



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 : 2008298		Report Filed By :		CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST
Name of Filing Committee, Candidate or Lobbyist: MCA/SCA PAC						
Street Address: 908 N 2ND ST						
City: HARRISBURG			State: PA		Zip Code: 17102-0000	
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.
	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.
	ANNUAL REPORT	7.	Year 2020	FILING METHOD () CHECK ONE		
AMENDMENT REPORT?		Yes		No		<input checked="" type="checkbox"/>
TERMINATION REPORT?		Yes		No		<input checked="" type="checkbox"/>
PAPER		<input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number
				MO DAY YEAR		Office Code
				11 3 2020		Party Code
						County Code
						(SEE INSTRUCTIONS FOR CODES)
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	FOR OFFICE USE ONLY	
		6	23	2020	TO	
		9	14	2020		
A. Amount Brought Forward From Last Report		\$		61,739.40		
B. Total Monetary Contributions And Receipts (From Schedule I)		\$		0.00		
C. Total Funds Available (Sum Of Lines A and B)		\$		61,739.40		
D. Total Expenditures (From Schedule III)		\$		17,195.00		
E. Ending Cash Balance (Subtract Line D From Line C)		\$		44,544.40		
F. Value Of In-Kind Contributions Received (From Schedule II)		\$		0.00		
G. Unpaid Debts And Obligations (From Schedule IV)		\$		0.00		

AFFIDAVIT SECTION

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 and complete.

Subscribed before me this Sept 20 20 day of Sept 20 20

Signature of Person Submitting Report: James P. Gallner

Printed Name: James P. Gallner

Area Code: 717 Daytime Telephone Number: 644-4460

My Commission Expires: 2 16 2021

MO DAY YR

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

My Commission Expires

MO DAY YR

Signature of Candidate

Printed Name

Email

Area Code

Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate MCA/SCA PAC	Reporting Period From: <u>6/23/2020</u> To: <u>9/14/2020</u>
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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 Period (4)	\$ 0.00

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.)	\$ 0.00
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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		
Full Name of Contributing Committee		MO	DAY	YEAR	\$ 0.00
Mailing Address					
City	State	Zip Code (Plus 4)			

PAGE TOTAL

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

PAGE TOTAL

\$	0.00
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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				Reporting Period From: _____ To: _____			
				DATE		AMOUNT	
Full Name of Contributor				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

Contributions Received From Political Committees

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: _____
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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 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	Reporting Period From: _____ To: _____
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				DATE	AMOUNT	
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Employer Name			Occupation			
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
\$ 0.00

PART E

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 Period
	From: To:

			DATE			AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

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

PAGE TOTAL	
\$	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 MCA/SCA PAC	Reporting Period From: <u>6/23/2020</u> To: <u>9/14/2020</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 RECEIVED - 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

IN-KIND CONTRIBUTIONS RECEIVED

Name of Filing Committee or Candidate	Reporting Period
	From: To:

Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.							PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
MCA/SCA PAC	From <u>6/23/2020</u> To: <u>9/14/2020</u>

				DATE		AMOUNT	
To Whom Paid Friends of Todd Stephens				MO	DAY	YEAR	\$ 250.00
Mailing Address 94 N. Bacton Hill Road				7	3	2020	
City Malvern	State PA	Zip Code (Plus 4) 19355	Description of Expenditure Monetary Contribution Tee Sponsor				
To Whom Paid Friends of Brian Cutler				MO	DAY	YEAR	\$ 2,500.00
Mailing Address P.O. Box 412				6	24	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Monetary Contribution 06/29/2020 Event				
To Whom Paid Blue Pay				MO	DAY	YEAR	\$ 25.00
Mailing Address 184 Schuman Boulevard				7	1	2020	
City Naperville	State IL	Zip Code (Plus 4) 60563	Description of Expenditure Credit Card Processing Minimum Fee				
To Whom Paid PA House Republican Campaign Committee				MO	DAY	YEAR	\$ 1,000.00
Mailing Address P.O. Box 11787				7	15	2020	
City Harrisburg,	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Monetary Contribution Event 07/27/2020				
To Whom Paid PA Senate Republican Campaign Committee				MO	DAY	YEAR	\$ 1,000.00
Mailing Address PO Box 792				7	20	2020	
City Harrisburg,	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Monetary Contribution				

To Whom Paid Committee to Elect Pam Snyder			MO	DAY	YEAR	\$ 400.00
Mailing Address P.O. Box 502			7	20	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Monetary Contribution			

To Whom Paid Blue Pay			MO	DAY	YEAR	\$ 20.00
Mailing Address 184 Schumann Blvd.			7	31	2020	
City Naperville	State IL	Zip Code (Plus 4) 60563	Description of Expenditure Credit Card Processing			

To Whom Paid Build PA PAC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address P.O. Box 412			7	15	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Monetary Contribution			

To Whom Paid Friends of Chris Quinn			MO	DAY	YEAR	\$ 250.00
Mailing Address 94 N. Bacton Hill Road			7	15	2020	
City Malvern	State PA	Zip Code (Plus 4) 19355	Description of Expenditure Monetary Contribution			

To Whom Paid Friends of Tim Hennessey			MO	DAY	YEAR	\$ 500.00
Mailing Address 980 Valley Road			7	20	2020	
City Blue Bell	State PA	Zip Code (Plus 4) 19422	Description of Expenditure Monetary Contribution			

To Whom Paid Kane for Senate			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 209 Harding Avenue			7	23	2020	
City Havertown	State PA	Zip Code (Plus 4) 19083	Description of Expenditure Monetary Contribution			

To Whom Paid Citizens for Dan Williams			MO	DAY	YEAR	
Mailing Address P.O. Box 72162			9	2	2020	
City Thorndale	State PA	Zip Code (Plus 4) 19372	Description of Expenditure Monetary Contribution			
						\$ 250.00

To Whom Paid Friends of Bob Mensch			MO	DAY	YEAR	
Mailing Address PO Box 624			9	2	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Monetary Contribution			
						\$ 500.00

To Whom Paid Friends of Frank Dermody			MO	DAY	YEAR	
Mailing Address PO Box 274			9	2	2020	
City Tarentum	State PA	Zip Code (Plus 4) 15084	Description of Expenditure Monetary Contribution			
						\$ 1,000.00

To Whom Paid Friends of Kim Ward			MO	DAY	YEAR	
Mailing Address PO Box 12103			9	2	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Monetary Contribution			
						\$ 500.00

To Whom Paid Friends of Sheryl Delozier			MO	DAY	YEAR	
Mailing Address PO Box 412			9	2	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Monetary Contribution			
						\$ 500.00

To Whom Paid Friends of Eric Roe			MO	DAY	YEAR	
Mailing Address 1533 Johnny's Way			9	9	2020	
City West Chester	State PA	Zip Code (Plus 4) 19382	Description of Expenditure Monetary Contribution			
						\$ 2,500.00

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 17,195.00