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 | 20170 | 0273 | | | | Repo | | | CA | NDII | DATE | | СОМ | 4ITTEE | ✓ | LOB | BYIST | | |
|--|----------------------|--------------|-----------|----------------|---------|------------|---------|------|----------------|---------------|--------|----------|-------------|-------------|--------------------|----------------|----------|---------|----------|----------|
| Name of Filing C | Committee | e, Candida | ite or Lo | obbyis | t: | 1 | METC | ALI | FE, D | OUGI | _AS | FOR P | Α | | | | | | | - |
| Street Address: | РО В | OX 98 | | | | | | | | | | | | | | | | | | |
| City: | BIRD | SBORO | | | | | | | | State | e: | PA | | | Zip Cod | ie: 19 | 508 | _ | | |
| TYPE OF REPORT | 6TH TUES PRE-PRIM | | 1. | 2ND F PRIMA | | PRE- | 2. | | 30 DA PRIMA | | Р | OST- | 3. | | AMENDM REPORT | | Yes | N | 0 | \ |
| (place X to the right of | 6TH TUES | | 4. | 2ND F ELECT | | / PRE | - 5. | | 30 DA | | Р | OST- | 6. X | | TERMINA REPORT | | Yes | N |) | √ |
| report type) | ANNUAL | REPORT | 7. | Year | 2018 | | | | | IG ME CHEC | | | | | PAPER | | \ | DISK | TTE | |
| Name of Office S | ought by | Candidat | e: | | | | | | | DAT | E O | F ELE | CTIC | ON | District Number | Office Code | Pai | ty Code | Cour | |
| | | | | | | | | | | МО | | DAY | Y | EAR | 128 | STH | DEI | М | 06 | |
| REPRESENTATI | VE IN TH | IE GENER | AL ASS | EMBLY | ľ | | | | | | 11 | | 6 | 2018 | | (SEE INS | TRUCTI | ONS FOR | CODES |) |
| Summary of | • | and | МО | DA | Y | YEAR | | | | МО | | DAY | Y | EAR | FO | R OFFIC | E USE | ONLY | | |
| Expenditures | from: | | 1 | 10 | 23 | 20 |)18 | T |) | | 11 | 7 | 26 | 2018 | | | | | | |
| A. Amount Bro | ught Forv | vard From | Last R | eport | | | · | | \$ | | | | 11, | 616.13 | | | | | | |
| B. Total Moneta | ary Contr | ibutions A | and Rec | eipts (| From | Sched | dule I | :) | \$ | | | | 4, | 170.00 | | | | | | |
| C. Total Funds | Available | (Sum Of | Lines A | and B | 5) | | | | \$ | | | | 15, | 786.13 | | | | | | |
| D. Total Expend | ditures (F | rom Sche | dule II | I) | | | | | \$ | | | | 14, | 938.47 | | | | | | |
| E. Ending Cash | Balance | (Subtract | Line D | From | Line C | :) | | | \$ | | | | 8 | 347.66 | | | | | | |
| F. Value Of In- | Kind Cont | tributions | Receive | ed (Fr | om Sc | hedul | e II) | | \$ | | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Ob | ligations | (From S | Schedu | ile IV |) | | | \$ | | | | | 0.00 | | | | | | |
| | | | | | | AFF: | IDA۱ | /IT | SE | CTIC | N | | | | | | | | | |
| PART I - If this is | | - | • | | _ | | | | | | | | | _ | | | | | | |
| I swear (or affirm) correct and complete | | eport, inclu | uding the | attach | ed sch | edules | filed o | on p | aper | or by e | electr | onic m | ediun | ı, are to t | he best o | f my knov | vledge | and bel | ief , tr | ue |
| Sworn to and subs | cribed befo | ore me this | | 20 | | | | | | | • | | : | Signature | of Perso | n Submitt | ing Re | oort | | _ |
| | _ | | | - , | | | | | | | | | | | Prin | ted Name | | | | _ |
| My Commission Ex | cpires | Signatur | e | | | | | | | | - | | | | Ema | il | | | | - |
| | | мо | DA | AY | | YR | | | - | | | Are | ea Co | de | Daytim | e Teleph | one Nu | mber | | _ |
| Part II- If this is | a report | of a cand | idate's | autho | rized | Comm | ittee, | , Ca | ndid | ate sl | nall s | sign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | | e best of m | y knowle | edge an | d belie | ef this | politic | al d | comm | ittee h | as no | ot viola | ted a | ny provis | ions of th | e act of Ju | ıne 3,1 | 937 (P. | L. 133 | 3, |
| Sworn to and subsc | | re me this | | | | | | | | | | | | s | ignature o | of Candida | ite | | | - |
| | day of — | | | 20 - | | | | | | | | | | | Printe | d Name | | | | - |
| | | Signature | | | | | | | | | | | _ | | | | | | | _ |
| My Commission Exp | | - | | | | | | | | | | | | | Ema | il | | | | |
| | _ | МО | D | AY | | YR | | | | | | Area | Code | | Da | aytime Te | elephoi | ne Numi | er | - |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | g Period | | |
|--|-----------|-----------|--------------|------------|
| METCALFE, DOUGLAS FOR PA | From: | 10/23/201 | <u>8</u> To: | 11/26/2018 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reporting |) Period | (1) | \$ | 595.00 |
| 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) | | | \$ | 2,175.00 |
| TOTAL for the Reporting |) Period | (2) | \$ | 2,175.00 |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 500.00 |
| All Other Contributions (Part D) | | | \$ | 900.00 |
| TOTAL for the Reporting |) Period | (3) | \$ | 1,400.00 |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) | | | | |
| TOTAL for the Reporting | J 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 | | | \$ | 4,170.00 |

