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 2024	0031			Rep File			CAN	DII	DATE		СОМ	1ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		WAL	SH	FOR I	PA - PA	\C					•				
Street Address:	8 POST OFFIC	E ROAD)															
City:	SWEET VALLE	Υ						State:		PA			Zip Code: 18656					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	- 2	2.		BO DAY P PRIMARY			3.		AMENDM REPORT?		Yes	No		\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	<u>-</u> !	5.	30 DA		P	POST- 6.			TERMINA REPORT?		Yes	No	•	\
report type)	ANNUAL REPORT	7. X	Year 2024					NG MET CHECK					PAPER		/	DISKE	TTE	
Name of Office S	- Sought by Candida	te:						DATE	O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
								МО		DAY	YE	AR		10000				
									11		5	2024		(SEE IN	STRUCTIO	ONS FOR (CODES)
	Receipts and	МО	DAY	YEAR	ł			МО		DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	s from:	-	11 26	2	024	Т	0		12	(7)	31	2024						
A. Amount Bro	ught Forward Fror	n Last R	eport				\$				4	138.39						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$		3,499.95									
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				3,9	38.34						
D. Total Expen	ditures (From Sch	edule II	I)				\$				6	54.82						
E. Ending Cash	Balance (Subtrac	t Line D	From Line (C)			\$				3,2	83.52						
F. Value Of In-	Kind Contributions	Receiv	ed (From So	chedu	le II)	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$					0.00						
				AFF	IDA	١٧٧	T SE	CTIO	Ν									
	s a Committee rep	•								-								
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sch	nedule	s filed	d on	paper	or by eld	ectr	onic me	edium	, are to t	he best o	f my kno	wledge a	and belie	ef , tru	ue.
Sworn to and subs	cribed before me this day of	i	20						•		s	ignature	of Perso	n Submit	ting Rep	ort		_
	Signatu	ra	-				-		-				Prin	ted Name	<u> </u>			-
My Commission Ex	_								-				Emai	il				-
	мо	D	AY	YR					_	Are	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	didate's	authorized	Comn	nitte	e, C	andid	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	comm	ittee ha	s no	ot violat	ted an	y provisi	ions of the	e act of J	une 3,19	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this								Signature of Candidate								- [
	day of		_ 20				-		Printed Name									_
	Signature						-						Fillite	u Haille				_
My Commission Exp	-								-				Ema	il				
	МО	D	AY	YR	1		-			Area	Code		Da	aytime T	elephon	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	_			
Name of Filing Committee or Candidate	Reporting	Period		
WALSH FOR PA - PAC	From:	11/26/202	<u>24</u> To:	12/31/2024
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)			\$	0.00
All Other Contributions (Part B)			\$	100.00
TOTAL for the Reporting	Period	(2)	\$	100.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	2,049.95
All Other Contributions (Part D)			\$	1,350.00
TOTAL for the Reporting	Period	(3)	\$	3,399.95
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			\$	3,499.95

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	e		Reporting	Period			
			From:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Committee			мо	DAY	YEAR		
Mailing Address		_				\$	0.00
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
0.00

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)

Name of Filing Committee or Candidate

Reporting Period

WALSH FOR PA - PAC

From: <u>11/26/2024</u> To:

DATE

12/31/2024

AMOUNT

_							
Full N	lame of Contributor			мо	DAY	YEAR	
RAYM	IOND M STEC			1-10	DAI	ILAK	
Mailing Address 532 SAINT JOHNS ROAD					\$ 100.00		
City	WAPWALLOPEN	State	Zip Code (Plus 4)	11	30	2024	
		PA	18660				

PAGE TOTAL 100.00

\$

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	Reporting P	eriod		
WALSH FOR PA - PAC	From:	11/26/2024	То:	12/31/2024

DATE AMOUNT

Full Name of Contributing Committee			мо	DAY	YEAR	
FRIENDS OF MCKAYLA KATHIO				DA!	ILAK	\$ 2,049.95
Mailing Address PO BOX 153				2	2024	_,
City HARRISBURG	State	Zip Code (Plus 4)	12	_	2021	
	PA	17108				

