Campaign Finance Report

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

Filer Identificat Number :	ion	20180	C0122			Repor Filed		CA	NDII	DATE	✓	co	OMMITTE		LOBE	BYIST	
Name of Filing (Committee,	Candida	ate or Lo	obbyist:		MIKE S	TAC	ĸ									•
Street Address:																	
City:								State	e:				Zip Cod	e: 19	116		
TYPE OF REPORT	6TH TUESD PRE-PRIMA		1. X	2ND FRIDA PRIMARY	Y PRE-	· 2.		DAY MARY	Ρ	POST-	3.		AMENDMENT Yes N REPORT?			No	 Image: A start of the start of
(place X to the right of	6TH TUESD PRE-ELECT		4.	2ND FRIDA ELECTION	Y PRE	- 5.		DAY POST- 6. ECTION					TERMINATION REPORT?		Yes	No	>
report type)	ANNUAL R	EPORT	7.	Year 2018					METHOD ECK ONE				PAPER		\checkmark	DISKE	TTE
Name of Office S	⊥ Sought by C	andidat	:e:					DAT	E O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
								мо		DAY	YE	AR	-1	LTG	DEN	1	
LIEUTENANT GOVERNOR									11		6	2018		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of	Receipts	and	мо	DAY	YEAR			мо		DAY	YE	AR	FO	R OFFIC	e use	ONLY	
Expenditures	s from:			1 1	20	018 1	Ю		3	2	26	2018					
A. Amount Bro	ught Forwa	rd From	1 Last R	eport				\$				0.00	1				
B. Total Monet	ary Contrib	utions A	And Rec	eipts (Fron	n Schee	dule I)		\$				0.00					
C. Total Funds	C. Total Funds Available (Sum Of Lines A and B)							\$				0.00					
D. Total Expen	ditures (Fro	om Sche	edule II	1)				\$			3,1	86.08					
E. Ending Cash	n Balance (S	Subtract	Line D	From Line	C)			\$				0.00					
F. Value Of In-	Kind Contri	butions	Receiv	ed (From S	chedul	le II)		\$				0.00	-				
G. Unpaid Deb	ts And Oblig	gations	(From S	Schedule IV	')			\$				0.00					
					AFF	IDAV	IT S	ECTIO	ΟN								
PART I - If this i	s a Commit	tee repo	ort, trea	surer sign	here. I	If this i	s a C	andida	te re	eport, c	andid	late sig	gn here.				
I swear (or affirm correct and compl		port, inclu	uding the	e attached sc	hedules	filed on	pape	er or by e	electr	ronic m	edium,	are to t	the best of	my know	ledge	and beli	ef , true
Sworn to and subs	scribed before day of	e me this		20							Si	gnature	e of Person	Submitt	ing Rep	ort	
		Signatur					_						Print	ed Name			
My Commission E	xpires	Signatar	C .						-				Emai				
	M	0	D	AY	YR					Are	ea Cod	e	Daytime	e Telepho	one Nu	mber	
Part II- If this is	a report o	f a cand	lidate's	authorized	Comm	nittee, O	Candi	idate sl	hall s	sign he	ere.						
	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 subso	cribed before day of	me this		20				Signature of Candidate									
													Printee	i Name			
My Commission Exp		gnature					_		-				Emai	1			
							_										
		мо	D	AY	YR					Area	Code		Da	ytime Te	lephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** MIKE STACK From: <u>1/1/2018</u> **To:** 3/26/2018 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 0.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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			Re	porting	Period			
Fr				From: To:				
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

\$

PART B ALL OTHER CONTRIBUTIONS \$50.01 TO \$250.00 Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part A)								
Name of Filing Committee or Candidat	e			orting P	eriod			
			Fro	m:		Тс):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	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 Cand	Name of Filing Committee or Candidate			J Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

PART D ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of

over \$250.00 in the reporting period.

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

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

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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		Report	ting Perio	od				
						То:	:		
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description				1	1	1			
Enter Grand Total of Part E	on Schodulo I. Dotailog		Section	4				PAGE TOT	AL
Linter Granu Total of Part E		i Suillilai y Page,	Section				\$		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		
MIKE STACK	From:	<u>1/1/2018</u> To:	<u>3/26/2018</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	g Period			
Fr						То:	
				DATE		АМО	UNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address	Mailing Address					\$	0.00
City	State	Zip Code (Plus 4)	,				
Description of Contribution:							
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

0.00

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

Name of Filing Committee or (me of Filing Committee or Candidate				Rep	oorting P	eriod			
					Fro	m:		То:		
							DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupat	l tion		<u> </u>	
Employer Mailing Address/Prin Business	ncipal Place of	City		State		Zip 4)	Code(Plus	Descri	ption of	Contribution
Enter Grand Tatal of Dart	C on Schodula II		Contribut			d				PAGE TOTAL

	1
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAGE

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	9		Reporting Period						
MIKE STACK	From	<u>1/</u>	<u>3/26/2018</u>						
				DATE	AMOUNT				
To Whom Paid THE COMMITTEE TO ELECT MIKE STAC	To Whom Paid THE COMMITTEE TO ELECT MIKE STACK				YEAR				
Mailing Address PO BOX 292			2	1	2018	\$	3,186.08		
City NEWTOWN	State PA	Zip Code (Plus 4) 18940		otion of Exp JRSE TRA\					
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL		
	on Fage 1, K	eport cover Page, Item L				\$	3,186.08		