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 2023	0278			Report Filed		CA	NDI	DATE		COM	AITTEE	Y	LUB	51131	
Name of Filing C	ommittee, Candid	ate or L	obbyist:		TAXPA	YERS	FOR S	COT	TT BAR	GER						
Street Address:	PO BOX 261															
City:	HOLLIDAYSBU	JRG					State	e:	PA			Zip Co	de: 16	648		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA		P	POST-	3.		AMENDN REPORT		Yes	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA	AY TION	P	POST- 6.			TERMINATION REPORT?		Yes	No	√
report type)	report type) ANNUAL REPORT 7. Year 2025						NG ME					PAPER			DISKE	TTE
Name of Office S	- Sought by Candida	te:					DAT	ΈO	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code
							МО		DAY	YE	EAR		·	REF)	07
								11		4	2025		(SEE IN	STRUCTI	ONS FOR O	CODES)
	Receipts and	МО	DAY	YEAR			МО		DAY	ΥI	EAR	FC	R OFFI	CE USE	ONLY	
Expenditures	from:		1 1	20	025	то		3	13)	31	2025					
A. Amount Bro	ught Forward Fron	n Last R	eport			\$				3	357.80					
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	Sche	dule I)	\$	5			2,9	950.00					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$	5			3,3	307.80					
D. Total Expend	ditures (From Sch	edule II	I)			\$	5			2,2	289.36					
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$	5			1,0	18.44					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)	\$	5				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	')		\$	5			1,2	200.00			•		
					IDAV											
I swear (or affirm)	that this report, incl	-	_								_		f my kno	wledge	and belie	ef , true
correct and comple	ete. cribed before me this	ì									`` -	of Perso	- C. bit	tina Da		
-	day of		_ 20			_					ngnature	or Perso	ii Subiiiic	tilly Ke	Joit	
	Signatu	re				_						Prin	ted Name	•		
My Commission Ex	· —					_		•				Ema	il			
	МО		AY	YR						a Coc	le	Daytin	ne Teleph	one Nu	mber	
	a report of a cand				•				_				4 - 6 1	2 4	027 (B.I	4222
No 320) as amende	ed.	iy kilowi	suge and ben	ei tilis	pontica	ii coiiiii	iittee i	145 III	ot violat	eu an	iy provis	ions or th	e act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this day of		20								s	ignature	of Candid	ate		
						_						Printe	ed Name			
My Commission Exp	Signature ires							,				Ema	il			
	МО	D	AY	YR		_			Area	Code		D	aytime T	elephor	ne Numbe	 er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, ,				
Name of Filing Committee or Candidate	Reporting	g Period		
TAXPAYERS FOR SCOTT BARGER	From:	1/1/202	<u>5</u> To:	<u>3/31/2025</u>
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)			\$	250.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	250.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	1,500.00
All Other Contributions (Part D)			\$	1,200.00
TOTAL for the Reporting) Period	(3)	\$	2,700.00
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			\$	2,950.00

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 Candidate	Reporting	Period		
TAXPAYERS FOR SCOTT BARGER	From:	1/1/2025	То:	3/31/2025
		DATE		AMOUNT

Full Name of Contributi	ng Committee	мо	DAY	YEAR		
HIGHMARK PAC OF HI	MO	DAT	TEAK			
Mailing Address 1800 CENTER ST				25	2025	\$ 250.00
City CAMP HILL	State	Zip Code (Plus 4)]		2023	
	PA	17089				

PAGE TOTAL 250.00

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

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.

(Excide	ie contributions from	i pontical comm	iitte	es i e	Joi teu i	ii Pait	Α)	
Name of Filing Committee	or Candidate		Rep	orting P	eriod			
			Froi	m:		To) :	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
							ı	
Mailing Address							\$	0.00
Mailing Address City	State	Zip Code (Plus 4)				\$	0.00

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						
TAXPAYERS FOR SCOTT BARGER			From:	1/	1/2025	То:	3/31/20	<u>25</u>
				DA	TE		AMOUN	
Full Name of Contributing Committee				мо	DAY	YEAR		
The Pennsylvania Insurance PAC							\$	500.00
Mailing Address 409 North Second St	reet			3	25	2025		
City Harrisburg	State	Zip Code	e (Plus 4)]				
	PA	17101						
Full Name of Contributing Committee				мо	DAY	YEAR		
PILOTS ASSN FOR BAY & RIVER DELAW.	ARE PAC				271.	1 = 1 111	\$	1,000.00
Mailing Address 800 S. Columbus Blv	d.			3	25	2025		,
City PHILADELPHIA	State	Zip Code	e (Plus 4)]				
	PA	19147						

 $\label{lem:constraint} \textbf{Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.}$

