

Campaign Finance Report

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

Filer Identification Number :		20150331		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: MILLER, CINDY COMMITTEE TO ELECT												
Street Address: 4797 N CYPRESS ROAD												
City: WALNUTPORT						State: PA			Zip Code: 18088-9104			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2018	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY						MO	DAY	YEAR	183	STH	REP	48
						11	6	2018	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		5	5	2018		6	5	2018				
A. Amount Brought Forward From Last Report						\$ 180.50						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 12,667.76						
C. Total Funds Available (Sum Of Lines A and B)						\$ 12,848.26						
D. Total Expenditures (From Schedule III)						\$ 12,848.26						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 0.00						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 22,365.21						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 0.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

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 subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
MILLER, CINDY COMMITTEE TO ELECT	From: <u>5/5/2018</u> To: <u>6/5/2018</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting 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)	\$ 150.00
TOTAL for the Reporting Period (2)	\$ 150.00

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)	\$ 12,517.76
TOTAL for the Reporting Period (3)	\$ 12,517.76

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 12,667.76
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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 Candidate MILLER, CINDY COMMITTEE TO ELECT	Reporting Period From: <u>5/5/2018</u> To: <u>6/5/2018</u>
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				DATE			AMOUNT		
Full Name of Contributor					MO	DAY	YEAR	\$	100.00
Blain Holden									
Mailing Address					5	19	2018		
512 Blue Mountain Dr									
City			State		Zip Code (Plus 4)				
Walnutport			PA		18088				

Full Name of Contributor				MO	DAY	YEAR	\$	50.00
Mary Robinson								
Mailing Address				5	19	2018		
8130 Sharon Ct								
City		State	Zip Code (Plus 4)					
Slatington		PA	18080					

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

PAGE TOTAL
\$ 150.00

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:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 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 MILLER, CINDY COMMITTEE TO ELECT	Reporting Period From: <u>5/5/2018</u> To: <u>6/5/2018</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Cynthia Miller							
Mailing Address 4797 N Cypress Rd				5	7	2018	\$ 2,500.00
City Walnutport	State PA	Zip Code (Plus 4) 18088					
Employer Name self employed				Occupation Realtor			
Employer Mailing Address/Principal Place of Business 4797 N Cypress Rd			City Walnutport		State PA	Zip Code (Plus 4) 18088	
Cynthia Miller							
Mailing Address 4797 N Cypress Rd				5	31	2018	\$ 8,017.76
City Walnutport	State PA	Zip Code (Plus 4) 18088					
Employer Name self employed				Occupation Realtor			
Employer Mailing Address/Principal Place of Business 4797 N Cypress Rd			City Walnutport		State PA	Zip Code (Plus 4) 18088	
Frederick Reinhard							
Mailing Address 874 Columbia Ave				5	7	2018	\$ 1,000.00
City Palmerton	State PA	Zip Code (Plus 4) 18071					
Employer Name Pencor				Occupation Chairman of the Board			
Employer Mailing Address/Principal Place of Business 3rd St			City Palmerton		State PA	Zip Code (Plus 4) 18071	

Full Name of Contributor Robert Johnson				MO	DAY	YEAR	\$ 500.00
Mailing Address 1144 N 35th St				5	7	2018	
City Allentown	State PA	Zip Code (Plus 4) 18104					
Employer Name Retired				Occupation Retired			
Employer Mailing Address/Principal Place of Business 1144 N 35th St			City Allentown		State PA		Zip Code (Plus 4) 18104

Full Name of Contributor Robert Johnson				MO	DAY	YEAR	\$ 500.00
Mailing Address 1144 N 35th St				5	16	2018	
City Allentown	State PA	Zip Code (Plus 4) 18104					
Employer Name Retired				Occupation Retired			
Employer Mailing Address/Principal Place of Business 1144 N 35th St			City Allentown		State PA		Zip Code (Plus 4) 18104

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

PAGE TOTAL
\$ 12,517.76

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	Reporting Period From: To:
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			DATE			AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL	
\$	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	
MILLER, CINDY COMMITTEE TO ELECT		From: <u>5/5/2018</u> To: <u>6/5/2018</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 22,365.21
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 22,365.21

SCHEDULE II

PART F

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

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

			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL
						\$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period
MILLER, CINDY COMMITTEE TO ELECT	From: <u>5/5/2018</u> To: <u>6/5/2018</u>

					DATE		AMOUNT	
Full Name of Contributor Cynthia Miller					MO	DAY	YEAR	\$ 153.59
Mailing Address 4797 N Cypress Rd					5	31	2018	
City Walnutport		State PA	Zip Code(Plus 4) 18088					
Employer of Contributor self employed					Occupation Realtor			
Employer Mailing Address/Principal Place of Business 4797 N Cypress Rd			City Walnutport	State PA	Zip Code(Plus 4) 18088		Description of Contribution Robo call 1	

Full Name of Contributor Cynthia Miller				MO	DAY	YEAR	\$ 153.59
Mailing Address 4797 N Cypress Rd				5	31	2018	
City Walnutport	State PA	Zip Code(Plus 4) 18088					
Employer of Contributor self employed				Occupation Realtor			
Employer Mailing Address/Principal Place of Business 4797 N Cypress Rd		City Walnutport	State PA	Zip Code(Plus 4) 18088		Description of Contribution Robo call 2	

Full Name of Contributor Cynthia Miller				MO	DAY	YEAR	\$ 22,058.03
Mailing Address 4797 N Cypress Rd				5	31	2018	
City Walnutport	State PA	Zip Code(Plus 4) 18088					
Employer of Contributor self employed				Occupation Realtor			
Employer Mailing Address/Principal Place of Business 4797 N Cypress Rd		City Walnutport	State PA	Zip Code(Plus 4) 18088		Description of Contribution Loan Forgiveness	

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

PAGE TOTAL

22,365.21

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
MILLER, CINDY COMMITTEE TO ELECT	From <u>5/5/2018</u> To: <u>6/5/2018</u>

DATE				AMOUNT		
To Whom Paid Main Street Graphics			MO	DAY	YEAR	\$ 2,229.57
Mailing Address 30 West Main St			5	9	2018	
City Maple Shade	State NJ	Zip Code (Plus 4) 08052	Description of Expenditure Postage			
To Whom Paid Main Street Graphics			MO	DAY	YEAR	\$ 1,209.65
Mailing Address 30 West Main St			5	9	2018	
City Maple Shade	State NJ	Zip Code (Plus 4) 08052	Description of Expenditure Postage			
To Whom Paid Checkmate Strategies			MO	DAY	YEAR	\$ 2,316.10
Mailing Address 5 Banyan Court			5	31	2018	
City Jackson	State NJ	Zip Code (Plus 4) 08527	Description of Expenditure Palm cards			
To Whom Paid Checkmate Strategies			MO	DAY	YEAR	\$ 3,594.94
Mailing Address 5 Banyan Court			5	31	2018	
City Jackson	State NJ	Zip Code (Plus 4) 08527	Description of Expenditure Mailer 1			
To Whom Paid Checkmate Strategies			MO	DAY	YEAR	\$ 3,498.00
Mailing Address 5 Banyan Court			5	31	2018	
City Jackson	State NJ	Zip Code (Plus 4) 08527	Description of Expenditure Mailer 2			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 12,848.26

