 | | | | |
| | PA | 17101 | | | | | | | | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | | | |
| CHAMBER PAC | | | | | | | \$ | 500.00 | | |
| Mailing Address 1 COMMERCE SQ, 41 | I | ı | | 5 | 14 | 2024 | | | | |
| City HARRISBURG | State | l ⁻ | e (Plus 4) | | | | | | | |
| | PA | 17101-0 | 0000 | | | | | | | |
| Full Name of Contributing Committee PENNSYLVANIA PROSPERITY PAC | | | | МО | DAY | YEAR | \$ | 500.00 | | |
| Mailing Address PO BOX 1471 | | | | 5 | 14 | 2024 | | 300.00 | | |
| City CAMP HILL | State | Zip Code | (Plus 4) | | 1 14 | 2024 | | | | |
| | PA | 17001 | | | | | | | | |

| | | | | | | 17132 0 |
|--------------------------------------------------------------------|--------------------|----------------------------------------|----|-----|------|--------------------|
| Full Name of Contributing Committee the Pennsylvania Insurance PAC | | | МО | DAY | YEAR | £ 500.00 |
| Mailing Address 409 North Second | Street | | 5 | 1.4 | 2024 | \$ 500.00 |
| City Harrisburg | State | Zip Code (Plus 4) | 3 | 14 | 2024 | |
| | PA | 17101 | | | | |
| Full Name of Contributing Committee BIKERS PAC (BIKEPAC) | | | МО | DAY | YEAR | \$ 1,500.00 |
| Mailing Address P O BOX 564 | | | 5 | 14 | 2024 | 1,300.00 |
| City MECHANICSBURG | State | Zip Code (Plus 4) |] | - | 202 | |
| | PA | 17055-0000 | | | | |
| Full Name of Contributing Committee Better Pennsylvania PAC | | | МО | DAY | YEAR | \$ 500.00 |
| Mailing Address 121 State Street | | | 5 | 14 | 2024 | |
| City harrisburg | State | Zip Code (Plus 4) | | | | |
| | PA | 17101 | | | | |
| Full Name of Contributing Committee HIGHMARK PAC OF HIGHMARK INC | | | МО | DAY | YEAR | \$ 500.00 |
| Mailing Address 1800 CENTER ST | | | 5 | 14 | 2024 | |
| City CAMP HILL | State PA | Zip Code (Plus 4) 17089-0000 | | | | |
| Full Name of Contributing Committee Pennsylvania Realtors PAC | | | мо | DAY | YEAR | \$ 2,500.00 |
| Mailing Address 500 N 12th Street | | | 9 | 13 | 2024 | _, |
| City Lemoyne | State | Zip Code (Plus 4) |] | | | |
| | PA | 17043 | | | | |
| Full Name of Contributing Committee SHIPLEY ENERGY PAC | | | МО | DAY | YEAR | \$ 1,000.00 |
| Mailing Address 415 NORWAY ST | | | 9 | 13 | 2024 | |
| City YORK | State PA | Zip Code (Plus 4) 17043 | | | | |
| Full Name of Contributing Committee Four Kids PAC | | | мо | DAY | YEAR | \$ 15,000.00 |
| Mailing Address 119 S 34th St | | | 8 | 27 | 2024 | 15,000.00 |
| City Indiana | State | Zip Code (Plus 4) |] | | 202 | |
| | PA | 15701 | | | | |
| Full Name of Contributing Committee PAA-PAC | | | мо | DAY | YEAR | . |
| Mailing Address 1925 N Front Stre | et | | _ | | 2024 | \$ 2,000.00 |
| City Harrisburg | State | Zip Code (Plus 4) | 5 | 14 | 2024 | |
| | PA | 17105 | | | | |