PAGE TOTAL \$ 1,500.00

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	Rep	eporting Period							
TAXPAYERS FOR SCOTT BARGER				Fror	n:	1/1/2	025 To : 3		3/31/2025
					D.A	ATE			AMOUNT
Full Name of Contributor Scott Barger					МО	DAY	YEAR	\$	700.00
Mailing Address 717 Turkey Valley R	oad							7	
City Hollidaysburg	State	Zip	Code (Plus	; 4)	1	23	2025	5	
	PA	16	648						
Employer Name B&F Enterprises					Occupat	ion	Manage	er	
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip	Code (Plus 4)
717 Turkey Valley Road			Hollidaysb	urg		PA		166	548
Full Name of Contributor					МО	DAY	YEAR		
Scott Barger					MO	DAT	TEAR	\$	500.00
Mailing Address 717 Turkey Valley R	load				2	28	2025		
City Hollidaysburg	State	Zip	Code (Plus	4)	_				
	PA	16	648						
Employer Name B&F Enterprises					Occupat	ion	Manage	er	
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip	Code (Plus 4)
717 Turkey Valley Road			Hollidaysb	urg		PA		166	548
Enter Grand Total of Part C on Sche	dule T. Detailed Su	ımm	nary Page	Section	nn 3				PAGE TOTAL
The stand rotal of Fare 5 of Sched	auto 1, Detuned Su	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	iai y i uge,	Section	J J.			\$	1,200.00

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:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)				
Receipt Description	•	•			•		
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C				PAGE TOTAL
Enter Grand Total of Part	c on scnedule 1, Detailed	i Summary Page,	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 Period		
TAXPAYERS FOR SCOTT BARGER	From:	<u>1/1/2025</u> To:	<u>3/31/2025</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	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-Kind Contributions Detail				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	Name of Filing Committee or Candidate				porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	ce of Business	Cit	ty	State	e Zij	o Code(Plus 4)	Descri	ptio	n of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kir	nd (Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period					
TAXPAYERS FOR SCOTT BARGER	From	1/1/2025	То:	<u>3/31/2025</u>		

				DATE	AMOUNT						
To Whom Paid			МО	DAY	YEAR						
MailChimp			М		IZAK						
Mailing Address 405 N. Angier Ave, Ne			1	27	2025	\$	21.20				
City Atlanta	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
	GA 30308				Professional Services						
To Whom Paid				DAY	YEAR						
MailChimp			МО	DAI	ILAK						
Mailing Address 405 N. Angier Ave, Ne				25	2025	\$	21.20				
City Atlanta	State	Zip Code (Plus 4)	Descrip	Description of Expenditure							
	Professional Services										
To Whom Paid			МО	DAY	YEAR						
MailChimp			М		ILAK						
Mailing Address 405 N. Angier Ave, Ne			3	25	2025	\$	21.20				
City Atlanta State Zip Code (Plus 4)			Description of Expenditure								
	Professional Services										
To Whom Paid			МО	DAY	YEAR						
C&J Catering			1-10		I ZAIR						
Mailing Address 903 Spring Garden Dr.			1	31	2025	\$	664.18				
City MIDDLETOWN State Zip Code (Plus 4)				Description of Expenditure							
	PA	17057	catering								
To Whom Paid			МО	DAY	YEAR						
Joni Mitchell											
Mailing Address 903 Spring Garden Dr.				28	2025	\$	111.58				
City MIDDLETOWN	State	Zip Code (Plus 4)	Descrip	Description of Expenditure							
	catering										
To Whom Paid				DAY	YEAR						
Blair Republican Committee					LAIN						
Mailing Address 122 Hollidaysburg Plaza			3	3	2025	\$	450.00				
City Duncansville State Zip Code (Plus 4)			Description of Expenditure								
•	PA 16635										

To Whom Paid				МО	DAY	VEAD		
Precious Life Inc.			МО	DAT	YEAR			
Mailing Address 1716 12th Avenue				3	27	2025	\$	1,000.00
City A	Altoona	State	Zip Code (Plus 4)	Description of Expenditure				
PA 16601 con				contribu	ıtion			
								PAGE TOTAL
nter Gr	rand Total of Expend	itures on Page 1, Rep	port Cover Page, Item D				\$	
nter Gr	rand Total of Expend	itures on Page 1, Rep	port Cover Page, Item D				\$	
inter Gr	rand Total of Expend	itures on Page 1, Rep	port Cover Page, Item D				\$	
Enter Gr	rand Total of Expend	itures on Page 1, Rep	port Cover Page, Item D				\$	
Enter Gr	rand Total of Expend	itures on Page 1, Rep	port Cover Page, Item D				\$	
Enter Gr	rand Total of Expend	itures on Page 1, Rep	port Cover Page, Item D	•			\$	PAGE TOTAL 2,289.36
Enter Gr	rand Total of Expend	itures on Page 1, Rep	port Cover Page, Item D	•			\$	

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate				Reporting Period						
TAXPAYERS FOR SCOTT BARGER From					<u>1/1/2025</u> To:			3/31/2025		
•					DATE		Outstanding Balance of Debt			
Name of Creditor Scott Barger					DAY	YEAR				
Mailing Address 717 Turkey Valley Road					23	2025	\$	700.00		
City Hollidaysburg	State Zip Code (Plus 4)				Description of Debt					
	PA	16648	Loan							
Name of Creditor Scott Barger					DAY	YEAR				
Mailing Address 717 Turkey Valley Road					28	2025	\$	500.00		
City Hollidaysburg	State	Zip Code (P	lus 4)	Description of Debt						
	PA	16648		Loan						
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.								PAGE TOTAL		
							\$	1,200.00		