Campaign Finance Report

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

Filer Identification 20170358 Number :						Report Filed By		CANDI	COMM		MITTEE		LOBBYIST				
Name of Filing C	Committee, Candid	late or L	obbyist:	•	СОМ	1MO	NWEA	ALTH LEA	DERS	FUND)						
Street Address:	420 N 3RD S	TREET															
City:	HARRISBURG	i						State:	PA			Zip Cod	le: 17	7101			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE- PRIMARY 2. 30 DA PRIMARY						POST- 3.			AMENDM REPORT?		Yes	No	*	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE- 5. 30 DAY PO ELECTION					POST-	6.		TERMINA REPORT?		Yes	No	Y		
report type)	ANNUAL REPORT	7.	Year 2025 FILING METHOD () CHECK ONE							PAPER		/	DISKE	TTE			
Name of Office S	Sought by Candida	ite:	-					DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code	,
	,							МО	DAY	YE	AR	Number	code			Code	
								3	7	25	2025		(SEE IN	STRUCTI	ONS FOR C	ODES)	
Summary of Expenditures	Receipts and	МО	DAY	YEAR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
			1 7	20	2025 TO 3 10 2025						2025						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			390,2	16.75						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$		7,955.33								
C. Total Funds	Available (Sum O	f Lines A	and B)				\$,	398,1	72.08						
D. Total Expend	ditures (From Sch	edule II	I)				\$			106,3	71.44						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$		2	291,8	00.64						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sc	hedu	le II)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)	١			\$				0.00			•			
				AFF	IDA	VI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere. 1	[f thi	is is	a Can	didate re	eport, o	andi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached scho	edules	filed	d on	paper (or by elect	ronic m	edium	are to t	he best o	f my kno	wledge	and belie	ef , true	3.
Sworn to and subs	cribed before me thi day of	s	20							s	ignature	of Perso	n Submit	ting Rep	ort		
	Signatu	ıre					-					Prin	ted Name	e			-
My Commission Ex	cpires											Ema	il				•
	мо	D	AY	YR					Are	ea Cod	е	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of a can	didate's	authorized (Comm	itte	e, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and belie	f this	politi	ical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L.	1333,	l
Sworn to and subsc	ribed before me this								Signature of Candidate						•		
	day of ————————————————————————————————————						_		Printed Name						.		
	Signature						-										
My Commission Exp	ires											Ema	il				
	мо	D	AY	YR			•		Area	Code		Da	aytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
COMMONWEALTH LEADERS FUND	From:	1/7/20	<u>)25</u> To :	3/10/2025
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	110.00
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)			\$	6,600.00
TOTAL for the Reporting	Period	(3)	\$	6,600.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	Period	(4)	\$	1,245.33
			<u> </u>	
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			\$	7,955.33

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 (Reporting	Period					
		F	rom:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Comm	nittee		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)		1			

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)

(2,0.0		n ponticui commi		Сропсои		,,	
Name of Filing Committe	ee or Candidate		Reportin	g Period			
			From:		To):	
		•		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.

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		A	MOUNT
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 Scheo	lule 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	lame of Filing Committee or Candidate Rep					orting Period				
COMMONWEALTH LEADERS FUND				Fron	n:	<u>1/7/2</u>	<u>025</u> To):	3/10/2025	
					D/	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR	\$	F 000 00	
CAROL ANN SAVOY						571.	1 = 7111	*	5,000.00	
Mailing Address 579 PRIMROSE LAN	E				1	6	2025			
City MONTOURSVILLE	State	Zip	Code (Plus	4)						
	PA	177	754							
Employer Name SAVOY FURNITURE					Occupat	ion	OWNER			
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Co	ode (Plus 4)	
300 HOWARD ST.			MONTOUR	SVILLE	Ē	PA		1775	4	
Full Name of Contributor										
DAVID CRANSTON					МО	DAY	YEAR	\$	1,000.00	
Mailing Address 361 COBBLESTONE	CIR				2	24	2025	7		
City MCKEES ROCKS	State	Zip	Code (Plus	4)		24	2023			
	PA	151	136							
Employer Name CRANSTON MATERIAL	HANDLINE EQUIPM	1ENT	CORP		Occupat	ion	PRESID	ENT		
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Co	ode (Plus 4)	
190 BILMAR DRSUITE 300			PITTSBUR	GH		PA		1520	5	
Full Name of Contributor										
DONALD REINHARD					МО	DAY	YEAR	\$	600.00	
Mailing Address 75 HARVARD AVE					3	5	2025	7		
City PALMERTON	State	Zip	Code (Plus	4)]		2023			
	PA	180	071							
Employer Name PENCOR SERVICES, I	NC.				Occupat	ion	EXECUT	IVE		
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Co	ode (Plus 4)	
613 3RD STREET			PALMERTO	ON		PA		1807	1	
Fortage Council Tastell of Book Council Color	dula I Batallad Co		D	C	3				PAGE TOTAL	
Enter Grand Total of Part C on Sche	uule 1, Detalled St	ımm	ary Page,	Section	on 3.			±.	6 600 00	
								\$	6,600.00	
							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	Reporting Perio	d	
COMMONWEALTH LEADERS FUND	From:	<u>1/7/2025</u> To:	3/10/2025

