

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

TEAM JOYCE FOR PENNSYLVANIA

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2025"/>		<input type="text" value="32094.49"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="76479.98"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="182087.29"/>	<input type="text" value="773865.23"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="258567.27"/>	<input type="text" value="805959.72"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="239516.44"/>	<input type="text" value="786908.89"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="19050.83"/>	<input type="text" value="19050.83"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

TEAM JOYCE FOR PENNSYLVANIA

Report Covering the Period: From: MM / DD / YYYY 10 / 01 / 2025 To: MM / DD / YYYY 12 / 31 / 2025

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	175137.29	731358.67
(ii) Unitemized	700.00	1356.56
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	175837.29	732715.23
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	6250.00	41150.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	182087.29	773865.23
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	182087.29	773865.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	182087.29	773865.23

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	56647.66	155314.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	56647.66	155314.83
22. Transfers to Affiliated/Other Party Committees.....	182118.78	629844.06
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	1000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	750.00	750.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	750.00	1750.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	239516.44	786908.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	239516.44	786908.89

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	182087.29	773865.23
34. Total Contribution Refunds (from Line 28(d))	750.00	1750.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	181337.29	772115.23
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	56647.66	155314.83
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	56647.66	155314.83

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

A. BAINEY, ROBERT, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 132 MADDOX DR.
 City HOLLIDAYSBURG State PA Zip Code 16648-1914
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STIFEL Occupation (for Individual) FIRST VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 11 / 04 / 2025
Transaction ID : A5DFE991C668A4D8395A
 Amount of Each Receipt this Period 1700.00
 Memo Item

B. BARNHART, MARK, N., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 TEE BOX RD.
 City DUNCANSVILLE State PA Zip Code 16635-5054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NPC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 14 / 2025
Transaction ID : A70CCC2618BB64CC1945
 Amount of Each Receipt this Period 10000.00
 Memo Item

C. BEATTY, KATHIE, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 309 26TH AVE
 City ALTOONA State PA Zip Code 16601-3928
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RON BEATTY CARPET AND UPHOLSTERY CLEAN Occupation (for Individual) BUSINESS OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 06 / 2025
Transaction ID : A99F011E487EC437B9DF
 Amount of Each Receipt this Period 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 13200.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

A. BERKEBILE, GUY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1185 PENINSULA DR
 City CENTRAL CITY State PA Zip Code 15926-9119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUY CHEMICAL COMPANY LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 22000.00

Date of Receipt 10 / 13 / 2025
Transaction ID : ABC350C02181B4E8FB5E
 Amount of Each Receipt this Period 10000.00
 Memo Item

B. BLACKBURN, JOHN, R., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 112
 City BEDFORD State PA Zip Code 15522-0112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 20 / 2025
Transaction ID : ADF0D4B023A7B4D82A41
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. CAMPBELL, NANCY, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 137 CHRIST ST
 City HOLLIDAYSBURG State PA Zip Code 16648-9649
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2025
Transaction ID : A18AF88025CA1458FAB2
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 12000.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. COHEN, ANDREA, , ,

Mailing Address 5107 KISSELL AVE

City ALTOONA	State PA	Zip Code 16601-1050
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) BLAKE COMPANIES	Occupation (for Individual) REAL ESTATE DEVELOPER
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2025

Transaction ID : A3347F79D8E4340FC87A

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. COLLINS, VICTORIA, S., ,

Mailing Address 250 BRISTOL LANE

City HOLLIDAYSBURG	State PA	Zip Code 16648-2936
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) HOMEMAKER
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2025

Transaction ID : AB6BA70D0D6D5474BA8D

Amount of Each Receipt this Period
300.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CORSO, MICHAEL, D., ,

Mailing Address 257 HILLSIDE AVE

City ALTOONA	State PA	Zip Code 16601-7722
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) UPMC ALTOONA	Occupation (for Individual) PRESIDENT
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 04 / 2025

Transaction ID : A3B5C031F7B59457D9B5

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6300.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. COYLE, JOHN, P, ,

Mailing Address 105 WONDER ST

City JOHNSTOWN State PA Zip Code 15905-2603

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COYLE MANAGEMENT INC Occupation (for Individual) OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
10 / 31 / 2025
Transaction ID : A33E3A200D42C4A608F5

Amount of Each Receipt this Period
2500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. CRIDER, CARL, F., , JR.

