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	C0944				port ed B		CAND	IDATE	*	CC	MMITTEE		LOBI	BYIST		
Name of Filing C	committe	e, Candida	ate or L	obbyist:		APF	PLEB.	ACH,	THOMAS	S LEE								
Street Address:																		
City:									State:				Zip Code	e: 18	062			
TYPE OF REPORT	6TH TUES	_	1.	2ND FRIDA PRIMARY	Y PRE	:-	2. X	30 DA		POST-	3.		AMENDME REPORT?	NT	Yes	No)	√
(place X to the right of	6TH TUES		4.	2ND FRIDA ELECTION	Y PRI	Ē-	5.	30 DA		POST-	6.		TERMINAT REPORT?	ΓΙΟΝ	Yes	No)	√
report type)	ANNUAL	. REPORT	7.	Year 2018					NG METH CHECK (PAPER	PAPER		DISKE	TTE	
Name of Office S	Sought by	/ Candidat	:e:						DATE (OF ELE	СТІ	ON	District Number	Office Code	Par	ty Code	Cour	
									МО	DAY	,	YEAR	134	STH	DEN	1	39	
REPRESENTATI	VE IN TH	HE GENER	AL ASS	EMBLY					1:	1	6	2018		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		s and	МО	DAY	YEAR	2			МО	DAY	,	YEAR	FOF	ROFFIC	E USE	ONLY		
Expenditures	from:			1 1	2	018	T	0	4	4	30	2018						
A. Amount Bro	ught For	ward Fron	ı Last R	eport				\$	_		1	,012.32						
B. Total Monet	ary Contr	ibutions A	And Rec	eipts (From	Sche	dule	e I)	\$			5	5,120.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$			6	5,132.32						
D. Total Expend	ditures (I	From Sche	edule II	I)				\$				932.26						
E. Ending Cash	Balance	(Subtract	Line D	From Line (C)			\$			5	,200.06						
F. Value Of In-	Kind Con	tributions	Receiv	ed (From S	chedu	le I	I)	\$				0.00						
G. Unpaid Debt	s And Ob	oligations	(From S	Schedule IV	')			\$				0.00		,				
					AFF	ID	AVI	T SE	CTION									
PART I - If this is	s a Comm	nittee repo	ort, trea	surer sign	here.	If th	nis is	a Car	ndidate ı	eport,	can	didate sig	gn here.					
I swear (or affirm) correct and comple		report, incl	uding the	attached scl	hedule	s file	d on	paper	or by elec	tronic m	ediu	ım, are to t	the best of	my know	/ledge	and beli	ef , tr	ue
Sworn to and subs	cribed bef day of	ore me this		20								Signature	e of Person	Submitt	ing Rep	ort		_
	_	Signatur	·e					<u>-</u>					Printe	ed Name				-
My Commission Ex	cpires							_					Email					_
		МО	D	AY	YR					Ar	ea C	ode	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report	of a cand	lidate's	authorized	Comr	nitte	ee, C	andid	ate shal	l sign h	ere.							
I swear (or affirm) No 320) as amende		ne best of m	y knowle	edge and beli	ef this	poli	itical	comm	ittee has	not viola	ted	any provis	ions of the	act of Ju	ine 3,1	937 (P.L	133	3,
Sworn to and subsc		re me this										s	ignature of	Candida	te			-
	day of —							_					Printed	Name				_
		Signature						-					- mited					_
My Commission Exp		- 3											Email			_		_
	_	МО	D	AY	YR	ł		-		Area	Cod	e	Day	time Te	lephon	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
APPLEBACH, THOMAS LEE	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) Period	(1)	\$	145.00
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)	\$	300.00		
TOTAL for the Reporting) Period	(2)	\$	300.00
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)			\$	4,675.00
TOTAL for the Reporting	Period	(3)	\$	4,675.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	5,120.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Name of Filing Committe	e or Candidate		Reporting	Period			
			From:		То	:	
		L		DATE			AMOUNT
Full Name of Contributing	Committee		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