| Full Name of Contributing Committee | Full Name of Contributing Committee | | | | YEAR | |
|-------------------------------------|-------------------------------------|-------------------|----|-----|------|------------------|
| BRAVO PAC | | | МО | DAY | | \$ 500.00 |
| Mailing Address 125 STATE ST | | | 5 | 14 | 2024 | |
| City HARRISBURG | State | Zip Code (Plus 4) |] | - | | |
| | PA | 171010000 | | | | |
| Full Name of Contributing Committee | | | мо | DAY | YEAR | |
| NFIB Pennsylvania PAC | | | | | | \$ 500.00 |
| Mailing Address 555 12th Street | | | 7 | 24 | 2024 | |
| City Washington | State | Zip Code (Plus 4) | | | | |
| | DC | 20004 | | | | |
| Full Name of Contributing Committee | | | мо | DAY | YEAR | |
| Certified Public Accountants PAC | | | | | | \$ 500.00 |
| Mailing Address 932 Hungerford Dr | | | 5 | 14 | 2024 | |
| City Rockville | State | Zip Code (Plus 4) |] | - ' | | |
| | MD | 20850 | | | | |

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

PAGE TOTAL\$ 37,500.00

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 | idate | | | | porting Period | | | | | | |
|----------------------------------------------|-------|----------------|---------------------------------|----|----------------|---------|-----------|-----------|--|--|--|
| EEFER WETZEL, DAWN COMMITTEE FRIENDS OF From | | | n: <u>5/14/2024</u> To : | | | | 9/16/2024 | | | | |
| | | | | D/ | ATE | | | AMOUNT | | | |
| Full Name of Contributor | | | | мо | DAY | YEAR | | 10,000,00 | | | |
| Michael P Kennedy | | | | | 57. | 1 L/tik | \$ | 10,000.00 | | | |
| Mailing Address 163 Duncan Loop | | | | 5 | 14 | 2024 | | | | | |
| City Boiling Springs | State | Zip Code (Plus | 4) | 3 | 17 | 2024 | | | | | |
| | PA | 17007 | | | | | | | | | |

City

Lebanon

Occupation

State

PΑ

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

Employer Name Whole Plants Health, LLC

113 N 8th Ave

Employer Mailing Address/Principal Place of Business

| PAGE TOTAL |
|-----------------|
| \$ 10,000.00 |

Zip Code (Plus 4)

17046

Controller

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 Perio | od | | | |
|---------------------------------------|---------------------|------------|---------|-----------|----------|---------------|------------------|------------|
| KEEFER WETZEL, DAWN COMMITTEE FI | RIENDS OF | | From: | | 5/14/202 | <u>24</u> To: | | 9/16/2024 |
| | | | | D | ATE | | | AMOUNT |
| Full Name | | | | мо | DAY | YEAR | T | 1.50 |
| ACNB Bank | | | | 140 | DAT | ILAK | \$ | 1.59 |
| Mailing Address 675 Old Harrisburg ro | pad | | | 5 | 31 | 2024 | ↓ | |
| City Gettysburg | State | Zip Code (| Plus 4) | | | | | |
| | PA | 17325 | | | | | | |
| Receipt Description Interest | • | • | | | | • | | |
| Full Name | | | | мо | DAY | YEAR | \prod_{α} | 1.54 |
| ACNB Bank | | | | МО | DAT | TEAR | \$ | 1.54 |
| Mailing Address 675 Old Harrisburg R | oad | | | 6 | 28 | 2024 | | |
| City Gettysburg | State | Zip Code (| Plus 4) | | | | | |
| | PA | 17325 | | | | | | |
| Receipt Description Interest | ! | ! | | | | | | |
| Full Name | | | | | | \ | 1. | |
| ACNB Bank | | | | МО | DAY | YEAR | \$ | 1.59 |
| Mailing Address 675 Old Harrisburg R | oad | | | 7 | 31 | 2024 | | |
| City Gettysburg | State | Zip Code (| Plus 4) | , | | | | |
| | PA | 17325 | | | | | | |
| Receipt Description Interest | ! | ! | | | | | | |
| Full Name | | | | | | | 1. | |
| ACNB Bank | | | | МО | DAY | YEAR | \$ | 1.59 |
| Mailing Address 675 Old Harrisburg R | oad | | | 8 | 30 | 2024 | | |
| City Gettysburg | State | Zip Code (| Plus 4) | | | 202 | | |
| | PA | 17325 | | | | | | |
| Receipt Description Interest | | <u> </u> | | | | | | |
| | | | | | | ſ | | PAGE TOTAL |
| Enter Grand Total of Part E on Schedu | le I, Detailed Summ | nary Page, | Section | 4. | | | . | |
| | | | | | | I | \$ | 6.31 |

