# **Campaign Finance Report**

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

Filer Identificat	ion 2019	C0269			Repo	rt	С	ANDI	DATE	1	СС		E	LOB	BYIST	<u> </u>	
Number :	2010	0209			Filed	By :				Y							
Name of Filing	Committee, Candid	ate or L	obbyist:		DONNI	ELLY,	SARA	λH									
Street Address:												_					
City:							Stat	te:				Zip Cod	l <b>e:</b> 17	824			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		DAY MARY	F	POST-	3.		AMENDMENT REPORT?		Yes	N	0	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	≣- 5. <b>X</b>	30 I ELE	DAY CTION	-	POST-	6.		TERMINA REPORT?		Yes	N	0	$\checkmark$
report type)	ANNUAL REPORT	7.	<b>Year</b> 2018				.ING M ) CHE					PAPER	PAPER			ЕТТЕ	
Name of Office	L Sought by Candida	te:					DA	τε ο	FELE	CTIC	DN	District Number	Office Code	Par	ty Code	Cour	
DEDDEGENTAT							мо		DAY	Y	EAR	107	STH	DEN	1	49	
REPRESENTAL	IVE IN THE GENER	RAL ASS	EMBLY					11		6	2018	i	(SEE INS	TRUCTI	ONS FOR	CODES	;)
Summary of Receipts and MO DAY YEAR							мо		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	s from:		6 5	2	018	го		10	:	22	2018						
A. Amount Bro	ought Forward From	n Last R	eport				\$			(1,3	56.79)						
B. Total Monet	B. Total Monetary Contributions And Receipts (From Schedule I										0.00						
C. Total Funds Available (Sum Of Lines A and B)							\$			(1,3	56.79)						
D. Total Expenditures (From Schedule III)							\$				315.99						
E. Ending Cash	n Balance (Subtrac	t Line D	From Line	C)			\$			(1,6	72.78)						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)		\$				0.00						
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)			\$				0.00						
				AFF	IDAV	IT S	ECTI	ON									
PART I - If this i	s a Committee rep	ort, trea	surer sign	here.	If this i	s a C	andida	ate re	eport, o	andi	date si	gn here.					
I swear (or affirm correct and compl	) that this report, inc ete.	luding the	e attached sc	hedule	s filed or	1 pape	er or by	elect	ronic m	edium	, are to	the best of	f my knov	vledge	and bel	ief , tr	ue
Sworn to and sub	scribed before me this day of	5	20							9	Signatur	e of Persor	1 Submitt	ing Rep	oort		-
	Signatu	re				_						Print	ed Name				-
My Commission E	-											Emai	I				-
	мо	D	AY	YR					Are	ea Co	de	Daytim	e Teleph	one Nu	mber		_
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee,	Candi	idate s	shall	sign he	ere.							
I swear (or affirm) No 320) as amend	) that to the best of n ed.	ny knowl	edge and beli	ief this	politica	l com	mittee	has n	ot viola	ted ar	ıy provis	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subse	cribed before me this day of		20								S	ignature o	f Candida	ite			-
						_						Printe	d Name				-
My Commission Ex	Signature											Emai	1				-
														_			
	мо	D	AY	YR	1				Area Code Daytime Telephone Nur						e Num	ber	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** DONNELLY, SARAH From: <u>6/5/2018</u> **To:** 10/22/2018 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.)

PAGE 3

# 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 Candidat	Name of Filing Committee or Candidate				Reporting Period						
	Fr					:					
· · · · · · · · · · · · · · · · · · ·					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.

