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	02400	48			Re _l File	oort		CAN	IDI	DATE		COMN	1ITTEE	✓ [LOBI	BYIST		
Name of Filing C	ommittee, Can	didate	or Lo	bbyist:		CON	1MI	ITEE :	TO ELE	СТ	STEP	HANI	E WAG	GETT FC	R STAT	E REP			
Street Address:	330 BROA	DWAY	AVEN	IUE															
City:	BROWNSV	'ILLE							State	:	PA			Zip Cod	le: 15	417-8	668		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		2ND FRID PRIMARY	AY PRE	-	2.	30 DA		P				AMENDM REPORT?	Yes	N	0	\	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	Х	2ND FRID		E	5.	30 DA		P	POST- 6.			TERMINATION REPORT?		Yes	N	0	√
report type)	ANNUAL REPO	ORT 7.		Year 202	4				NG MET		~ _			PAPER		√	DISK	ETTE	
Name of Office S	ought by Cand	lidate:							DATE	0	F ELE	стіо	N	District Number	Office Code	Par	ty Cod	Cour	
									МО		DAY	YE	AR	50	STH	REP	1	30	
REPRESENTATI	VE IN THE GE	NERAL	_ ASSE	EMBLY						11		5	2024		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		d i	10	DAY	YEAR	≀			МО		DAY	YE	AR	FO	R OFFIC	E USE	ONLY		
Expenditures	from:			5 1	4 2	024	Т	0		9	1	L6	2024						
A. Amount Bro	ught Forward I	From L	ast Re	port				\$				4,6	69.94						
B. Total Moneta	ary Contributio	ns And	d Rece	ipts (Fro	m Sche	dule	1)	\$					0.00						
C. Total Funds	Available (Sun	n Of Li	nes A	and B)				\$				4,6	69.94						
D. Total Expend	ditures (From	Schedu	ule III)				\$				2,6	02.66						
E. Ending Cash	Balance (Subt	ract Li	ine D I	rom Line	e C)			\$				2,0	67.28						
F. Value Of In-	Kind Contribut	ions R	eceive	d (From	Schedu	le II)	\$					0.00						
G. Unpaid Debt	s And Obligati	ons (F	rom S	chedule 1	V)			\$					0.00		,				
					AFF	·ID/	١٧٧	T SE	CTIO	N									
PART I - If this is		-	•																
I swear (or affirm) correct and comple		includi	ing the	attached s	chedule	s file	d on	paper	or by el	ectr	onic me	edium	, are to t	he best o	f my knov	vledge	and be	ief , tr	ue
Sworn to and subs	cribed before me day of	this		20						•		s	ignature	of Perso	1 Submitt	ing Rep	ort		_
	– ————————————————————————————————————	nature						- -		•				Prin	ted Name				_
My Commission Ex	pires							_		-				Emai	il				
	МО		DA	Y	YR						Are	a Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candid	ate's a	uthorize	d Comn	nitte	e, C	andid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my l	knowle	dge and be	elief this	polit	ical	comm	ittee ha	s no	ot violat	ed an	y provisi	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc		this											Si	ignature o	of Candida	ite			_
-	day of							_						Printe	d Name				-
	Signati	ure						-		_									_
My Commission Exp	ires													Ema	iI				
	МО		DA	Y	YR	ł		-			Area	Code		Da	ytime Te	elephor	e Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
COMMITTEE TO ELECT STEPHANIE WAGGETT FOR STATE REP	From:	<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) 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	J 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	e		Reporting	Period			
		,	rom:		То	•	
		·		DATE			AMOUNT
Full Name of Contributing Committee			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.

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 Committe	ee or Candidate		Rep	orting P	eriod			
			Fro	m:		To) :	
		•			DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
								PAGE TOTAL

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:			То:		
				DA	TE		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							- \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

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				Repo	orting Pe	riod					
				Fron	n:			То:			
					D	ATE			А	MOUNT	
Full Name of Contributor					МО	DAY	YEA	R	\$		0.00
Mailing Address											
City	State	Zip	Code (Plus	4)							
Employer Name					Occupa	tion					
Employer Mailing Address/Principal Plac	e of Business		City		•	State		Z	ip Cod	de (Plus 4	•)
Enter Grand Total of Part C on Schee	dule I, Detailed Su	umm	nary Page,	Section	on 3.			\$	F	PAGE TOTA	AL 0.00
							L				

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:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'	1					<u> </u>	
	- C		. .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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 Peri	od	
COMMITTEE TO ELECT STEPHANIE WAGGETT FOR STATE REP	From:	<u>5/14/2024</u> To:	9/16/2024
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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 Candi	idate		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	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	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	Reporting Period						
COMMITTEE TO ELECT STEPHANIE WAGGETT FOR STATE REP	From	5/14/2024	То:	9/16/2024			

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Jeff Waggett			М		12/11		
Mailing Address 171 stevenson la	ne		6	20	2024	\$	972.84
City Carmichaels	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15320	Mileage 1452 miles @ \$0.67/mile				
To Whom Paid			мо	DAY	YEAR		
KAG Signworks							
Mailing Address 444 St. Clair Ave			8	16	2024	\$	500.00
City Clairton	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15025	signs				
To Whom Paid			мо	DAY	YEAR		
Caporella's						 \$	213.43
Mailing Address 90 Pittsburgh st	ress 90 Pittsburgh st 6 19 2024					۳	213.43
City Uniontown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15401	Met wit	h campaig	n group		
To Whom Paid			МО	DAY	YEAR		
Bee Graphix							
Mailing Address 504 Front St.			8	26	2024	\$	491.06
City Fredericktown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15333	Signs				
To Whom Paid Jeff Waggett			мо	DAY	YEAR		
Mailing Address 171 stevenson la	ne		7	8	2024	\$	425.33
City Carmichaels	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15320	Sign Su	pplies			
							PAGE TOTAL
Enter Grand Total of Expenditure	s on Page 1, Re	port Cover Page, Item D) .			\$	2,602.66
						1	