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 | İ | |
|----------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------------------------|-----------|
| KEEFER WETZEL, DAWN COMMITTEE FRIENDS OF | From: | <u>5/14/2024</u> To: | 9/16/2024 |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | ER CONTRIBUTOR | | |
| 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 | ame 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 | | | | Re | porting | Period | | | | |
|----------------------------------------|----------------|-------|------------------|--------|-------------------|----------------|-------|------|-----------------|-------|
| | | | | Fro | m: | | To: | | | |
| | | | | | | DATE | | | AMOUN | IT |
| 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 Contribu | ution |
| Enter Grand Total of Part G on Sch | edule II. In-K | ind (| Contributions D | etaile | ed | | | | PAGE T | OTAL |
| Summary Page, Section 3. | | | | | - | | | | | 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting P | eriod | | |
|------------------------------------------|-------------|-----------|-----|-----------|
| KEEFER WETZEL, DAWN COMMITTEE FRIENDS OF | From | 5/14/2024 | То: | 9/16/2024 |

| <u> </u> | | | | DATE | | AMOUNT | | | | |
|-------------------------------------------------------------------------------------------------|---------------|-------------------|-------------------------------|---------------------------------|-------------------------------------|--------|----------------|--|--|--|
| To Whom Paid | | | | l DATE | | | AHOONI | | | |
| Nicks 114 Cafe | | | МО | DAY | YEAR | | | | | |
| Mailing Address 114 Bridge St | | | 9 | 16 | 2024 | \$ | 39.93 | | | |
| City New Cumberland | State | Zip Code (Plus 4) | Descrip | Description of Expenditure | | | | | | |
| | PA | 17070 | Meals and Entertainment | | | | | | | |
| To Whom Paid | | | | DAY | YEAR | | | | | |
| Sheetz | | | МО | | ILAK | | | | | |
| Mailing Address 493 N US Route | e 15 | | 9 16 2024 \$ | | | | 53.17 | | | |
| City Dillsburg State Zip Code (Plus 4) | | | Descrip | tion of Exp | enditure | | | | | |
| | PA | 17019 | Fuel | | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | |
| Sheetz | | | | | | | | | | |
| Mailing Address 493 N US Route | e 15 | | 7 | 22 | 2024 | \$ | 42.88 | | | |
| City Dillsburg State Zip Code (Plus 4) | | | Descrip | tion of Exp | enditure | | | | | |
| | PA | 17019 | Fuel | | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | |
| Panera Bread | | | | | | | | | | |
| Mailing Address 1500 Camp Hill | Mall | | 9 | 12 | 2024 | \$ | 25.82 | | | |
| City Camp Hill | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | | | Meals and Entertainment | | | | | | | |
| | PA | 17011 | Meals a | nd Enterta | inment | | | | | |
| To Whom Paid | PA | 17011 | | nd Enterta | | | | | | |
| To Whom Paid Brew Crumberlands Best | PA | 17011 | Meals a | | YEAR | | | | | |
| | | 17011 | | | | \$ | 13.10 | | | |
| Brew Crumberlands Best | | 2ip Code (Plus 4) | мо 9 | DAY | YEAR 2024 | \$ | 13.10 | | | |
| Brew Crumberlands Best Mailing Address 1903 Bridge St | reet | | MO 9 Descrip | DAY 11 | YEAR 2024 enditure | \$ | 13.10 | | | |
| Brew Crumberlands Best Mailing Address 1903 Bridge St | reet | Zip Code (Plus 4) | MO 9 Descrip | DAY 11 tion of Exp nd Enterta | YEAR 2024 enditure inment | \$ | 13.10 | | | |
| Brew Crumberlands Best Mailing Address 1903 Bridge St City New Cumberland | reet | Zip Code (Plus 4) | MO 9 Descrip | DAY 11 tion of Exp | YEAR 2024 enditure | \$ | | | | |
| Brew Crumberlands Best Mailing Address 1903 Bridge St City New Cumberland To Whom Paid | reet State PA | Zip Code (Plus 4) | MO 9 Descrip | DAY 11 tion of Exp nd Enterta | YEAR 2024 enditure inment | \$ | 13.10 31.67 | | | |
| Brew Crumberlands Best Mailing Address 1903 Bridge St City New Cumberland To Whom Paid Uber | reet State PA | Zip Code (Plus 4) | MO 9 Descrip Meals a MO 9 | DAY 11 tion of Exp nd Enterta | YEAR 2024 enditure inment YEAR 2024 | | | | | |