			D	ATE		АМ	OUNT		
Full Name			МО	DAY	VEAD		4 245 22		
FIRST NATIONAL BANK			МО	DAY	YEAR	\$	1,245.33		
Mailing Address 110 N 2ND STREET			1	31	2025				
City HARRISBURG	State	Zip Code (Plus 4)] -		2023				
	PA	17101							
Receipt Description INTEREST EARNED									

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

PAGE TOTAL \$ 1,245.33

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:	1/7/2025 To:	<u>3/10/2025</u>
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 Rep						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	lame of Filing Committee or Candidate				portin	ng Pe	riod				
				Fro	m:			To:			
							DATE			АМ	IOUNT
Full Name of Contributor					мо		DAY	YEAR			
Mailing Address										\$	0.00
City	State		Zip Code(Plus 4)								
Employer of Contributor					Оссі	upati	on				
Employer Mailing Address/Principal Plac	ce of Business	Cit	ty	Stat	e Z	Zip Co	ode(Plus 4)	Desci	ript	tion of Con	tribution
Enter Grand Total of Part G on Sch	edule II, In-Kir	nd (Contributions D	etaile	ed					PA	GE TOTAL
Summary Page, Section 3.	,										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	riod		
COMMONWEALTH LEADERS FUND	From	1/7/2025	То:	<u>3/10/2025</u>

			DATE				AMOUNT		
To Whom Paid			мо	DAY	YEAR				
PAYTRACE									
Mailing Address 12709 MIRABEA	AU PKWY BUILDING	G A, SUITE 100	1	2	2025	\$	20.00		
City SPOKANE VALLEY	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	WA	99216	CREDIT						
To Whom Paid			мо	DAY	YEAR				
DEBEE CLARK & amp; WEBER			MO		ILAK				
Mailing Address PO BOX 54949			1	8	2025	\$	2,000.00		
City OKLAHOMA CITY State Zip Code (Plus 4)			Descrip	tion of Exp	enditure				
OK 73514				LEGAL FEES					
To Whom Paid			МО	DAY	YEAR				
COMMONWEALTH ENTREPRENEURS	S LLC		MO	DAT	TEAR				
Mailing Address 420 N 3RD STR	EET		1	8	2025	\$	3,715.75		
City HARRISBURG State Zip Code (Plus 4)			Description of Expenditure						
PA 17101				RENT JANUARY					
To Whom Paid	-	·		DAY	VEAD				
IMPACT RESPONSE			МО	DAY	YEAR				
Mailing Address 2215 PLANK RD			1	10	2025	\$	2,750.00		
City FREDERICKSBURG	State	Zip Code (Plus 4)	4) Description of Expenditure						
	VA	22401	DIRECT MAIL						
To Whom Paid				DAY	YEAR				
FIRST NATIONAL BANK			МО	DAT	TEAR				
Mailing Address 110 N 2ND STR	EET		1	10	2025	\$	90.95		
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	17101	BANK FEES						
To Whom Paid	-	-							
COMMONWEALTH PARTNERS CHAMBER OF ENTREPRENEURS			МО	DAY	YEAR				
Mailing Address 420 N 3RD STREET			1	14	2025	\$	1,105.73		
City HARRISBURG	HARRISBURG State Zip Code (Plus 4)			Description of Expenditure					
	PA	17101	1 .	OCT-DEC					
T// T//OT PAPER OCT DEC									