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee or Candidate Report				porting Period					
APPLEBACH, THOMAS LEE			From:		<u>1/1/2</u>	2 <u>018</u> To	4/30/2018		
				ı	DATE		AMOUNT		
Full Name of Contributor Patricia Blatt			м	10	DAY	YEAR			
Mailing Address 2631 Terrwood Dr.	W				4.4	2010	\$ 200.00		
City Macungie,	State PA	Zip Code (Plus 4) 18062		4	11	2018			
Full Name of Contributor Rochelle Kaplan			M	10	DAY	YEAR			
Mailing Address 3153 Masters Hill R	oad						\$ 100.00		
City Fogelsville	State PA	Zip Code (Plus 4) 18051		1	29	2018			

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

PAGE TOTAL \$ 300.00

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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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					Reporting Period					
APPLEBACH, THOMAS LEE				Fror	n:	1/1/2	<u>018</u> To):	<u>4/3</u>	0/2018
					DA	TE			AMOUN	т
Full Name of Contributor Steven Altomare					мо	DAY	YEAR			
Mailing 1243 N Grange Ave								\$		100.00
City Collegeville	State PA	•	Code (Plus	· 4)	3	18	2018	3		
Employer Name Precis Engineering Inc	2				Occupat	ion P	harma	ceutica	al Engine	er
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip (Code (Plu	s 4)
20 S Maple St			Ambler			PA		190	002	
Full Name of Contributor Steven Altomare					МО	DAY	YEAR			
Mailing Address 1243 N Grange Ave								\$		250.00
City Collegeville	State PA		Code (Plus	i 4)	3	2	2018	3		
Employer Name Precis Engineering Inc					Occupat	ion P	harma	ceutica	al Engine	er
Employer Mailing Address/Principal Plac Business	e of		City		l	State		Zip (Code (Plu	s 4)
20 S Maple St			Ambler			PA		190	002	
Full Name of Contributor Joseph Lynch					мо	DAY	YEAR			
Mailing 39 Angstadt Rd.								\$		2,600.00
City Fleetwood	State PA		Code (Plus	: 4)	4	26	2018	3		
Employer Name None					Occupat	ion R	Retired			
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip (Code (Plu	s 4)
39 Angstadt Rd.			Fleetwoo	d		PA		195	522	

							•			
Full Name of Contributor Joseph Lynch				мо	DAY	YEAR				
Mailing 39 Angstadt Rd.							\$ 850.00			
	State	7:n C	ode (Plus 4)	4	17	2018				
City Fleetwood	PA	1952								
		1932								
Employer Name None				Occupat	ion R	etired				
Employer Mailing Address/Principal Plac Business	e of		City		State		Zip Code (Plus 4)			
39 Angstadt Rd.			Fleetwood	PA 19522						
Full Name of Contributor				мо	DAY	YEAR				
Steven Altomare							Ц			
Mailing 1243 N Grange Ave							\$ 125.00			
City Collegeville	State	Zip C	ode (Plus 4)	2	23	2018				
	PA	1942	26							
Employer Name Precis Engineering Inc					Occupation Pharmaceutical Engineer					
Employer Mailing Address/Principal Place of City					State	I	Zip Code (Plus 4)			
Business 20 S Maple St			Ambler		PA		19002			
					1					
Full Name of Contributor Steven Altomare				мо	DAY	YEAR				
Mailing 1243 N Grange Ave							\$ 250.00			
	State	7in C	ode (Plus 4)	4	26	2018				
City Collegeville	PA	1942								
		1372	.0							
Employer Name Precis Engineering Ind				Occupat	ion P	harmac	eutical Engineer			
Employer Mailing Address/Principal Plac Business	e of		City		State		Zip Code (Plus 4)			
20 S Maple St			Ambler		PA		19002			
Full Name of Contributor				мо	DAY	YEAR				
Steven Altomare							Ц			
Mailing Address 1243 N Grange Ave						\$ 250.00				
Address						2018				
City Collegeville	State	Zip C	code (Plus 4)	2	7	2010				
	State PA	Zip C		2	7	2010				
	PA			2 Occupat	ion		eutical Engineer			
City Collegeville Employer Name Precis Engineering Inc Employer Mailing Address/Principal Plac	PA	1942			ion					
City Collegeville Employer Name Precis Engineering Inc	PA	1942	26		ion P		eutical Engineer			