| | | | | | | | | (OL 14 | | |
|-------------------------------------|---------------------|-------|-------------------|----------------------------|-------------|----------|----|----------|--|--|
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| Over the Count | er | | | | | | | | | |
| Mailing Address | 221 East Las Colina | | | 9 | 9 | 2024 | \$ | 24.84 | | |
| City Dallas | | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | |
| | | TX | 75039 | Meals a | nd Enterta | inment | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| Limobird | | | | | | | | | | |
| Mailing Address | 2633 McKinney Aver | nue | | 9 | 6 | 2024 | \$ | 68.50 | | |
| City Dallas | | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| TX 75204 | | | Travel Expense | | | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| Limobird | | | | 110 | | 1 Z/IIX | | | | |
| Mailing Address | 2633 McKinney Aver | nue | | 9 | 6 | 2024 | \$ | 625.00 | | |
| City Dallas State Zip Code (Plus 4) | | | | Descript | tion of Exp | enditure | | | | |
| | | TX | 75204 | Travel E | xpense | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| JC Consulting | | | | 110 | | 1 Z/ux | | | | |
| Mailing Address | 1735 Market Street | | | 9 | 4 | 2024 | \$ | 250.00 | | |
| City Philadel | phia | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | |
| | | PA | 19103 | Consulti | ing | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| JC Consulting | | | | | | | | | | |
| Mailing Address | 1735 Market Street | | | 7 | 30 | 2024 | \$ | 1,250.00 | | |
| City Philadel | phia | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | | PA | 19103 | Consulti | ing | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| JC Consulting | | | | | | | | | | |
| Mailing Address | 1735 Market Street | | | 8 | 22 | 2024 | \$ | 500.00 | | |
| City Philadel | phia | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | |
| | | PA | 19103 | Consulti | ing | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| UPMC Memoria | l | | | | | | | | | |
| Mailing Address | 1701 Innovation Dri | ve | | 9 | 4 | 2024 | \$ | 9.41 | | |
| City York | | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | |
| | | PA | 17408 | Meeting | | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| Vesta | | | | | | | | | | |
| Mailing Address | 5400 Meadows Road | | | 9 | 4 | 2024 | \$ | 52.10 | | |
| City Lake Os | wego | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | |
| | | OR | 97035 | Phone | | | | | | |
| | | | | | | | | | | |