								OL 1Z	
To Whom Paid				мо	DAY	YEAR			
COMMONWEALTH PARTNERS CHAMBER OF ENTREPRENEURS						2025	.	27 662 54	
Mailing Address 420	N 3RD STREET			1	14	\$	27,662.54		
City HARRISBURG		State	Zip Code (Plus 4)	Descript	tion of Exp				
		PA	17101	ADMIN	OCT-DEC				
To Whom Paid	NECTON LLC			мо	DAY	YEAR			
BONNIE LANGBORGH DESIGN LLC				22	2025	\$	370.00		
Mailing Address 417 STONEWALL AVE			1	22	2025		370.00		
City WINCHESTER		State	Zip Code (Plus 4)	Descript	tion of Exp				
		VA	22601	DIRECT MAIL					
To Whom Paid ATLAS & DIGHT LLC				мо	DAY	YEAR			
Mailing Address 213	5 MARKET STREE	T		1	31	2025	\$	592.00	
City CAMP HILL		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
		PA	17011	DIRECT MAIL					
To Whom Paid					l nav	VEAD			
DEBEE CLARK & V	VEBER			МО	DAY	YEAR			
Mailing Address PO	BOX 54949			1	31	2025	\$	2,000.00	
City OKLAHOMA CIT	Υ	State	Zip Code (Plus 4)	Description of Expenditure					
		ОК	73514	LEGAL FEES					
To Whom Paid				МО	DAY	YEAR			
PAYTRACE				140		ILAK			
Mailing Address 127	09 MIRABEAU PK	WY BUILDING A, SU	ITE 100	2	3	2025	\$	20.10	
City SPOKANE VALL	EY	State	Zip Code (Plus 4)	4) Description of Expenditure					
		WA	99216	CREDIT CARD FEES					
To Whom Paid				MO DAY YEAR					
PA FUTURE FUND				12.11					
Mailing Address PO	BOX 5028			2	5	2025	\$	1,000.00	
City HARRISBURG		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
		PA	17110	CONTRIBUTION					
To Whom Paid				мо	DAY	YEAR			
IMPACT RESPONSE									
Mailing Address 221	5 PLANK RD			2	10	2025	\$	2,750.00	
City FREDERICKSBU	RG	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
		VA	22401	DIRECT MAIL					
To Whom Paid				мо	DAY	YEAR			
PERSONALIZED MARKETING COMMUNICATIONS					/				
Mailing Address 85 A	AIRPARK DRIVE P	O BOX 4756		2	14	2025	\$	1,478.70	
City LYNCHBURG		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
VA 24502				DIRECT MAIL					
·		· · · · · · · · · · · · · · · · · · ·							

To Wi	nom Paid			МО	DAY	YEAR		
FIRST NATIONAL BANK				1.0				
Mailing Address 110 N 2ND STREET			2	18	2025	\$	95.70	
City	HARRISBURG	State	Zip Code (Plus 4)) Description of Expenditure				
		PA	17101	BANK FEES				
To Wi	nom Paid			мо	DAY	YEAR		
COMM	ONWEALTH ENTREPRENEURS LL	C		МО	DAT	TEAK		
Mailing Address 420 N 3RD STREET			2	24	2025	\$	3,715.15	
City	HARRISBURG	State	Zip Code (Plus 4)	5 4) Description of Expenditure				
		PA	17101	RENT FEBRUARY				
To Wi	nom Paid			МО	DAY	YEAR		
BONNIE LANGBORGH DESIGN LLC			MO		ILAK			
Mailin	g Address 417 STONEWALL AV	/E		2	25	2025	\$	395.00
City	WINCHESTER	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		VA	22601	DIRECT	MAIL			
To W	nom Paid			МО	DAY	YEAR		
PERS	ONALIZED MARKETING COMMUNI	CATIONS		MO		ILAK		
Mailin	g Address 85 AIRPARK DRIVE	PO BOX 4756		2	27	2025	\$	874.07
City	LYNCHBURG	State	Zip Code (Plus 4)	Description of Expenditure				
		VA	24502	DIRECT MAIL				
To Whom Paid			мо	DAY	YEAR			
DEBEE CLARK & DEBER			MO		ILAK			
Mailing Address PO BOX 54949			3	3	2025	\$	2,000.00	
City	City OKLAHOMA CITY State Zip Code (Plus 4)			Descript	tion of Exp	enditure		
		ок	73514	LEGAL FEES				
To Wi	nom Paid			MO DAY VEAD				
ATLAS	S & MIGHT LLC			MO DAY YEAR				
Mailin	g Address 2135 MARKET STRE	ET		3 3 2025 \$ 50,00				
City	CAMP HILL	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		PA	17011	MAILING - DIGITAL ADS				
To W	nom Paid			МС	DAY	VEAD		
СОММ	ONWEALTH ENTREPRENEURS LL	C		МО	DAY	YEAR		
Mailin	g Address 420 N 3RD STREET			3	3	2025	\$	3,715.75
City	HARRISBURG	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
PA 17101				RENT MARCH				
To Whom Paid			MO	DAY	YEAR		· · · · · · · · · · · · · · · · · · ·	
PAYTRACE			МО	DAT	TEAK			
Mailin	g Address 12709 MIRABEAU P	KWY BUILDING A, SU	ITE 100	3	3	2025	\$	20.00
City	SPOKANE VALLEY	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
	WA 99216				CREDIT CARD FEES			
1111								

PAGE 14

		PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	\$	106,371.44		