

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 : 2006317		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF SCOTT CONKLIN											
Street Address: 339 KAPP RD.											
City: PHILIPSBURG				State: PA		Zip Code: 16866					
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.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	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
					MO	DAY	YEAR				
					11	6	2018				
Summary of Receipts and Expenditures from:					MO	DAY	YEAR	FOR OFFICE USE ONLY			
					9	18	2018				TO
					10	22	2018				
A. Amount Brought Forward From Last Report					\$		8,851.74				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		4,125.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		12,976.74				
D. Total Expenditures (From Schedule III)					\$		1,150.00				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		11,826.74				
F. Value Of In-Kind Contributions Received (From Schedule II)					\$		0.00				
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
FRIENDS OF SCOTT CONKLIN	From: <u>9/18/2018</u> To: <u>10/22/2018</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 25.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 1,250.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 1,250.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 2,850.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 2,850.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 4,125.00
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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				Reporting Period			
FRIENDS OF SCOTT CONKLIN				From: <u>9/18/2018</u> To: <u>10/22/2018</u>			
				DATE		AMOUNT	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
HEALTH PARTNERS OF PHIL.			9	19	2018	
Mailing Address	901 MARKET ST. STE 600					
City	State	Zip Code (Plus 4)				
PHILADELPHIA	PA	19107				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
NI SOURCE INC PAC			9	21	2018	
Mailing Address						
290 W. NATIONWIDE BLVD.						
City	State	Zip Code (Plus 4)				
COLUMBUS	OH	43215				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
HIGH MARK			10	20	2018	
Mailing Address						
1800 CENTER ST.						
City	State	Zip Code (Plus 4)				
PHILIPSBURG	PA	17089				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
TEAMSTER NO. 8			10	20	2018	
Mailing Address						
2225 HIGH TECH ROAD						
City	State	Zip Code (Plus 4)				
STATE COLLEGE	PA	16803				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
VERSANT PAC			10	20	2018	
Mailing Address						
116 PINE ST.						
City	State	Zip Code (Plus 4)				
HARRISBURG	PA	17101				

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

PAGE TOTAL

\$ 1,250.00

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	MO	DAY	YEAR	\$0.00
Mailing Address				
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 FRIENDS OF SCOTT CONKLIN	Reporting Period From: <u>9/18/2018</u> To: <u>10/22/2018</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
MARK DAMBLY				9	25	2018	
Mailing Address 354 DARLINGTON RD							
City	MEDIA	State	PA	Zip Code (Plus 4)		19063	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 350.00
WINDSTREAM POLITICAL ACTION				9	20	2018	
Mailing Address 4001 RODNEY PARHAM RD							
City	LITTLE ROCK	State	AR	Zip Code (Plus 4)		72212	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
AFSCME 13				10	20	2018	
Mailing Address 4031 EXECUTIVE PARK DR							
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17111	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
P.L.A.N				10	20	2018	
Mailing Address 904 N. 2ND STREET							
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17102	

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

PAGE TOTAL
\$ 2,850.00

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: To:

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			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 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:

			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	
FRIENDS OF SCOTT CONKLIN		From: <u>9/18/2018</u> To: <u>10/22/2018</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 RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
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.)		\$	0.00

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:
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			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			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF SCOTT CONKLIN	From <u>9/18/2018</u> To: <u>10/22/2018</u>

DATE				AMOUNT		
To Whom Paid MAUREEN MADDEN FRIENDS OF			MO	DAY	YEAR	\$ 100.00
Mailing Address 7404 VENTURE DR.			9	26	2018	
City TOBYHANNA	State PA	Zip Code (Plus 4) 18466	Description of Expenditure DONATION			
To Whom Paid COMMITTEE TO ELECT PAM SNYDER			MO	DAY	YEAR	\$ 100.00
Mailing Address 286 CENTER SCHOOL RD.			9	26	2018	
City JEFFERSON	State PA	Zip Code (Plus 4) 15344	Description of Expenditure DONATION			
To Whom Paid BRANDEN MARKOSEK FOR STATE REP			MO	DAY	YEAR	\$ 100.00
Mailing Address 207 GLENWOOD DR.			9	26	2018	
City MONROEVILLE	State PA	Zip Code (Plus 4) 15146	Description of Expenditure DONATION			
To Whom Paid FRIENDS OF MIKE HANNA			MO	DAY	YEAR	\$ 200.00
Mailing Address 50 SYLVAN DR.			10	9	2018	
City LOCK HAVEN	State PA	Zip Code (Plus 4) 17745	Description of Expenditure DONATION			
To Whom Paid SHANNON BILGER			MO	DAY	YEAR	\$ 200.00
Mailing Address 4903 WYOMING AVE			10	9	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 17109	Description of Expenditure CONSULTING			

To Whom Paid CITIZENS FOR MULLERY			MO	DAY	YEAR	\$ 100.00
Mailing Address 6 MARIE DRIVE			10	11	2018	
City NANTICOKE	State PA	Zip Code (Plus 4) 18634	Description of Expenditure DONATION			

To Whom Paid JEFF HELFFRICH			MO	DAY	YEAR	\$ 100.00
Mailing Address 1038 SAXTON DRIVE			10	20	2018	
City STATE COLLEGE	State PA	Zip Code (Plus 4) 16801	Description of Expenditure WEB HOSTING			

To Whom Paid AIMEE LEWIS			MO	DAY	YEAR	\$ 250.00
Mailing Address 127 EAST MARKET STREET FL 2 REAR			10	20	2018	
City YORK	State PA	Zip Code (Plus 4) 17401	Description of Expenditure VIDEO			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 1,150.00