| | | | | | | | | | -OL 13 | | | |
|------------------------------------------|-----------|---------------------|---------|-------------------|----------------------------|-------------|----------|----|--------|--|--|--|
| To Wh | om Paid | | | | МО | DAY | YEAR | | | | | |
| Vesta | | | | | | | | | | | | |
| Mailin | g Address | 5400 Meadows Road | I | | 8 | 5 | 2024 | \$ | 52.03 | | | |
| City | Lake Oswe | ego | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | | | OR | 97035 | Phone | | | | | | | |
| To Wh | om Paid | | | | МО | DAY | YEAR | | | | | |
| Vesta | | | | | | | | | | | | |
| Mailin | g Address | 5400 Meadows Road | I | | 7 | 8 | 2024 | \$ | 52.03 | | | |
| City | Lake Oswe | ego | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| OR 97035 | | | | Phone | | | | | | | | |
| To Whom Paid | | | | МО | DAY | YEAR | | | | | | |
| Vesta | | | | | МО | DAI | ILAK | | | | | |
| Mailin | g Address | 5400 Meadows Road | I | | 6 | 6 | 2024 | \$ | 52.03 | | | |
| City Lake Oswego State Zip Code (Plus 4) | | | | Descript | tion of Exp | enditure | | | | | | |
| | | | OR | 97035 | Phone | | | | | | | |
| To Wh | om Paid | | | | мо | DAY | YEAR | | | | | |
| BJS F | uel | | | | 1-10 | J | 12/110 | | | | | |
| Mailin | g Address | 3805 Hartzdale Driv | е | | 8 | 30 | 2024 | \$ | 74.57 | | | |
| City | Camp Hill | | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | | |
| | | | PA | 17011 | Fuel | | | | | | | |
| To Wh | om Paid | | | | МО | DAY | YEAR | | | | | |
| BJS F | uel | | | | 1.0 | | | | | | | |
| Mailin | g Address | 3805 Hartzdale Driv | е | | 8 | 23 | 2024 | \$ | 75.86 | | | |
| City | Camp Hill | | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | | | PA | 17011 | Fuel | | | | | | | |
| To Wh | om Paid | | | | МО | DAY | YEAR | | | | | |
| BJS F | uel | | | | | | | | | | | |
| Mailin | g Address | 3805 Hartzdale Driv | e | | 6 | 21 | 2024 | \$ | 67.34 | | | |
| City | Camp Hill | | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | | |
| | | | PA | 17011 | Fuel | | | | | | | |
| To Wh | om Paid | | | | МО | DAY | YEAR | | | | | |
| BJS F | uel | | | | | | | | | | | |
| Mailin | g Address | 3805 Hartzdale Driv | e | | 8 | 12 | 2024 | \$ | 77.30 | | | |
| City | Camp Hill | | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | | |
| | | | PA | 17011 | Fuel | | | | | | | |
| To Wh | om Paid | | | | МО | DAY | YEAR | | | | | |
| BJS Fuel | | | | | | | | | | | | |
| Mailin | g Address | 3805 Hartzdale Driv | <u></u> | | 5 | 21 | 2024 | \$ | 84.15 | | | |
| City | Camp Hill | | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | | | | |
| | | | PA | 17011 | Fuel | | | | | | | |
| | | | | | | | | | | | | |

| To Whom Paid | | | | мо | DAY | YEAR | | | | |
|----------------------------------------|-----------------------|-------|-------------------|----------------------------|-------------|----------|----|--------|--|--|
| BJS Fuel | | | | | | | | | | |
| Mailing Addres | s 3805 Hartzdale Driv | e | | 7 | 1 | 2024 | \$ | 81.44 | | |
| City Camp I | Hill | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | | PA | 17011 | Fuel | | | | | | |
| To Whom Paid | | | | МО | DAY | YEAR | | | | |
| BJS Fuel | | | | | | | | | | |
| Mailing Addres | s 3805 Hartzdale Driv | e | | 6 | 14 | 2024 | \$ | 83.71 | | |
| City Camp I | Hill | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | | PA | 17011 | Fuel | | | | | | |
| To Whom Paid | | | | МО | DAY | YEAR | | | | |
| The Mancheste | er | | | | | | | | | |
| Mailing Addres | s 2800 Primrose Lane | | | 8 | 28 | 2024 | \$ | 15.64 | | |
| City York State Zip Code (Plus 4) | | | | Descrip | tion of Exp | enditure | | | | |
| | | PA | 17404 | Meals a | nd Enterta | inment | | | | |
| To Whom Paid | | | | МО | DAY | YEAR | | | | |
| Dunkin | | | | | | | | | | |
| Mailing Addres | s 406 North Route 15 | | | 8 | 26 | 2024 | \$ | 47.04 | | |
| City Dillsburg State Zip Code (Plus 4) | | | | Descrip | tion of Exp | enditure | | | | |
| | | PA | 17019 | Meals a | nd Enterta | inment | | | | |
| To Whom Paid | | | | МО | DAY | YEAR | | | | |
| Taste The Pizz | a | | | | | | | | | |
| Mailing Addres | s 901 State Street | | | 8 | 22 | 2024 | \$ | 76.77 | | |
| City Lemoy | ne | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | | PA | 17043 | Meals a | nd Enterta | inment | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| Taste The Pizz | a | | | | | | | | | |
| Mailing Addres | s 901 State Street | | | 7 | 3 | 2024 | \$ | 73.22 | | |
| City Lemoyi | ne | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | | PA | 17043 | Meals a | nd Enterta | inment | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| Gadget Lab | | | | | | | | | | |
| Mailing Addres | s 107 E Main Street | | | 8 | 19 | 2024 | \$ | 211.98 | | |
| City Mechar | nicsburg | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| PA 17055 | | | | Electron | ics Repair | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | |
| Gadget Lab | | | | | | | | | | |
| Mailing Addres | s 107 E Main Street | | | 8 | 14 | 2024 | \$ | 106.00 | | |
| City Mechar | nicsburg | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | | PA | 17055 | Electronics Repair | | | | | | |
| | | | | | | | | | | |