Full Name of Contributor Steven Altomare		МО	DAY	YEAR			
Mailing 1243 N Grange Ave		4 20			\$ 250.00		
City Collegeville	State PA	Zip Code (Plus 4) 19426	4	4	2018		
Employer Name Precis Engineering Inc	:		Occupation Pharmaceutical Engineer				
Employer Mailing Address/Principal Place Business	City	State			Zip Code (Plus 4)		
20 S Maple St		Ambler		PA		19002	

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

PAGE TOTAL	
\$ 4,675.00	

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		AI	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	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 1, Betanet	. Jammar y r uge,	500.011				\$	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		
APPLEBACH, THOMAS LEE	From:	<u>1/1/2018</u> To:	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 Candidate Ro				Reporting 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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL	
Section 2.	iedule II, III-KII	ia Contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting P	Period			
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ty	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Cind C	Contributions De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
APPLEBACH, THOMAS LEE			From	1/:	То:	4/30/2018		
				DATE			AMOUNT	
To Whom Paid GODADDY.COM			мо	DAY	YEAR			
Mailing Address 14455 N H	Hayden Rd Ste 226		1	26	2018	\$	84.80	
City Scottsdale	State AZ	Zip Code (Plus 4) 85260		otion of Exp ss Cards	enditure			
To Whom Paid GODADDY.COM			мо	DAY	YEAR			
Mailing Address 14455 N Hayden Rd Ste 226			2	5	2018	\$	3.75	
City Scottsdale	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			

	AZ	85260	Service Charge					
To Whom Paid GODADDY.COM			мо	DAY	YEAR			
Mailing Address 14455 N Hayden Rd	Ste 226		2	9	2018	\$	7.08	
City Scottsdale	Zip Code (Plus 4) 85260	l '	otion of Exp	enditure				

	nom Paid ADDY.COM				мо	DAY	YEAR	
Mailin	g Address 14	1455 N Hayden Rd	Ste 226		2	14	2018	\$ 0.38
City	Scottsdale		State AZ	Zip Code (Plus 4) 85260	l '	tion of Exp	enditure	

To W	om Paid				мо	DAY	YEAR		
GODA	DDY.COM				1-10		· Z/ux		
Mailin	g Address	14455 N Hayden Rd	Sto 226		2	21	2018	¢.	42.00
		14455 N Haydell Ru	Ste 226		2	21	2010	\$	12.00
City	Scottsdale		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		

Mailing Address 14455 N Hayden F	d Ste 226		2	21	2018	\$ 12.00
City Scottsdale	State AZ	Zip Code (Plus 4) 85260	· ·	tion of Exp	enditure	