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

PAGE TOTAL \$ 2,049.95

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				Rep	orting Pe	riod			
WALSH FOR PA - PAC				Fron	n:	11/26/2	<u>024</u> To	:	12/31/2024
					D/	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	1,000.00
THE LAW OFFICE OF CHARLES KANNEB	ECKER					27.1.	,] *	1,000.00
Mailing Address 104 WEST HIGH ST	REET				11	29	2024	1	
City MILFORD	State	Zip	Code (Plus	4)					
	PA	183	37						
Employer Name THE LAW OFFICE OF (CHARLES KANNEBE	CKER			Occupat	ion	OWNER		
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip C	code (Plus 4)
104 WEST HIGH STREET			MILFORD			PA		1833	37
Full Name of Contributor					мо	DAY	YEAR	\$	350.00
TERRY ECKERT						27.1.	,] *	350.00
Mailing Address 290 MACHELL AVE					12	5	2024	1	
City DALLAS	State	Zip	Code (Plus	4)					
	PA	186	512						
Employer Name LEWITH & Damp; FREEN	IAN REAL ESTATE I	NC			Occupat	ion	REAL ES	STATE	AGENT
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip C	code (Plus 4)
1755 MEMORIAL HWY			DALLAS			PA		1861	.2
Enter Grand Total of Part C on Scheo	dule I, Detailed Su	umma	ary Page,	Section	on 3.			•	PAGE TOTAL 1,350.00

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:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<u>'</u>	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				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 Per	iod	
WALSH FOR PA - PAC	From:	<u>11/26/2024</u> To:	12/31/2024
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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 Car	ndidate		Reporting Period					
			From:		To	То:		
				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 o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	ımary Pa	ge,		PAGE TOTAL	•
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	т
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	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
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	Reporti	ng Period			
WALSH FOR PA - PAC	From	11/26/202	<u>24</u> To	o: <u>12/</u>	31/2024
		DATE		АМС	DUNT
T- Wilson Bald					

				DATE		AMOUNT			
To Whom Paid			МО	DAY	YEAR				
WIX.COM			MO		TEAR				
Mailing Address INTERNET - ONLINE DEBIT			12	12	2024	\$	91.58		
City	State Zip Code (Plus 4)			Description of Expenditure					
			2 (NOV & amp; DEC) MONTHS DEBIT WITHDRAWALS @ \$45.79 EA						
To Whom Paid									
NEW MART			МО	DAY	YEAR				
Mailing Address MEMORIAL HWY			11	27	2024	\$	67.71		
City SHAVERTOWN	State	Zip Code (Plus 4)	Descript	Description of Expenditure					
	PA	18708	GAS						
To Whom Paid			мо	DAY	YEAR				
SHEETZ									
Mailing Address MEMORIAL HWY			12	2	2024	\$	52.36		
City TRUCKSVILLE	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	18708	GAS						
To Whom Paid			мо	DAY	YEAR				
PATRICK'S FOOD MART									
Mailing Address RT 118			12	6	2024	\$	122.68		
City HUNLOCK CREEK	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	18612	2 FIL UP GAS 12/8/2024						
To Whom Paid			МО	DAY	YEAR				
SHEETZ									
Mailing Address RT 93			12	11	2024	\$	55.90		
City SUGARLOAF	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure				
	PA	18202	GAS						
To Whom Paid			мо	DAY	YEAR				
SUNOCO									
Mailing Address RT 118			12	13	2024	\$	72.73		
City DALLAS State PA 2ip Code (Plus 4) 18612				Description of Expenditure					

To Whom Paid				DAY	YEAR		
TURKEY HILL				DAT	TEAR		
Mailing Address RT 93			12	19	2024	\$	52.78
City HAZLE TWP	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	18201	GAS				
To Whom Paid			мо	DAY	YEAR		
TURKEY HILL			1.10		1 Z/IIX		
Mailing Address RT 415 & Amp; RT 118			12	20	2024	\$	139.08
City DALLAS	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	18612	GAS TW	O FILL UP	S (12/28	2ND)	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
							654.82