



Pennsylvania Department of State

Bureau of Campaign Finance & Lobbying Disclosure
500 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)
www.dos.pa.gov/campaignfinance • ra-stcampaignfinance@pa.gov

Unsworn Declaration in Lieu of Sworn Statement for Campaign Finance Reports

Note: Per Act 2020-15, which was signed into law on April 20, 2020 and allows for unsworn declarations, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements in lieu of full reports (form DSEB-503), Non-Bid Contract Reporting Form (DSEB-504) and Independent Expenditure Reports (form DSEB-505) need not be notarized. Instead, the filer may file with each report or statement the corresponding version of this form signed by the required individual(s). **This particular form is to be used only for Campaign Finance Reports.** This form must be signed by hand where a signature is required.

Name of Filing Committee, Candidate, or Lobbyist				
STARTER PAC				
Reporting Cycle Name				
<input type="checkbox"/> Cycle 1 6 th Tuesday Pre-Primary	<input checked="" type="checkbox"/> Cycle 2 2 nd Friday Pre-Primary	<input type="checkbox"/> Cycle 3 30 Day Post Primary	<input type="checkbox"/> Cycle 4 6 th Tuesday Pre-Election	<input type="checkbox"/> Cycle 5 2 nd Friday Pre-Election
<input type="checkbox"/> Cycle 6 30 Day Post-Election	<input type="checkbox"/> Cycle 7 Annual Report	<input type="checkbox"/> Cycle 8 2 nd Friday Pre-Special Election	<input type="checkbox"/> Cycle 9 30 Day Post-Special Election	

Part I - If this form is submitted with a Committee report, the treasurer must sign here. If this form is submitted with a Candidate report, the candidate must sign here. If this report is submitted with a report by a contributing lobbyist, the lobbyist must sign here.

I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.

J. H. Hale
Signature of Treasurer, Candidate, or Lobbyist

JESSICA S HALE
Printed Name

05/05/2022
Date (MM/DD/YYYY)

LANCASTER PA USA
Location (City/State/Country)

* also submitted to Lanc Co + PA Dept of State

**Campaign Finance Report**

388460

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

Filer Identification Number : 20220399		Report Filed By :	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST					
Name of Filing Committee, Candidate or Lobbyist: STARTER PAC										
Street Address: 2224 SPRING VALLEY ROAD										
City: LANCASTER			State: PA	Zip Code: 17601						
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 2023	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	7	2023	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		1	1	2023	TO	5	1	2023		
A. Amount Brought Forward From Last Report				\$		702.80				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		2,015.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		2,717.80				
D. Total Expenditures (From Schedule III)				\$		442.28				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		2,275.52				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		100.00				
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

My Commission Expires _____

MO DAY YR

Signature of Person Submitting Report

Printed Name

Email

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

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	Reporting Period
STARTER PAC	From: <u>1/1/2023</u> To: <u>5/1/2023</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 195.00

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)	\$ 200.00
TOTAL for the Reporting Period (2)	\$ 200.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 1,620.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 1,620.00

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.)	\$ 2,015.00
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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	
Mailing Address				\$ 0.00
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	Reporting Period
STARTER PAC	From: <u>1/1/2023</u> To: <u>5/1/2023</u>

				DATE	AMOUNT		
Full Name of Contributor David Ramsay				MO	DAY	YEAR	\$ 25.00
Mailing Address 10 S PRINCE STREET #205				1	18	2023	
City Lancaster	State PA	Zip Code (Plus 4) 17603					
Full Name of Contributor David Ramsay				MO	DAY	YEAR	\$ 25.00
Mailing Address 10 S PRINCE STREET #205				2	18	2023	
City Lancaster	State PA	Zip Code (Plus 4) 17603					
Full Name of Contributor David Ramsay				MO	DAY	YEAR	\$ 25.00
Mailing Address 10 S PRINCE STREET #205				3	18	2023	
City Lancaster	State PA	Zip Code (Plus 4) 17603					
Full Name of Contributor David Ramsay				MO	DAY	YEAR	\$ 25.00
Mailing Address 10 S PRINCE STREET #205				4	18	2023	
City Lancaster	State PA	Zip Code (Plus 4) 17603					
Full Name of Contributor Michele Wherley				MO	DAY	YEAR	\$ 25.00
Mailing Address 1424 Hillcrest Road				1	18	2023	
City Lancaster	State PA	Zip Code (Plus 4) 17603					