To Whom Paid GODADDY.COM	мо	DAY	YEAR	1	
Mailing Address 14455 N Hayden Rd Ste 226		3	1 201	.8	\$ 300.00
Scottsuale		cription of I		ure	
To Whom Paid GODADDY.COM	мо	DAY	YEAR		
Mailing Address 14455 N Hayden Rd Ste 226		3	5 201	.8	\$ 105.00
Scottsuale		cription of I		ure	
To Whom Paid GODADDY.COM	мо	DAY	YEAR		
Mailing Address 14455 N Hayden Rd Ste 226		3	4 201	.8	\$ 4.88
	Code (Plus 4)	cription of I	vnenditi	ure	
Scottsuale	Des	vice Charge	xpenuiti		
Scottsuale	Des		YEAR		
To Whom Paid	260 Serv	DAY	1	1	\$ 11.61
To Whom Paid GODADDY.COM Mailing Address 14455 N Hayden Rd Ste 226 City Scottsdale State Zip C	260 Serv MO Code (Plus 4) Desc	DAY	YEAR 9 201	.8	\$ 11.61
To Whom Paid GODADDY.COM Mailing Address 14455 N Hayden Rd Ste 226 City Scottsdale State Zip C	260 Serv MO Code (Plus 4) Desc	DAY 3 cription of I	YEAR 9 201	8 8 ure	\$ 11.61
To Whom Paid GODADDY.COM Mailing Address 14455 N Hayden Rd Ste 226 City Scottsdale State Zip C AZ 852 To Whom Paid	260 Serv MO Code (Plus 4) Desc 260 Serv	DAY 3 cription of I	YEAR 9 201 xpendite	8 8 ure	\$ 11.61
To Whom Paid GODADDY.COM Mailing Address 14455 N Hayden Rd Ste 226 City Scottsdale State Zip C AZ 852 To Whom Paid GODADDY.COM Mailing Address 14455 N Hayden Rd Ste 226 City Scottsdale State Zip C 852	260 Service Service Service Service (Plus 4) Description MO Code (Plus 4) Description Description Code (Plus 4) Description D	DAY 3 cription of I	YEAR 9 201 xpenditu YEAR 1 201	8 ure	
To Whom Paid GODADDY.COM Mailing Address 14455 N Hayden Rd Ste 226 City Scottsdale State Zip C AZ 852 To Whom Paid GODADDY.COM Mailing Address 14455 N Hayden Rd Ste 226 City Scottsdale State Zip C 852	260 Service Service Service Service (Plus 4) Description MO Code (Plus 4) Description Description Code (Plus 4) Description D	DAY 3 cription of I vice Charge DAY 3 2 cription of I	YEAR 9 201 xpenditu YEAR 1 201	8 8 ure	
To Whom Paid GODADDY.COM Mailing Address 14455 N Hayden Rd Ste 226 City Scottsdale State AZ 852 To Whom Paid GODADDY.COM Mailing Address 14455 N Hayden Rd Ste 226 City Scottsdale State AZ 852 To Whom Paid GODADDY.COM Mailing Address 14455 N Hayden Rd Ste 226 City Scottsdale State AZ 852 To Whom Paid	260 Serv Code (Plus 4) Desc Serv MO Code (Plus 4) Desc Serv Code (Plus 4) Desc Serv	DAY 3 cription of I vice Charge DAY 3 2 cription of I vice Charge	YEAR 9 201 xpendite YEAR 1 201 xpendite	8 ure	

							PAGE 15
To Whom Paid GODADDY.COM			мо	DAY	YEAR		
Mailing Address 14455 N	N Hayden Rd Ste 226		4	2	2018	\$	23.08
City Scottsdale	State AZ	Description of Expenditure Office supplies					
To Whom Paid GODADDY.COM	·		мо	DAY	YEAR		
Mailing Address 14455 N	N Hayden Rd Ste 226		4	4	2018	\$	6.30
City Scottsdale	State AZ	Zip Code (Plus 4) 85260	1	otion of Exp	penditure		
To Whom Paid GODADDY.COM			МО	DAY	YEAR		
Mailing Address 14455 N	N Hayden Rd Ste 226		4	4	2018	\$	41.00
City Scottsdale	State AZ	Zip Code (Plus 4) 85260	1	otion of Exp			
To Whom Paid GODADDY.COM	·		мо	DAY	YEAR		
Mailing Address 14455 N	N Hayden Rd Ste 226		4	10	2018	\$	11.50
City Scottsdale	State AZ	Zip Code (Plus 4) 85260	1	otion of Exp Charge	penditure		
To Whom Paid GODADDY.COM	·		мо	DAY	YEAR		
Mailing Address 14455 N	N Hayden Rd Ste 226		1	8	2018	\$	83.88
City Scottsdale	State AZ	Zip Code (Plus 4) 85260	Descrip web se	ntion of Exp rvices	penditure		
Enter Grand Total of Eve	penditures on Page 1, Repo	ort Cover Page Item D					PAGE TOTAL
Linter Granu Total Of Exp	enatures on Page 1, Repo	oit cover rage, Item D	•			\$	932.26