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

| Name of Filing Committee | or Candidate | | Reporting | Period | | | |
|-----------------------------|--------------|-------------------|-----------|--------|------|----|--------|
| | | | From: | | То | : | |
| | | I | | DATE | | | AMOUNT |
| Full Name of Contributing C | ommittee | | 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 Candidat | Name of Filing Committee or Candidate | | | | | porting Period | | | | |
|---|---------------------------------------|-----------------------------------|-------|--------|---------|-------------------|--|--|--|--|
| METCALFE, DOUGLAS FOR PA | | | From: | 10/23/ | 2018 To | <u>11/26/2018</u> | | | | |
| | | | | DATE | | AMOUNT | | | | |
| Full Name of Contributor David & Nancy Ohlinger | | | мо | DAY | YEAR | | | | | |
| Mailing Address 603 North Broast S | t | | | | | \$ 250.00 | | | | |
| City Shillington | State PA | Zip Code (Plus 4) 19607 | 10 | 23 | 2018 | | | | | |
| Full Name of Contributor Kathleen Thompson | | | МО | DAY | YEAR | | | | | |
| Mailing Address 160 Avondale Dr City Birdsboro | State PA | Zip Code (Plus 4) 19508 | 10 | 23 | 2018 | \$ 200.00 | | | | |
| Full Name of Contributor Christopher Koller | | | МО | DAY | YEAR | | | | | |
| Mailing Address 220 Caitlin Ct | | | | | | \$ 100.00 | | | | |
| City Honey Brook | State PA | Zip Code (Plus 4) 19344 | 10 | 23 | 2018 | | | | | |
| Full Name of Contributor Sandra Deemer | | | МО | DAY | YEAR | | | | | |
| Mailing Address 17 Hunters Hill Dr City Morgantown | State PA | Zip Code (Plus 4) 19543 | 10 | 23 | 2018 | \$ 100.00 | | | | |
| Full Name of Contributor Sandra Deemer | | | МО | DAY | YEAR | | | | | |
| Mailing Address 17 Hunters Hill Dr City Morgantown | State PA | Zip Code (Plus 4) 19543 | 11 | 5 | 2018 | \$ 25.00 | | | | |