Mailing Address 115 PARK SIDE DR

City TYRONE State PA Zip Code 16686-1000

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
11 / 04 / 2025
Transaction ID : AE303A5C152EF4932910

Amount of Each Receipt this Period
420.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. CZULADA, GLENN, , ,

Mailing Address 35 PINE TREE DR

City COVINGTON TOWNSHIP State PA Zip Code 18424-9340

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 12 / 2025
Transaction ID : ACDEFA37CF3D346C1A3C

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3170.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

A. DE LONGIS, PAUL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 503 RIDGE AVE
 City ALTOONA State PA Zip Code 16602-2943
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) STIFEL NICOLAUS INVESTMENTS Occupation (for Individual) FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 11 / 04 / 2025
Transaction ID : A171D4AC8A6604797BF8
 Amount of Each Receipt this Period 1700.00
 Memo Item

B. DEGOL, BRUNO, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 351 DEGOL DR
 City TYRONE State PA Zip Code 16686-6714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEGOL INDUSTRIES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 8500.00

Date of Receipt 11 / 12 / 2025
Transaction ID : A82497193FD14414FAC2
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. DEGOL, DAVID, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2249 SCOTCH VALLEY ROAD
 City HOLLIDAYSBURG State PA Zip Code 16648-7134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEGOL INDUSTRIES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 11 / 04 / 2025
Transaction ID : A83B3A43A406D480C897
 Amount of Each Receipt this Period 10000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	14200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

A. DEGOL, DENNIS, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3229 PLEASANT VALLEY BLVD
 City ALTOONA State PA Zip Code 16602-4435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEGOL INDUSTRIES Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 12 / 2025
Transaction ID : A5751754121AD412E9CF
 Amount of Each Receipt this Period 2500.00
 Memo Item

B. DEGOL, DONALD, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 CREEKSIDE LN
 City HOLLIDAYSBURG State PA Zip Code 16648-2746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DEGOL INDUSTRIES Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 12 / 2025
Transaction ID : AFE63E6AE27D84EA0A49
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. DELAMATER, STEVEN, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 161 PHEASANT CIR
 City CHAMBERSBURG State PA Zip Code 17202-3380
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELAMOR ENTERPRISES Occupation (for Individual) OWNER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 60000.00

Date of Receipt 11 / 04 / 2025
Transaction ID : A00BC921403B64FA2AA9
 Amount of Each Receipt this Period 10000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

A. DELGROSSO, JOSEPH, F.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2016 BUMBLEBEE DR.
 City TYRONE State PA Zip Code 16686-7428
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DELGROSSO FOODS Occupation (for Individual) PRESIDENT AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 11 / 04 / 2025
Transaction ID : A8FC2797EBFE849ABACI
 Amount of Each Receipt this Period 420.00
 Memo Item

B. DELGROSSO, MATTHEW, R.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 498 DELGROSSO DR.
 City ALTOONA State PA Zip Code 16601-8347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 11 / 04 / 2025
Transaction ID : AFAF47C3599704ECDBBA
 Amount of Each Receipt this Period 420.00
 Memo Item

C. DELGROSSO, SANDRA, D.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 625 W 14TH ST.
 City TYRONE State PA Zip Code 16686-2031
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 11 / 04 / 2025
Transaction ID : A2E7431B9A79C47409C6
 Amount of Each Receipt this Period 420.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1260.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:	PAGE 13 OF 34
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

A. DELGROSSO, SHERRY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 DEERFIELD LANE
 City ALTOONA State PA Zip Code 16601-9416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 11 / 04 / 2025
Transaction ID : A050DEE35305F43A1B8B
 Amount of Each Receipt this Period 420.00
 Memo Item

B. DETWILER, DONALD, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 233 STONEHEDGE RD
 City HOLLIDAYSBURG State PA Zip Code 16648-3119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 11 / 04 / 2025
Transaction ID : A4D5D4FA9BEF547558EA
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. DETWILER, PAUL, I., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5029 PENNKNOOLL HTS
 City EVERETT State PA Zip Code 15537-6958
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NEW ENTERPRISE STONE & LIME CO. INC. Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 16000.00

Date of Receipt 11 / 04 / 2025
Transaction ID : AA27FD632EEE5405597E
 Amount of Each Receipt this Period 10000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	15420.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 OF 34
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. FINK, ROBERT, D., ,

Mailing Address 112 TRUMAN BLVD.

