Campaign Finance Report

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

Filer Identificati Number :	on 2018	3C0682			Repo Filed		<i>'</i> :	CAN	IIDI	DATE	\	CC	COMMITTEE LOBBYIST							
Name of Filing C	Committee, Candid	late or L	obbyist:		MILLE	R,	CYN	THIA	L											
Street Address:																				
City:								State	:				Zip Code	e: 18	880					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		30 DA		Р	OST-	3.		AMENDME REPORT?	NT	Yes	N	0	\		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.		30 DA		Р	OST-	6.		TERMINATION REPORT?		Yes	٨	0	\		
report type)	ANNUAL REPORT	7.	Year 2018					IG ME					PAPER		V	DISK	ETTE			
Name of Office S	Sought by Candida	ite:	•					DAT	E O	F ELE	СТІ	ON	District Number	Office Code	Par	ty Cod	e Cou			
								МО		DAY	,	YEAR	183	STH	REF)	48			
REPRESENTATI	VE IN THE GENE	RAL ASS	EMBLY						11		6	2018		(SEE IN	STRUCTI	ONS FOI	CODES	5)		
Summary of	Receipts and	МО	DAY	YEAR	1			МО		DAY		YEAR	FOF	OFFI	CE USE	ONLY	7			
Expenditures	from:		1 1	2	018	TC)		4	:	30	2018								
A. Amount Bro	ught Forward Fro	m Last R	eport				\$					0.00								
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	1 Sche	dule I	:)	\$					0.00								
C. Total Funds	Available (Sum O	f Lines A	and B)				\$					0.00								
D. Total Expend	ditures (From Sch	edule II	I)				\$					397.50								
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$				(:	397.50)								
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)		\$					0.00								
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV	')			\$					0.00								
				AFF	ΊDΑ\	/IT	SE	CTIC	N											
PART I - If this is	s a Committee rep	ort, trea	surer sign	here. 1	If this	is a	Can	ndidat	e re	port, o	cano	didate si	jn here.							
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached sc	hedules	s filed o	on p	aper (or by e	lectr	onic m	ediu	m, are to	the best of	my knov	wledge	and be	lief , tı	rue		
Sworn to and subs	cribed before me thi day of	s	20						•			Signature	of Person	Submit	ing Re	ort		_		
	Signati	ıre				_							Printe	ed Name	•			_		
My Commission Ex	kpires								-				Email					_		
	мо	D	AY	YR						Are	ea C	ode	Daytime	Teleph	one Nu	mber				
Part II- If this is	a report of a can	didate's	authorized	Comn	nittee,	, Ca	ndida	ate sh	alls	sign he	ere.									
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and beli	ef this	politic	al c	ommi	ittee h	as no	ot viola	ted a	any provis	ions of the	act of J	une 3,1	937 (P	.L. 133	з,		
Sworn to and subsc	ribed before me this											S	ignature of	Candid	ate			-		
	day of —— ————												Printed	Name				_		
	Signature								_									_		
My Commission Exp	_								-				Email							
	МО	D	AY	YR		_				Area	Cod	e	Day	time T	elephor	ne Num	ber	_		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
MILLER, CYNTHIA L	From:	1/1/201	<u>8</u> To:	4/30/2018
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	g 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	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

PAGE TOTAL\$ 0.00

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 Filling Committee of Candidate			Reporting Period From: To:					
					DATE		Al	MOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	١					

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

PAGE TOTAL \$ 0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	me of Filing Committee or Candidate			Reporting Period						
			Fron	n:		То	То:			
				D	ATE		АМО	DUNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plu	s 4)							
Employer Name				Occupat	tion					
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PAC	GE TOTAL 0.00		

OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or	Candidate		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		А	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•		•	•	
Enter Grand Total of Part E o	on Schedule I. Detailed	l Summary Page	Section	4			P/	AGE TOTAL
	Juliana 1/ Butanet	. January rage,		••			\$	0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period	d	
MILLER, CYNTHIA L	From:	<u>1/1/2018</u> To:	4/30/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Reporting	Period				
					From:			То:		
						DAT	E			AMOUNT
Full Name of Contributor					мо	DAY	,	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus	4)						
Employer of Contributor					Оссир	ation				
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zi 4)	p Code(Pl)	us	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed					PAGE TOTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period			
MILLER, CYNTHIA L			From	<u>1/</u>	1/2018	То:	4/30/2018
				DATE			AMOUNT
To Whom Paid Ron's Notary Service			мо	DAY	YEAR		
Mailing Address 2673 Kirk	Street		3	1	2018	\$	15.00
City Slatington	State PA	Zip Code (Plus 4) 18080	Descrip notary				
To Whom Paid Commonwealth of PA			мо	DAY	YEAR		
Mailing Address 210 North	Office Bldg		3	5	2018	\$	100.00
City Harrisburg	State PA	Zip Code (Plus 4) 17120	1	otion of Expee for petit			
To Whom Paid Park Harrisburg			МО	DAY	YEAR		
Mailing Address 223 Walnu	ut Street		3	5	2018	\$	10.00
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Descrip parking	otion of Exp	penditure		
To Whom Paid Committee to Elect Cindy Mill	ler		мо	DAY	YEAR		
Mailing Address 4797 N Cy	press Road		4	11	2018	\$	200.00
City Walnutport	State PA	Zip Code (Plus 4) 18088		otion of Exp		2	
To Whom Paid U.S. Post Office	·		мо	DAY	YEAR		
Mailing Address 249 Lehig	h Gap Street		4	21	2018	\$	72.50
State Zip Code (Plus 4) PA 18088			Descrip postage	otion of Exp e	enditure	<u> </u>	
Enter Grand Total of Ever	aditures en Base 1. Ba	anort Cover Page Them !					PAGE TOTAL
Enter Grand Total of Expe	iuitures on Page 1, Re	port Cover Page, Item I	<i>)</i> .			\$	397.50