Full Name of Contributor Michele Wherley			MO	DAY	YEAR	\$ 25.00
Mailing Address 1424 Hillcrest Road			2	18	2023	
City Lancaster	State PA	Zip Code (Plus 4) 17603				
Full Name of Contributor Michele Wherley			MO	DAY	YEAR	\$ 25.00
Mailing Address 1424 Hillcrest Road			3	18	2023	
City Lancaster	State PA	Zip Code (Plus 4) 17603				
Full Name of Contributor Michele Wherley			MO	DAY	YEAR	\$ 25.00
Mailing Address 1424 Hillcrest Road			4	18	2023	
City Lancaster	State PA	Zip Code (Plus 4) 17603				

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

PAGE TOTAL	
\$	200.00

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 STARTER PAC	Reporting Period From: <u>1/1/2023</u> To: <u>5/1/2023</u>
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	DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
COMMON GOOD - LANCASTER				
Mailing Address PO BOX 2568				\$ 1,620.00
City LANCASTER	1	18	2023	
State PA				
Zip Code (Plus 4) 17608				

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

PAGE TOTAL
\$ 1,620.00

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: _____

	DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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
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 Period
	From: _____ To: _____

			DATE	AMOUNT	
Full Name	MO	DAY	YEAR		
Mailing Address				\$	0.00
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 STARTER PAC	Reporting Period From: <u>1/1/2023</u> To: <u>5/1/2023</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)	\$ 100.00
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.)	\$ 100.00

**SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate STARTER PAC	Reporting Period From: <u>1/1/2023</u> To: <u>5/1/2023</u>
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				DATE	AMOUNT		
Full Name of Contributor	Mailing Address	City	State	MO	DAY	YEAR	
Carl Feldman	645 Hamilton Street	Lancaster	PA	1	14	2023	\$ 100.00
Description of Contribution: room rental - campaign mgr training							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							PAGE TOTAL \$ 100.00

**SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00**

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

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
STARTER PAC	From <u>1/1/2023</u> To: <u>5/1/2023</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
Zoom				
Mailing Address 555 Almaden Blvd	1	13	2023	\$ 31.78
City San Jose	State CA	Zip Code (Plus 4) 95113	Description of Expenditure video conferencing license	
To Whom Paid Zoom				
Mailing Address 555 Almaden Blvd	2	13	2023	\$ 31.78
City San Jose	State CA	Zip Code (Plus 4) 95113	Description of Expenditure video conferencing license	
To Whom Paid Zoom				
Mailing Address 555 Almaden Blvd	3	13	2023	\$ 33.90
City San Jose	State CA	Zip Code (Plus 4) 95113	Description of Expenditure video conferencing license	
To Whom Paid Zoom				
Mailing Address 555 Almaden Blvd	4	13	2023	\$ 33.90
City San Jose	State CA	Zip Code (Plus 4) 95113	Description of Expenditure video conferencing license	
To Whom Paid Mail Chimp				
Mailing Address 675 Ponce de Leon Ave NE, Suite 5000	1	30	2023	\$ 73.14
City Atlanta	State GA	Zip Code (Plus 4) 30308	Description of Expenditure email list service	

To Whom Paid Mail Chimp			MO	DAY	YEAR	\$	73.14
Mailing Address 675 Ponce de Leon Ave NE, Suite 5000			3	1	2023		
City Atlanta	State GA	Zip Code (Plus 4) 30308	Description of Expenditure email list service				
To Whom Paid Mail Chimp			MO	DAY	YEAR	\$	73.14
Mailing Address 675 Ponce de Leon Ave NE, Suite 5000			3	31	2023		
City Atlanta	State GA	Zip Code (Plus 4) 30308	Description of Expenditure email list service				
To Whom Paid Mail Chimp			MO	DAY	YEAR	\$	73.14
Mailing Address 675 Ponce de Leon Ave NE, Suite 5000			5	1	2023		
City Atlanta	State GA	Zip Code (Plus 4) 30308	Description of Expenditure email list service				
To Whom Paid Stripe			MO	DAY	YEAR	\$	12.37
Mailing Address 354 Oyster Point Blvd			5	1	2023		
City South San Francisco	State CA	Zip Code (Plus 4) 94080	Description of Expenditure merchant account processing fees				
To Whom Paid ActBlue			MO	DAY	YEAR	\$	5.99
Mailing Address PO Box 441146			5	1	2023		
City Somerville	State MA	Zip Code (Plus 4) 02144	Description of Expenditure credit card handling for cycle 2				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL	
						\$	442.28