| To Wh | om Paid | | | мо | DAY | YEAR | | | | | |
|----------------------------------|-------------------------------------|--------|-------------------|----------------------------|-------------|----------|----|----------|--|--|--|
| Rutters | | | | | | | | | | | |
| Mailing | g Address 2215 Old Trail rd | | | 8 | 16 | 2024 | \$ | 85.05 | | | |
| City | Etters | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | |
| | | PA | 17319 | Fuel | | | | | | | |
| To Wh | om Paid | | | мо | DAY | YEAR | | | | | |
| Rutter | 'S | | | | | | | | | | |
| Mailing | g Address 2215 Old Trail rd | | | 7 | 29 | 2024 | \$ | 89.83 | | | |
| City | Etters | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | | PA | 17319 | Fuel | | | | | | | |
| To Wh | om Paid | | | мо | DAY | YEAR | | | | | |
| Cumb | erland County Republican Commi | ttee | | 1-10 | DAI | TEAK | | | | | |
| Mailing Address 212 N Hanover St | | | | 8 | 13 | 2024 | \$ | 1,000.00 | | | |
| City | Carlisle | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | |
| | | PA | 17013 | Contribu | ution | | | | | | |
| To Wh | om Paid | | | МО | DAY | YEAR | | | | | |
| 1360 L | | | | | | | | | | | |
| Mailing | g Address 2300 Clarendon Blv | d • | | 8 | 5 | 2024 | \$ | 2,400.00 | | | |
| City | Arlington | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | |
| | | VA | 22201 | Softwar | е | | | | | | |
| To Wh | om Paid | | | МО | DAY | YEAR | | | | | |
| Snapp | ers Sea Grill | | | | | | | | | | |
| Mailing | g Address 5895 Gulf Blvd | | | 7 | 31 | 2024 | \$ | 244.14 | | | |
| City | St. Pete Beach | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | | FL | 33706 | Meals and Entertainment | | | | | | | |
| To Wh | om Paid | | | мо | DAY | YEAR | | | | | |
| North | ern Girls Soccer Bosters | | | | | | | | | | |
| Mailing | g Address 650 S Baltimore St | | | 7 | 29 | 2024 | \$ | 425.00 | | | |
| City | Dillsburg | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | |
| | | PA | 17019 | Contribu | ution | | | | | | |
| | om Paid | | | МО | DAY | YEAR | | | | | |
| | nge & customs | | | | | | _ | 240.50 | | | |
| Mailing | g Address 122 E Bay Street | | | 7 | 29 | 2024 | \$ | 218.50 | | | |
| City | Carlestown | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | |
| SC 29401 | | | | Meeting | | | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | | |
| Highs Convivence Store | | | | | | | | | | | |
| Mailing | g Address 4046 Ocean Gt | | | 7 | 19 | 2024 | \$ | 80.58 | | | |
| City | Trappe | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | |
| | | MD | 21673 | Fuel | | | | | | | |
| | | | | | | | | | | | |