City JOHNSTOWN	State PA	Zip Code 15902-1405
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) STIFEL, INC	Occupation (for Individual) FINANCIAL ADVISOR
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2025

Transaction ID : A345374EAB8CA44AA83F

Amount of Each Receipt this Period
1700.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FIRST FRONTIER VENTURES, LLC

Mailing Address 899 PLANK RD

City DUNCANSVILLE	State PA	Zip Code 16635-9432
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
16000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2025

Transaction ID : A3FCAFADEB14E493F97F

Amount of Each Receipt this Period
5000.00

Memo Item

VERIFIED AS FEDERALLY PERMISSIBLE FUNDS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. STUCKEY, MATTHEW, J., ,

Mailing Address 899 PLANK RD

City DUNCANSVILLE	State PA	Zip Code 16635-9432
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) FIRST FRONTIER VENTURES, LLC	Occupation (for Individual) OWNER
---	--------------------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
16000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2025

Transaction ID : A0A23DF14AA974446B0C

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	6700.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:	PAGE 15 OF 34
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. GARDELLA, PETER, , ,

Mailing Address **474 GOLF COURSE RD**

City ALTOONA	State PA	Zip Code 16601-8200
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
420.00

Date of Receipt
11 / 04 / 2025

Transaction ID : AD00BA6EEE5FD4DD6AD

Amount of Each Receipt this Period
420.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. HARTMAN, SCOTT, , ,

Mailing Address **1360 WYNDHAM DRIVE**

City YORK	State PA	Zip Code 17403-4435
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RUTTERS	Occupation (for Individual) MGMT
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12500.00

Date of Receipt
10 / 28 / 2025

Transaction ID : A1ED2AFC536224AB0A8E

Amount of Each Receipt this Period
2500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. HITE, R., LEE, ,

Mailing Address **501 BEAUMONT DRIVE**

City ALTOONA	State PA	Zip Code 16602-2905
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE	Occupation (for Individual) RETIRED
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5500.00

Date of Receipt
11 / 05 / 2025

Transaction ID : AEE472C7DC9624B519EE

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5420.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:	PAGE 16 OF 34
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

A. HUMPHREY, MICHAEL, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 112 SANDSTONE DRIVE
 City HOLLIDAYSBURG State PA Zip Code 16648-9787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UPMC Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 13 / 2025
Transaction ID : AF44025672D2248D88F6
 Amount of Each Receipt this Period 1500.00
 Memo Item

B. HUNYADY, MICHAEL, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1909 S BROAD ST
 City LANSDALE State PA Zip Code 19446-5501
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MOUNTAIN GATE PROPERTIES Occupation (for Individual) AUCTIONEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 11 / 24 / 2025
Transaction ID : A19DEED182F314153902
 Amount of Each Receipt this Period 2500.00
 Memo Item

C. ICKES, JESSE, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3506 ONEIDA AVE.
 City ALTOONA State PA Zip Code 16602-3232
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BECKS, SMITHBOWER, ICKES FINANCIAL, LL Occupation (for Individual) OWNER/FINANCIAL ADVISOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 07 / 2025
Transaction ID : A58982E5ED7444C12991
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 34
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

A. KHOURY, ZIAD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 111 BRITTANY LANE
 City HOLLIDAYSBURG State PA Zip Code 16648-9269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 30000.00

Date of Receipt 11 / 05 / 2025
Transaction ID : AD41D94B0981B4801AB8
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. KIMBERLY, KARA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 JULIAN PIKE
 City JULIAN State PA Zip Code 16844-9761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 05 / 2025
Transaction ID : A647EA8E49D4D4E78B59
 Amount of Each Receipt this Period 1500.00
 Memo Item