| | | | | | | | PAGE | |
|---|--------------------------------------|----------------------|--|-----------|----------------|------------------|------|--------|
| Full Name of Cont | ributor | | | мо | DAY | YEAR | | |
| Edwina Naylor | | | | 140 | DAI | ILAK | | |
| Mailing Address | 1302 Dauphin Ave | | | | | | \$ | 100.00 |
| City Wyomissin | ng | State | Zip Code (Plus 4) | 10 | 23 | 2018 | | |
| | | PA | 19610 | | | | | |
| Full Name of Cont | ributor | | | МО | DAY | YEAR | | |
| Gilbert Kerlin | | | | МО | DAI | ILAK | | |
| Mailing Address | 719 South Marshal | St | | | | | \$ | 250.00 |
| City Philadelph | ia | State | Zip Code (Plus 4) | 10 | 29 | 2018 | | |
| | | PA | 19147 | | | | | |
| Full Name of Cont | ributor | | | МО | DAY | YEAR | | |
| Deanna Herman | | | | 110 | | 12/11 | | |
| Mailing Address | 377 Golf Course Ro | I | | | | | \$ | 250.00 |
| City Birdsboro | | State | Zip Code (Plus 4) | 10 | 24 | 2018 | | |
| | | PA | 19508 | | | | | |
| | | | | | | | | |
| Full Name of Cont | ributor | | | МО | DAY | YEAR | | |
| | ributor 1406 Parkside Dr S | | | МО | DAY | YEAR | \$ | 100.00 |
| Donald Fox Mailing Address | 1406 Parkside Dr S | State | Zip Code (Plus 4) | MO | DAY 7 | YEAR 2018 | \$ | 100.00 |
| Donald Fox Mailing Address | 1406 Parkside Dr S | | | | | | \$ | 100.00 |
| Donald Fox Mailing Address | 1406 Parkside Dr S | State | Zip Code (Plus 4) | | | | \$ | 100.00 |
| Donald Fox Mailing Address City Wyomissin Full Name of Cont | 1406 Parkside Dr S | State | Zip Code (Plus 4) | 11 | 7 | 2018 | \$ | 100.00 |
| Donald Fox Mailing Address City Wyomissin Full Name of Cont Kathryn Marr Mailing Address | 1406 Parkside Dr S | State | Zip Code (Plus 4) | 11 | 7 | 2018 | | |
| Donald Fox Mailing Address City Wyomissin Full Name of Cont Kathryn Marr Mailing Address | 1406 Parkside Dr S | State PA | Zip Code (Plus 4) 19610 | 11 MO | 7 DAY | 2018 YEAR | | |
| Donald Fox Mailing Address City Wyomissin Full Name of Cont Kathryn Marr Mailing Address | 1406 Parkside Dr S | State PA State | Zip Code (Plus 4) 19610 Zip Code (Plus 4) | мо | 7 DAY | 2018 YEAR | | |
| Donald Fox Mailing Address City Wyomissin Full Name of Cont Kathryn Marr Mailing Address City Reading Full Name of Cont | 1406 Parkside Dr S | State PA State | Zip Code (Plus 4) 19610 Zip Code (Plus 4) | MO 11 | 7 DAY 7 | 2018 YEAR 2018 | \$ | 100.00 |
| Donald Fox Mailing Address City Wyomissin Full Name of Cont Kathryn Marr Mailing Address City Reading Full Name of Cont Kathryn Marr Mailing Address | 1406 Parkside Dr S | State PA State PA | Zip Code (Plus 4) 19610 Zip Code (Plus 4) 19606 | MO 11 | 7 DAY 7 | 2018 YEAR 2018 | | |
| Donald Fox Mailing Address City Wyomissin Full Name of Cont Kathryn Marr Mailing Address City Reading Full Name of Cont Kathryn Marr | 1406 Parkside Dr S | State PA State | Zip Code (Plus 4) 19610 Zip Code (Plus 4) | MO 11 | 7 DAY 7 | 2018 YEAR 2018 | \$ | 100.00 |

| Full Name of Contribution M Bryan Berchok | itor | | | мо | DAY | YEAR | |
|--|-------------------|-------|-------------------|----|-----|------|------------------|
| Mailing Address 1 | .115 Seven Corner | Rd | | | | | \$ 100.00 |
| City Perkasie | | State | Zip Code (Plus 4) | 11 | 7 | 2018 | |
| | | PA | 18994 | | | | |
| Full Name of Contribution Metcalfe | itor | | | МО | DAY | YEAR | |
| Mailing Address | 3804 Gaston Dr | | | | | | \$ 250.00 |
| City Midland | | State | Zip Code (Plus 4) | 11 | 6 | 2018 | |
| | | TX | 79703 | | | | |
| Full Name of Contribu Ronald F Horn | itor | | | МО | DAY | YEAR | |
| Mailing Address 1 | .12 W 36th St | | | | | | \$ 100.00 |
| City Reading | | State | Zip Code (Plus 4) | 11 | 5 | 2018 | |
| | | PA | 19606 | | | | |
| Full Name of Contribution | itor | | | МО | DAY | YEAR | |
| Mailing Address 8 | 3 Kane Rd | | | | | | \$ 150.00 |
| City Morgantown | | State | Zip Code (Plus 4) | 11 | 5 | 2018 | |
| | | PA | 19543 | | | | |
| | | • | • | • | • | | |