0.00

\$

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 Reporting Period									
	From: To:								
					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 Schedule I, Detailed Summary Page, Section 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 Candio	late		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committe	ee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
							-	PAGE TOTAL
Enter Grand Total of Part C on S	chedule I, Detail	led 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	ddress						\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupation				
Employer Mailing Address/Principal Place of City Business					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	ing Perio	d					
			From:	From: To				:		
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR				
Mailing Address							\$	i	0.00	
City	State	Zip Code (	Plus 4)							
Receipt Description										
nter Grand Total of Part E on Schedule I, Detailed Summary Page, Section				4				PAGE TO	ΓAL	
		iiai y i 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		
DONNELLY, SARAH	From:	<u>6/5/2018</u> то:	<u>10/22/2018</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	T F)		
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			
			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 Schedule II, In-Kind Contributions Detail Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

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

Name of Filing Committee or Candidate					Rej	oorting P	Period			
					From: To:					
					DATE AM					AMOUNT
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•					Occupat	tion			
Employer Mailing Address/Principal Place of City State Business				State		Zip 4)	Code(Plus	Descri	ption o	f Contribution

		I		
Enter Grand Total of Part G on Schedule	II, In-Kind Co	ontributions De	tailed	PAGE TOTAL
Summary Page, Section 3.	,			0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	me of Filing Committee or Candidate			ng Period					
DONNELLY, SARAH			From	<u>6/!</u>	<u>5/2018</u>	То:	<u>10/22/2018</u>		
				DATE			AMOUNT		
To Whom Paid Chestnut St Deli			мо	DAY	YEAR				
Mailing Address 550 Chestnut St			7	2	2018	\$	18.76		
City Sunbury	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17801	Description of Expenditure Campaign meeting						
To Whom Paid Staples				DAY	YEAR				
Mailing Address 1005 Scott Town Center Suite 2			7	13	2018	\$	13.24		
CityBloomsburgStateZip Code (Plus 4)PA17815				Description of Expenditure Office Supplies					
To Whom Paid Home Depot			мо	DAY	YEAR				
Mailing Address 9 Gus Ave			7	15	2018	\$	85.61		
City Bloomsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17815	Description of Expenditure Supplies for sign						
<b>To Whom Paid</b> Lowes			мо	DAY	YEAR				
Mailing Address 1389 Noth Susqueh	anna Trail		7	16	2018	\$	74.78		
City Selinsgrove	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17870		<b>otion of Exp</b> es for sign	penditure	1			
To Whom Paid Cole's Hardware			мо	DAY	YEAR				
Mailing Address 225 Chestnut St			7	30	2018	\$	11.65		
City Sunbury	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17801		<b>stion of Exp</b> s for sign	penditure	I			

To Whom Paid Target					мо	DAY	YEAR		
Mailing Address 501 Marketplace Blvd					7	30	2018	\$	6.00
City Sel	insgrove		State	Zip Code (Plus 4)	Descrip	otion of Exp	Denditure		
			PA	17870	Supplies for sign				
To Whom Paid					мо	DAY	YEAR		
Knoebel Lumber									
Mailing Address 291 Knoebels Blvd					8	8	2018	\$	7.92
City <sub>ELV</sub>	SBURG		State	Zip Code (Plus 4)	Descrir	l otion of Exp	l		
	ISBURG	0	РА	17824	Supplies for sign				
To Whom Paid PA BCEL Voter List					мо	DAY	YEAR		
Mailing Address 401 North St 210 NOB					8	13	2018	\$	20.00
City Har	rrisburg		State	Zip Code (Plus 4)	5 4) Description of Expenditur				
	mobuly	5	PA	17120	Voter database				
To Whom Paid Lowes					мо	DAY	YEAR		
Mailing Address 1389 Noth Susquehanna Trail					8	23	2018	\$	56.05
City Sel	insgrove	State Zip Code (Plus 4)			Description of Expenditure				
			PA	17870	Folding table				
To Whom Paid Staples					мо	DAY	YEAR		
Mailing Address 292 Marketplace Blvd					8	25	2018	\$	10.58
City Sel	insgrove		State	Zip Code (Plus 4)	Description of Expenditure		penditure		
			РА	17870	Office Supplies				
<b>To Whom Paid</b> Dollar General					мо	DAY	YEAR		
Mailing Address 174 S Market St					8	31	2018	\$	11.40
City ELY	ELYSBURG		State	Zip Code (Plus 4)	Description of Expenditu		penditure		
			PA	17824	Office Supplies				
									PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.								\$	315.99