C. MAXWELL, RANDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 255 GUNSIGHT PASS ROAD
 City IMLER State PA Zip Code 16655-8966
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAXWELL TRANSPORTATION INC. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 31 / 2025
Transaction ID : ACFBE96637EB845D8BBE
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	11500.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:	PAGE 18 OF 34
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

A. MCLUCAS, MARGARET, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 217 ALDRICH AVE.
 City ALTOONA State PA Zip Code 16602-3203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2025
Transaction ID : A683094A366CA437A885
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. MONTLER, ROBERT, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 688
 City PHILIPSBURG State PA Zip Code 16866-0688
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) LEE INDUSTRIES Occupation (for Individual) CHAIRMAN & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 16000.00

Date of Receipt 10 / 20 / 2025
Transaction ID : A5987E32C612E4874BA7
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. NULTON, ELISSA, M., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3630 SNAKE ROAD
 City COLVER State PA Zip Code 15927-4208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PEERSTAR Occupation (for Individual) MBA
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 24500.00

Date of Receipt 10 / 31 / 2025
Transaction ID : AFF6B6D2D70E94BFF95D
 Amount of Each Receipt this Period 12000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 18000.00
TOTAL This Period (last page this line number only).....▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 OF 34
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

A. ORR, JOSEPH, H., , III
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1183 FRANKSTOWN ROAD
 City HOLLIDAYSBURG State PA Zip Code 16648-2969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) J.C ORR & SONS Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 12 / 2025
Transaction ID : A063032AF870E467EAC1
 Amount of Each Receipt this Period 1500.00
 Memo Item

B. RAYMOND, GARY, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1760 FRANKSTOWN ROAD
 City HOLLIDAYSBURG State PA Zip Code 16648-7184
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADVANCED REGIONAL CENTER Occupation (for Individual) PODIATRIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 11 / 04 / 2025
Transaction ID : A8028C7B224D2457EB60
 Amount of Each Receipt this Period 1500.00
 Memo Item

C. REID, THOMAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 5TH AVE
 City NEW YORK State NY Zip Code 10010-2101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMCAST Occupation (for Individual) ATTORNEY
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 14 / 2025
Transaction ID : A527A73CDEFEB4E1FB85
 Amount of Each Receipt this Period 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	8000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. RIZZO, VICTOR, J., ,

Mailing Address **502 LOGAN BLVD.**

City ALTOONA	State PA	Zip Code 16602-4104
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) INFORMATION REQUESTED	Occupation (for Individual) INFORMATION REQUESTED
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
11 / 12 / 2025

Transaction ID : ACDC64169B0E448C6B81

Amount of Each Receipt this Period
300.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. SCHATZBERG, DANIEL, , ,

Mailing Address **116 E BALTIMORE PIKE**

City MEDIA	State PA	Zip Code 19063-3809
----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) CHIROPRACTOR
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
11 / 12 / 2025

Transaction ID : AA36525F6A60A4ADFB02

Amount of Each Receipt this Period
250.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. SEIPP, RICK, , ,

Mailing Address **117 RED FOX DR**

City DUNCANSVILLE	State PA	Zip Code 16635-8339
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) VALUE DRUG COMPANY	Occupation (for Individual) PHARMACIST
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
10 / 17 / 2025

Transaction ID : A1352203BA3DB4F34B59

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	3050.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

A. SELTZER, AMY, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 306 EAST WARD AVE
 City ALTOONA State PA Zip Code 16602-3213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WEBBER SELTZER WEALTH ADVISORS Occupation (for Individual) PARTNER
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2025
Transaction ID : A8B7C5F17357A4C0381F
 Amount of Each Receipt this Period
 2500.00
 Memo Item

B. SHEETZ, STEPHEN, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5700 SIXTH AVE
 City ALTOONA State PA Zip Code 16602-1111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SHEETZ CORPORATION Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 11000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 07 / 2025
Transaction ID : A9384AE1A67074EF89BD
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. SMITH, BARRY, F., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 153 SMITH TRANSPORT RD.
 City ROARING SPRING State PA Zip Code 16673-2247
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SMITH TRANSPORT, INC Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 14 / 2025
Transaction ID : A9F2C61ED3F324F4D8F5
 Amount of Each Receipt this Period
 10000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	17500.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 34
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. STAPELFELD, BERNARD, , ,

