

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:												
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.X	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.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2025		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	4	2025				
									(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		4	1	2025		5	5	2025				
A. Amount Brought Forward From Last Report						\$ 253,412.79						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 21,936.60						
C. Total Funds Available (Sum Of Lines A and B)						\$ 275,349.39						
D. Total Expenditures (From Schedule III)						\$ 62,292.01						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 213,057.38						
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>4/1/2025</u> To: <u>5/5/2025</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 725.00

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)	\$ 2,915.00
TOTAL for the Reporting Period (2)	\$ 2,915.00

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)	\$ 17,600.00
TOTAL for the Reporting Period (3)	\$ 17,600.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 696.60

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.)	\$ 21,936.60
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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 COMMONWEALTH LEADERS FUND				Reporting Period From: <u>4/1/2025</u> To: <u>5/5/2025</u>			
				DATE		AMOUNT	

Full Name of Contributor FRANK HAWLEY			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	3	2025	
City ROSEMONT	State PA	Zip Code (Plus 4) 19010				

Full Name of Contributor PATRICIA JEFFER			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	3	2025	
City SHOHOLA	State PA	Zip Code (Plus 4) 18458				

Full Name of Contributor BARBARA LAUDY			MO	DAY	YEAR	\$ 65.00
Mailing Address			4	8	2025	
City KENNETT SQUARE	State PA	Zip Code (Plus 4) 19348				

Full Name of Contributor WILLIAM FREAS			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	8	2025	
City WEST CHESTER	State PA	Zip Code (Plus 4) 19382				

Full Name of Contributor ALICE TOMI			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	14	2025	
City SOUTH PARK	State PA	Zip Code (Plus 4) 15129				

Full Name of Contributor WALTER WEIR, JR.			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	14	2025	
City SPRINGFIELD	State PA	Zip Code (Plus 4) 19064				

Full Name of Contributor JEFFERY R JONES			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	15	2025	
City DICKSON CITY	State PA	Zip Code (Plus 4) 18447				

Full Name of Contributor WILLIAM BROUGHAM			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	15	2025	
City	SMETHPORT	State PA				
Full Name of Contributor FREDERICK MCILVENNY, JR.			MO	DAY	YEAR	\$ 250.00
Mailing Address			4	15	2025	
City	KINGSTON	State PA				
Full Name of Contributor DUANE ORTIZ			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	15	2025	
City	COCHRANVILLE	State PA				
Full Name of Contributor HAROLD PROBANSKI			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	15	2025	
City	DALLAS	State PA				
Full Name of Contributor MICHAEL HEPLER			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	15	2025	
City	BOILING SPRINGS	State PA				
Full Name of Contributor FRANCIS AND DOLORES ZIELINSKI			MO	DAY	YEAR	\$ 200.00
Mailing Address			4	22	2025	
City	GREENTOWN	State PA				
Full Name of Contributor J. MICHAEL RUEFLE, JR.			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	22	2025	
City	EXPORT	State PA				
Full Name of Contributor CLIFFORD SWEITZER, JR			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	22	2025	
City	READING	State PA				
Full Name of Contributor JOSEPH AND DEBRA GALLAGHER			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	22	2025	
City	YORK	State PA				

Full Name of Contributor CLIFFORD CLAYTON			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	22	2025	
City	NEW PROVIDENCE	State PA				
Full Name of Contributor SONIA DE SANCTIS			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	22	2025	
City	PITTSBURGH	State PA				
Full Name of Contributor DAVID M STOCKWELL			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	22	2025	
City	LAKEVILLE	State PA				
Full Name of Contributor CARROLL LEPTUCK			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	25	2025	
City	ELVERSON	State PA				
Full Name of Contributor MARK GRIMM			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	25	2025	
City	MCVEYTOWN	State PA				
Full Name of Contributor HUI HARGENRADER			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	25	2025	
City	MONTOURSVILLE	State PA				
Full Name of Contributor TERRY ANDREWS			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	25	2025	
City	NORTHAMPTON	State PA				
Full Name of Contributor DOROTHY HORNER			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	29	2025	
City	NEW BETHLEHEM	State PA				
Full Name of Contributor DARLENE ROBBINS			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	29	2025	
City	ORWIGSBURG	State PA				

Full Name of Contributor			MO	DAY	YEAR	\$ 200.00
HUGH GALLAGHER						
Mailing Address			4	29	2025	
City	ALLENTOWN	State				
		PA				
		Zip Code (Plus 4)				
		18103				