| To Whom Paid | | | | мо | DAY | YEAR | | | | | |
|---------------------------------------|------------------|-------|-------------------|----------------------------|-------------|----------|-----------|----------|--|--|--|
| JFH Strategies | LLC | | | | | | | | | | |
| Mailing Address | 1 Strategies | | | 7 | 16 | 2024 | \$ | 1,075.00 | | | |
| City Windbe | r | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | | PA | 15963 | Consult | ing | | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | | |
| Delta | | | | | | | | | | | |
| Mailing Address | 1030 Delta Blvd | | | 7 | 1 | 2024 | \$ | 727.96 | | | |
| City Atlanta | | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| GA 30354 | | | Travel Expense | | | | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | | |
| Citizens for Bar | b Gleim | | | | | | | | | | |
| Mailing Address | 450 Sherwood Dr | | | 6 | 24 | 2024 | \$ | 1,000.00 | | | |
| City Carlisle State Zip Code (Plus 4) | | | | Descrip | tion of Exp | enditure | | | | | |
| | | PA | 17015 | Contribu | ution | | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | | |
| Winred | | | | | | | | | | | |
| Mailing Address | 500 N 3rd Street | | | 6 | 18 | 2024 | \$ | 575.00 | | | |
| City Harrisb | urg | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | |
| | | PA | 17101 | Contribu | ution | | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | | |
| CCCRW | | | | | | | | | | | |
| Mailing Address | 212 N Hanover St | | | 5 | 23 | 2024 | \$ | 800.00 | | | |
| City Carlisle | | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | | PA | 17013 | Contribu | ution | | | | | | |
| To Whom Paid | | | | МО | DAY | YEAR | | | | | |
| On Street Parki | ing | | | | | | | | | | |
| Mailing Address | 223 Walnut St | | | 5 | 17 | 2024 | \$ | 4.35 | | | |
| City Harrisb | urg | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | |
| | | PA | 17101 | Parking | | | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | | |
| On Street Parki | | | | | | | | 4.05 | | | |
| Mailing Address | s 223 Walnut St | | | 5 | 17 | 2024 | \$ | 4.35 | | | |
| City Harrisb | urg | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | |
| | | PA | 17101 | Parking | • | | | | | | |
| To Whom Paid | | | | мо | DAY | YEAR | | | | | |
| York County Republican Committe | | | | | 2024 | \$ | 1,000.00 | | | | |
| Mailing Address | 237 Pauline Dr | T | 1 | 9 | 4 | 2024 | Ť | | | | |
| City York | | State | Zip Code (Plus 4) | | tion of Exp | enditure | | | | | |
| | | PA | 17402 | Contribution | | | | | | | |

| | | | | | | | 17102 19 | | |
|-----------------------------|-----------------------|------------------------|----------------------------|-------------|----------|----|------------|--|--|
| To Whom Paid | | | мо | DAY | YEAR | | | | |
| Anderson For PA House | | | MO | DAI | ILAK | | | | |
| Mailing Address 13 Mondale | : Drive | | 9 | 3 | 2024 | \$ | 500.00 | | |
| City Dillsburg | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | PA | 17019 | Contrib | ution | | | | | |
| To Whom Paid | | | | DAY | YEAR | | | | |
| Anedot | | | МО | DAY | YEAK | | | | |
| Mailing Address 1340 Poydr | as Street Suite 1770 | | 6 | 5 | 2024 | \$ | 2.60 | | |
| City New Orleans | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | PA | 70112 | Deposit | Fee | | | | | |
| To Whom Paid Anedot | | | мо | DAY | YEAR | | | | |
| Mailing Address 1340 Poydr | as Street Suite 1770 | | 7 | 3 | 2024 | \$ | 1.90 | | |
| City New Orleans | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | PA | 70112 | Deposit | Fee | | | | | |
| To Whom Paid Anedot | | | мо | DAY | YEAR | | | | |
| Mailing Address 1340 Poydr | as Street Suite 1770 | | 8 | 14 | 2024 | \$ | 1.30 | | |
| City New Orleans | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | PA | 70112 | Deposit | Fee | | | | | |
| To Whom Paid Anedot | | | мо | DAY | YEAR | | | | |
| Mailing Address 1340 Poydr | as Street Suite 1770 | | 9 | 4 | 2024 | \$ | 1.30 | | |
| City New Orleans | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | PA | 70112 | Deposit | Fee | | | | | |
| Futor Curud T-t-1 -f F- | dituura on Poor 4 P | aut Cavau Dana Tha | | | | | PAGE TOTAL | | |
| Enter Grand Total of Expend | itures on Page 1, Rep | ort Cover Page, Item D |). | | | \$ | 14,454.39 | | |
| | | | | | | | | | |