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

PAGE TOTAL \$ 2,175.00

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 | | | | | |
|---------------------------------------|-------|------------------|-----|------------|--|--|--|
| METCALFE, DOUGLAS FOR PA | From: | 10/23/2018 | То: | 11/26/2018 | | | |

DATE AMOUNT

| Full Name of Contributing Committee GREATER READING PAC | | | МО | DAY | YEAR | |
|--|--------------------|-----------------------------------|----|-----|------|------------------|
| Mailing Address 19 Spring Ln | | | | | | \$ 500.00 |
| City Fleetwood | State PA | Zip Code (Plus 4) 19522 | 10 | 29 | 2018 | |

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

PAGE TOTAL \$ 500.00

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 Re | | | | porting Period | | | | |
|---|--------------------|-------------------------|------|----------------|---------|-------------------|------------|------------------------|
| METCALFE, DOUGLAS FOR PA | | | Fror | n: | 10/23/2 | <u>018</u> To | : | 11/26/2018 |
| | | | | D | ATE | | | AMOUNT |
| Full Name of Contributor Brian Lahmann | | | | мо | DAY | YEAR | | |
| Mailing PO Box 98 | | | | | | | \$ | 450.00 |
| City Birdsboro | State PA | Zip Code (Plus 19508 | 5 4) | 10 | 29 | 2018 | | |
| Employer Name Reading Health Syste | m | | | Occupat | tion | hysiciar | 1 | |
| Employer Mailing Address/Principal Plac Business | e of | City | | • | State | | Zip Co | ode (Plus 4) |
| Sixth Avenue and Spruce St | | Reading | | | PA | | 196 | 11 |
| Full Name of Contributor Brian Lahmann | | | | мо | DAY | YEAR | | |
| | | | | | | | | |
| Mailing PO Box 98 | | | | | | | <u> </u> | 450.00 |
| Mailing PO Box 98 | State PA | Zip Code (Plus 19508 | s 4) | 10 | 31 | 2018 | <u></u> \$ | 450.00 |
| Mailing PO Box 98 | PA | | s 4) | 10 | tion | 2018 Physician | | 450.00 |
| Mailing PO Box 98 City Birdsboro | PA m | | s 4) | | tion | | 1 | 450.00 ode (Plus 4) |
| Mailing Address PO Box 98 City Birdsboro Employer Name Reading Health Syste Employer Mailing Address/Principal Place | PA m | 19508 | s 4) | | tion F | | 1 | ode (Plus 4) |

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 | | | AMOUNT |
| 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 | | | ı | PAGE TOTAL |
| zinci. Grana rotal or rait z on | ocilculate 1, Detailet | . Janimary rage, | 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 Per | iod | |
|--|---------------|------------------------------|-------------------|
| METCALFE, DOUGLAS FOR PA | From: | <u>10/23/2018</u> To: | <u>11/26/2018</u> |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | ER CONTRIBUTO | R | |
| 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 | | | Reporting | | | | |
|---------------------------------------|----------------------|-----------------------|-----------|---------------|------|-----------|------------|
| | | | From: | | | To: | |
| | | | | 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 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 | | | Re | Reporting Period | | | | | | |
|---|------------|---------|------------|------------------|-------|-----------|-----------|--------|-------|------------------------|
| | | | | | Fro | om: | | To: | | |
| | | | | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | | \$ | 0.00 |
| City | State | | Zip Code(F | Plus 4) | | | | | | |
| Employer of Contributor | -1 | | • | | | Occupa | tion | | | |
| Employer Mailing Address/Principal Pl Business | ace of | City | | State | | Zip 4) | Code(Plus | Descri | ption | of Contribution |
| Enter Grand Total of Part G on So Summary Page, Section 3. | hedule II, | In-Kind | Contributi | ons De | taile | ed | | | | PAGE TOTAL 0.00 |