Mailing Address 1460 FOOT OF TEN ROAD

City DUNCANSVILLE	State PA	Zip Code 16635-5500
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MOUNTAIN GATE PROPERTIES	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	04	/	2025

Transaction ID : AC8E25854399148B5BBB

Amount of Each Receipt this Period
1500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. THOMPSON, WILLIAM, D., , III

Mailing Address 369 CANARY DRIVE

City HOLLIDAYSBURG	State PA	Zip Code 16648-3117
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) THOMPSON PHARMACY	Occupation (for Individual) PHARMACIST
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2025

Transaction ID : A1DD669A3C896469DB9C

Amount of Each Receipt this Period
500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. VENTURA, JOHN, T., ,

Mailing Address 243 LINDEN ST

City HOLLIDAYSBURG	State PA	Zip Code 16648-2759
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) COURTESY MOTORS	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
14500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	07	/	2025

Transaction ID : A863084DCD7044DDDA2

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 23 OF 34
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

A. VM ASC LP

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1252

City ALTOONA	State PA	Zip Code 16603-1252
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		21		2025

Transaction ID : A64F1C3D068A74E39BB3

Amount of Each Receipt this Period
5000.00

Memo Item

VERIFIED AS FEDERALLY PERMISSIBLE FUNDS

B. MORRIS, GREG, S., ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 12

City ALTOONA	State PA	Zip Code 16603-0012
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
VM ASC LP REAL ESTATE DEVELOPER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		20		2025

Transaction ID : A144A145630F44471B60

Amount of Each Receipt this Period
2500.00

Memo Item

C. MORRIS, SHANNON, , ,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO BOX 1252

City ALTOONA	State PA	Zip Code 16603-1252
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)
VMASC LP REAL ESTATE DEVELOPER

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		20		2025

Transaction ID : AF60E24EC6FAF4C1D911

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 34
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WARD, WILLIAM, T., , JR.

Mailing Address 1534 SYLVAN DR

City HOLLIDAYSBURG State PA Zip Code 16648-2734

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) WARD TRANSPORT AND LOGISTICS Occupation (for Individual) PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7000.00

Date of Receipt 11 / 12 / 2025
Transaction ID : **A41126EF059B545DA891**

Amount of Each Receipt this Period 1000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
WARD, WILLIAM, T., , SR.

Mailing Address 3521 SYLVAN HEIGHTS DR

City HOLLIDAYSBURG State PA Zip Code 16648-2837

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 11 / 12 / 2025
Transaction ID : **A14BE5C3A7CE0448484D**

Amount of Each Receipt this Period 750.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
YOUNES, NADER, , ,

Mailing Address 132 ELM STREET

City HOLLIDAYSBURG State PA Zip Code 16648-2929

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) PHCA Occupation (for Individual) PHYSICIAN

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 10 / 07 / 2025
Transaction ID : **A9E7C661C152E423DAE5**

Amount of Each Receipt this Period 1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3250.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

A. ZAMMAM, HASSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 176 STONEHEDGE RD
 City HOLLIDAYSBURG State PA Zip Code 16648-9764
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) UPMC ALTOONA Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1562.81

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 02 / 2025
Transaction ID : AB4A2C466694E4C64BBD
 Amount of Each Receipt this Period
 1562.81
 Memo Item

B. ZLUPKO, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 248 HOPE LN
 City ALTOONA State PA Zip Code 16601-7505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PAM HEALTHCARE Occupation (for Individual) PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2604.48

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 03 / 2025
Transaction ID : A527DA4101BAC48DF961
 Amount of Each Receipt this Period
 2604.48
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	4167.29
TOTAL This Period (last page this line number only).....▶	175137.29

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 34
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. AMERICAN CHIROPRACTIC ASSOCIATION PAC

Mailing Address 1701 CLARENDON BLVD
STE 200

City ARLINGTON State VA Zip Code 22209-2700

FEC ID number of contributing federal political committee. **C** C00102764

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 12 / 2025

Transaction ID : A551AF3358C904E0F83C

Amount of Each Receipt this Period
1500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FRIENDS OF JUDY WARD

