### **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 201	8C1157			Rep File	port ed B		CAN	DII	DATE	IDIDATE COMMITTEE LOBBYIST					BYIS <sup>.</sup>	Г	
Name of Filing C	ommittee, Candi	date or L	obbyist:		CAM	1501	۷, JO	SHUA	HAF	RRIS								
Street Address:																		
City:	_							State:	!				Zip Code	e: 19	9438			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE							AMENDME REPORT?	NT	Yes		No	<b>\</b>		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	Ē- [	5.	30 DA		P	OST-	6.		TERMINAT REPORT?	ΓΙΟΝ	Yes		No	<b>/</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2018				FILING METHOD ( ) CHECK ONE						PAPER		<b>\</b>	DIS	KETTE	
Name of Office S	ought by Candida	ate:	-					DATE	0	F ELE	CTI	ON	District Number	Office Code	Pai	ty Co	de Cou Cod	
								МО		DAY	١	<b>YEAR</b>	147	STH	DEI	М	46	
REPRESENTATIVE IN THE GENERAL ASSEMBLY									11		6	2018	<u> </u>	(SEE IN	STRUCTI	ONS FO	R CODE	S)
Summary of		МО	DAY	YEAR	R			МО		DAY	١	YEAR	FOF	OFFI	CE USE	ONL	Y	
Expenditures	from:		1 1	2	018	Т	0		4		30	2018						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				(2,	000.00)						
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)				\$				(2,	000.00)						
D. Total Expend	ditures (From Sch	nedule II	I)				\$					0.00						
E. Ending Cash	Balance (Subtra	t Line D	From Line	C)			\$				(2,0	00.00)						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II	:)	\$					0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV	<b>(</b> )			\$					0.00						
				AFF	IDA	١٧٢	T SE	CTIO	N									
PART I - If this is	a Committee rep	ort, trea	surer sign	here. I	If thi	is is	a Car	ndidate	e re	port, c	cand	lidate si	gn here.					
I swear (or affirm) correct and complete	that this report, incete.	cluding the	e attached sc	hedules	s filed	d on	paper	or by el	ectr	onic m	ediu	m, are to	the best of	my kno	wledge	and b	elief , t	rue
Sworn to and subs	cribed before me th day of	is	20						-			Signatur	e of Person	Submit	ting Re	oort		
	Signat	ure					<b>-</b>		•				Printe	ed Name	•			_
My Commission Ex	_								-				Email					_
	мо	D	AY	YR			_			Arc	ea Co	ode	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	e, C	andid	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and beli	ief this	polit	tical	comm	ittee ha	s no	ot viola	ted a	any provis	ions of the	act of J	une 3,1	937 (1	P.L. 133	33,
Sworn to and subsc	ribed before me this	i										s	ignature of	Candid	ate			-
	day of ————————————————————————————————————						_						Printed	Name				- $ $
	Signature						-		_									_
My Commission Exp	_												Email					
	МО	D	AY	YR	1		•			Area	Code	e	Day	time T	elephor	ne Nur	nber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period						
CAMSON, JOSHUA HARRIS	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 an 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

	his Part to itemize onl with an aggregate val	-			•			
Name of Filing Comm	ittee or Candidate		Re					
		From:			То	:		
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	•	•			•	•		PAGE TOTAL

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

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:					
			l		DATE			AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							

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

**PAGE TOTAL \$** 0.00

#### **PART 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	nme 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.)

ame of Filing Committee or Candidate			Reporting Period							
				From:				То:		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City State Zip Code (Plus 4)				4)						
Employer Name		•			Occupation					
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	Code (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	<b>TAL</b> 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 Ca	ndidate		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 on	Schedule T Detailed	l Summary Page	Section	4			P	AGE TOTAL
zinci. Grana rotal or rait z on	ocilculate 1, Detailet	z cammary r uge,	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		
CAMSON, JOSHUA HARRIS	From:	<u>1/1/2018</u> <b>To:</b>	4/30/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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						<b>\$</b>	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	ame of Filing Committee or Candidate				Re	porting	Period				
					From:			То	То:		
					•		DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•					Occupa	ation				
Employer Mailing Address/Principal Place of Business City State						Zip 4)	Code(Plus	Desc	cript	ion of	f Contribution
Enter Grand Total of Part G on Schedule II, In-Kind Contributions De Summary Page, Section 3.				etaile	ed					PAGE TOTAL 0.00	

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	е		Reporti	ng Period				
						То:		
				DATE			AMOUNT	
To Whom Paid	мо	DAY	YEAR					
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)	Descri	otion of Ex	penditure			
Enter Grand Total of Expenditures					PAGE TOTAL			
Lines Grand Total Of Expenditures	on rage 1, Ke	eport Cover Page, Item D	•			\$	0.00	