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

PAGE TOTAL
\$ 2,915.00

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>4/1/2025</u> To: <u>5/5/2025</u>
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				DATE	AMOUNT		
Full Name of Contributor GORDON TOMB				MO	DAY	YEAR	\$ 400.00
Mailing Address				4	8	2025	
City ANNVILLE	State PA	Zip Code (Plus 4) 17003					
Employer Name SELF EMPLOYED				Occupation WRITER			
Employer Mailing Address/Principal Place of Business			City ANNVILLE		State PA	Zip Code (Plus 4) 17003	
Full Name of Contributor JON DEARMENT				MO	DAY	YEAR	\$ 10,000.00
Mailing Address				4	14	2025	
City MEADVILLE	State PA	Zip Code (Plus 4) 16335					
Employer Name CHANNELLOCK, INC				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business			City MEADVILLE		State PA	Zip Code (Plus 4) 16335	
Full Name of Contributor RICHARD LEIST				MO	DAY	YEAR	\$ 500.00
Mailing Address				4	15	2025	
City BUCK HILL FALLS	State PA	Zip Code (Plus 4) 18323					
Employer Name RETIRED				Occupation RETIRED			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
Full Name of Contributor LUTHER RHODES III				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				4	22	2025	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18103					
Employer Name RETIRED				Occupation PHYSICIAN			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

Full Name of Contributor KEN HEALY			MO	DAY	YEAR	\$ 5,000.00
Mailing Address			4	28	2025	
City WILLIAMSPORT	State PA	Zip Code (Plus 4) 17701				
Employer Name PMF INDUSTRIES			Occupation EXECUTIVE VP & DIR OF ENG			
Employer Mailing Address/Principal Place of Business		City WILLIAMSPORT	State PA		Zip Code (Plus 4) 17701	

Full Name of Contributor EDWARD S MARTIN			MO	DAY	YEAR	\$ 700.00
Mailing Address			4	29	2025	
City CABOT	State PA	Zip Code (Plus 4) 16023				
Employer Name RETIRED			Occupation RETIRED			
Employer Mailing Address/Principal Place of Business		City	State		Zip Code (Plus 4)	

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

PAGE TOTAL
\$ 17,600.00

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>4/1/2025</u> To: <u>5/5/2025</u>
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				DATE			AMOUNT	
Full Name				MO	DAY	YEAR	\$	696.60
FIRST NATIONAL BANK								
Mailing Address								
City	HARRISBURG	State	Zip Code (Plus 4)					
		PA	17101					
Receipt DescriptionINTEREST EARNED								

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

PAGE TOTAL
\$ 696.60

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>4/1/2025</u> To: <u>5/5/2025</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 <div style="display: flex; justify-content: space-between;"> From: To: </div>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	<div style="display: flex; align-items: center;"> \$ 0.00 </div>
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 <div style="display: flex; align-items: center;"> \$ 0.00 </div>

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
COMMONWEALTH LEADERS FUND	From <u>4/1/2025</u> To: <u>5/5/2025</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
COMMONWEALTH ENTREPRENEURS				
Mailing Address	4	1	2025	\$ 3,715.75
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure RENT APRIL	
To Whom Paid	MO	DAY	YEAR	
PAYTRACE				
Mailing Address	4	2	2025	\$ 21.72
City SPOKANE VALLEY	State WA	Zip Code (Plus 4) 99216	Description of Expenditure CREDIT CARD FEES	
To Whom Paid	MO	DAY	YEAR	
DEBEE CLARK & WEBER				
Mailing Address	4	2	2025	\$ 2,000.00
City OKLAHOMA CITY	State OK	Zip Code (Plus 4) 73154	Description of Expenditure LEGAL FEES	
To Whom Paid	MO	DAY	YEAR	
FIRST NATIONAL BANK				
Mailing Address	4	2	2025	\$ 7.50
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure BANK FEES	
To Whom Paid	MO	DAY	YEAR	
HAAS PRINTING				
Mailing Address	4	3	2025	\$ 198.71
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure POSTAGE	
To Whom Paid	MO	DAY	YEAR	
HAAS PRINTING				
Mailing Address	4	10	2025	\$ 954.00
City LEMOYNE	State PA	Zip Code (Plus 4) 17043	Description of Expenditure DIRECT MAIL	

To Whom Paid FIRST NATIONAL BANK			MO	DAY	YEAR	\$ 169.19
Mailing Address			4	10	2025	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure BANK FEES			

To Whom Paid US TREASURY			MO	DAY	YEAR	\$ 791.00
Mailing Address			4	15	2025	
City CINCINNATI	State OH	Zip Code (Plus 4) 45280	Description of Expenditure TAX FILING			

To Whom Paid U.S. POST OFFICE			MO	DAY	YEAR	\$ 268.00
Mailing Address			4	15	2025	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure MAILING			

To Whom Paid COMMONWEALTH PARTNERS			MO	DAY	YEAR	\$ 25,450.39
Mailing Address			4	22	2025	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure ADMIN JAN-MAR			

To Whom Paid PMA PAC			MO	DAY	YEAR	\$ 25,000.00
Mailing Address			4	23	2025	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CONTRIBUTION			

To Whom Paid COMMONWEALTH ENTREPRENEURS			MO	DAY	YEAR	\$ 3,715.75
Mailing Address			5	1	2025	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure RENT MAY			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 62,292.01