Mailing Address PO BOX 288

City HOLLIDAYSBURG State PA Zip Code 16648-0288

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 12 / 2025

Transaction ID : AAB1B37A8074E4839935

Amount of Each Receipt this Period
750.00

Memo Item

REFUNDED 12/11/2025

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. KISH BANK POLITICAL ACTION COMMITTEE

Mailing Address 2610 GREEN TECH DR

City STATE COLLEGE State PA Zip Code 16803-2323

FEC ID number of contributing federal political committee. **C** C00757260

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 04 / 2025

Transaction ID : A1F95E64777664A5785E

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3750.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)	PAGE 27 OF 34
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
LIFEPOINT HEALTH PAC - THE PAC OF LIFEPOINT CORPORATE SERVICES, GENERAL PARTNERSHIP (LCSGP)

Mailing Address 330 SEVEN SPRINGS WAY

City BRENTWOOD	State TN	Zip Code 37027-5098
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00347955

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		12		2025

Transaction ID : AC7F4209638504727A1B

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	6250.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

A. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement JFC CC TRANSACTION FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 03 / 2025

FEC Identification Number: C
Transaction ID : B9E3E0E353I
Amount of Each Disbursement this Period: 167.29

Memo Item

B. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement JFC CC TRANSACTION FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 17 / 2025

FEC Identification Number: C
Transaction ID : BAF6DD69BE
Amount of Each Disbursement this Period: 100.30

Memo Item

C. ANEDOT

Full Name (Last, First, Middle Initial)

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement JFC CC TRANSACTION FEE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 06 / 2025

FEC Identification Number: C
Transaction ID : B4342B5EA7
Amount of Each Disbursement this Period: 421.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 689.09

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address 1340 POYDRAS ST
STE 1770

City NEW ORLEANS State LA Zip Code 70112-5204

Purpose of Disbursement
JFC CC TRANSACTION FEE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
11 / 24 / 2025

FEC Identification Number

C
Transaction ID : B982E079D0!
Amount of Each Disbursement this Period
100.30

Memo Item

Full Name (Last, First, Middle Initial)

B. PROFESSIONAL DATA SERVICES, INC.

Mailing Address 824 S MILLEDGE AVE
STE 101

City ATHENS State GA Zip Code 30605-1332

Purpose of Disbursement
JFC COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
11 / 24 / 2025

FEC Identification Number

C
Transaction ID : B438846BD!
Amount of Each Disbursement this Period
2055.42

Memo Item

Full Name (Last, First, Middle Initial)

C. STRIPE

Mailing Address 510 TOWNSEND STREET

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement
JFC CC TRANSACTION FEE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
10 / 16 / 2025

FEC Identification Number

C
Transaction ID : B01EFD2239
Amount of Each Disbursement this Period
533.70

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2689.42

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

Full Name (Last, First, Middle Initial)

A. STRIPE

Mailing Address 510 TOWNSEND STREET

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement JFC CC TRANSACTION FEE
Candidate Name
Category/Type 001

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
11 / 10 / 2025

FEC Identification Number
C
Transaction ID : B588DFDA1C
Amount of Each Disbursement this Period
235.30
 Memo Item

Full Name (Last, First, Middle Initial)

B. THE CW GROUP

Mailing Address 1152 MAE ST
STE 129

City HUMMELSTOWN State PA Zip Code 17036-9185

Purpose of Disbursement JFC FUNDRAISING CONSULTING
Candidate Name
Category/Type 001

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
10 / 09 / 2025

FEC Identification Number
C
Transaction ID : BD1A448D1C
Amount of Each Disbursement this Period
1500.00
 Memo Item

Full Name (Last, First, Middle Initial)

C. THE CW GROUP

Mailing Address 1152 MAE ST
STE 129

City HUMMELSTOWN State PA Zip Code 17036-9185

Purpose of Disbursement JFC FUNDRAISING CONSULTING
Candidate Name
Category/Type 001

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
MM / DD / YYYY
11 / 06 / 2025

FEC Identification Number
C
Transaction ID : B813941B7D
Amount of Each Disbursement this Period
27415.00
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

29150.30

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

Full Name (Last, First, Middle Initial)

A. THE CW GROUP

Mailing Address 1152 MAE ST
STE 129

City
HUMMELSTOWN

State
PA

Zip Code
17036-9185

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2025			

FEC Identification Number

C []
Transaction ID : B441BB4CD6

Amount of Each Disbursement this Period

[] 1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. THE CW GROUP

Mailing Address 1152 MAE ST
STE 129

City
HUMMELSTOWN

State
PA

Zip Code
17036-9185

Purpose of Disbursement
JFC FUNDRAISING CONSULTING

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			11			2025			

FEC Identification Number

C []
Transaction ID : B97843B05Ct

Amount of Each Disbursement this Period

[] 22598.85

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

[]

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[] 24098.85

TOTAL This Period (last page this line number only)..... ▶

[] 56627.66

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

Full Name (Last, First, Middle Initial)

A. DR JOHN JOYCE FOR CONGRESS

Mailing Address 1002 LOGAN BLVD
STE 114 #237

City ALTOONA State PA Zip Code 16602-4067

Purpose of Disbursement TRANSFER OF NET JFC FUNDS
Category/Type **008**

Candidate Name JOYCE, JOHN, , ,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: PA District: 13

Date of Disbursement
M M / D D / Y Y Y Y Y
11 / 24 / 2025

FEC Identification Number
C C00674259
Transaction ID : BFA94152D3!
Amount of Each Disbursement this Period
65476.49

Memo Item

Full Name (Last, First, Middle Initial)

B. DR JOHN JOYCE FOR CONGRESS

Mailing Address 1002 LOGAN BLVD
STE 114 #237

City ALTOONA State PA Zip Code 16602-4067

Purpose of Disbursement TRANSFER OF NET JFC FUNDS
Category/Type **008**

Candidate Name JOYCE, JOHN, , ,

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: PA District: 13

Date of Disbursement
M M / D D / Y Y Y Y Y
11 / 24 / 2025

FEC Identification Number
C C00674259
Transaction ID : B9D3A147B0!
Amount of Each Disbursement this Period
32308.59

Memo Item

Full Name (Last, First, Middle Initial)

C. NRCC

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement TRANSFER OF NET JFC FUNDS
Category/Type **008**

Candidate Name NRCC

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement
M M / D D / Y Y Y Y Y
11 / 24 / 2025

FEC Identification Number
C C00075820
Transaction ID : B4ED27FD13
Amount of Each Disbursement this Period
8284.25

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

106069.33

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TEAM JOYCE FOR PENNSYLVANIA

Full Name (Last, First, Middle Initial)

A. NRCC

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003-1838

Purpose of Disbursement TRANSFER OF NET JFC FUNDS
Candidate Name NRCC
Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

008
Category/
Type

Date of Disbursement
M M / D D / Y Y Y Y Y Y
11 / 24 / 2025

FEC Identification Number
C C00075820
Transaction ID : B5B70F15E11
Amount of Each Disbursement this Period
36864.93

Memo Item

Full Name (Last, First, Middle Initial)

B. REJOICE PAC

Mailing Address 824 S MILLEDGE AVE
STE 101

City ATHENS State GA Zip Code 30605-1332

Purpose of Disbursement TRANSFER OF NET JFC FUNDS
Candidate Name REJOICE PAC
Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

008
Category/
Type

Date of Disbursement
M M / D D / Y Y Y Y Y Y
11 / 24 / 2025

FEC Identification Number
C C00691501
Transaction ID : BAB90D2E07
Amount of Each Disbursement this Period
39184.52

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement
Candidate Name
Office Sought: House Senate President
State: District: Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement
M M / D D / Y Y Y Y Y Y

FEC Identification Number
C
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

76049.45
182118.78

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TEAM JOYCE FOR PENNSYLVANIA

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JUDY WARD

Mailing Address PO BOX 288

City
HOLLIDAYSBURG

State
PA

Zip Code
16648-0288

Purpose of Disbursement

REFUND

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B493E2B88B

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