STATEMENT OF EXPENDITURES

| | Name of Filing Committee or Candidate | | | | Reporting Period | | | | | | |
|---|---------------------------------------|---|---|--------------|------------------|------------|----------|--|--|--|--|
| METCALFE, DOUGLAS FOR PA | | | | 10/2 | То: | 11/26/2018 | | | | | |
| | | | | DATE | | | | | | | |
| To Whom Paid USPS | МО | DAY | YEAR | | | | | | | | |
| Mailing Address 101 Mulberry St | 10 | 25 | 2018 | \$ | 141.84 | | | | | | |
| City Morgantown State PA 19543 | | | Description of Expenditure Postage | | | | | | | | |
| To Whom Paid USPS | МО | DAY | YEAR | | | | | | | | |
| Mailing Address 101 Mulberry St | | | | 29 | 2018 | \$ | 24.70 | | | | |
| City Morgantown | State PA | Description of Expenditure Postage | | | | | | | | | |
| To Whom Paid Debbie Noel | | | | DAY | YEAR | | | | | | |
| Mailing Address 277 Timber Ridg | je Rd | | 10 | 23 | 2018 | \$ | 600.00 | | | | |
| City Morgantown State Zip Code (Plus 4) PA 19543 | | | Description of Expenditure Office Support | | | | | | | | |
| To Whom Paid Cheltenham Prnting Company | | | МО | DAY | YEAR | | | | | | |
| Mailing Address 518 Ryers Ave | | | | 29 | 2018 | \$ | 7,190.50 | | | | |
| Cheltenham State PA Zip Code (Plus 4) 19012 | | | Descrip Mailers | ption of Exp | penditure | 2 | | | | | |
| To Whom Paid Twitter Inc | | | | DAY | YEAR | | | | | | |

10

Twitter Ads

Description of Expenditure

Zip Code (Plus 4)

94103

2018

Mailing Address

San Francisco

City

1355 Market Street, Suite 900

State

CA

99.00

| | | | | | | | PAGE 14 | | |
|--|--------------------------------------|--|---|--|--|----|----------|--|--|
| To Whom Paid Facebook | МО | DAY | YEAR | | | | | | |
| Mailing Address 1 Hacker W | 11 | 1 | 2018 | \$ | 51.53 | | | | |
| City Menlo Park | Descrip | tion of Exp | enditure | | | | | | |
| | Faceboo | ok Advertis | sement | | | | | | |
| To Whom Paid Cheltenham Prnting Company | мо | DAY | YEAR | | | | | | |
| Mailing Address 518 Ryers A | Ave | | 11 | 5 | 2018 | \$ | 5,148.47 | | |
| City Cheltenham | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | PA | 19012 | Final m | Final mailer | | | | | |
| To Whom Paid ACT Blue | | | МО | DAY | YEAR | | | | |
| Mailing Address 366 Summe | 11 | 5 | 2018 | \$ | 61.10 | | | | |
| City Somerville | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| | MA | 02114-3132 | Octobe | r fees | | | | | |
| | 1.114 | 02114 3132 | 000000 | . 1005 | | | | | |
| To Whom Paid Vantiv LLC | 170 | 02114 3132 | мо | DAY | YEAR | | | | |
| Vantiv LLC | nors Hill Drive | 02114 3132 | | | YEAR 2018 | \$ | 115.24 | | |
| Vantiv LLC Mailing Address 8500 Gover | | Zip Code (Plus 4) | MO | DAY | 2018 | \$ | 115.24 | | |
| Vantiv LLC Mailing Address 8500 Gover | nors Hill Drive | | MO | DAY 9 otion of Exp | 2018 | \$ | 115.24 | | |
| Vantiv LLC Mailing Address 8500 Gover | nors Hill Drive | Zip Code (Plus 4) | MO 11 Descrip | DAY 9 otion of Exp | 2018 | \$ | 115.24 | | |
| Vantiv LLC Mailing Address 8500 Gover City Symmes Township To Whom Paid | rnors Hill Drive State OH | Zip Code (Plus 4) | MO 11 Descrip Octobe | DAY 9 otion of Expr r fees | 2018 penditure | \$ | 115.24 | | |
| Vantiv LLC Mailing Address 8500 Gover City Symmes Township To Whom Paid Debbie Noel Mailing Address 277 Timber | rnors Hill Drive State OH | Zip Code (Plus 4) | MO 11 Descrip Octobel MO | DAY 9 otion of Exp r fees DAY | 2018 Penditure YEAR 2018 | | | | |
| Mailing Address 8500 Gover City Symmes Township To Whom Paid Debbie Noel Mailing Address 277 Timber | Thors Hill Drive State OH Ridge Rd | Zip Code (Plus 4) 45249-1384 | MO 11 Descrip October MO 11 Descrip | DAY 9 otion of Expression of | 2018 Penditure YEAR 2018 | | | | |
| Vantiv LLC Mailing Address 8500 Gover City Symmes Township To Whom Paid Debbie Noel Mailing Address 277 Timber | State OH Ridge Rd State | Zip Code (Plus 4) 45249-1384 Zip Code (Plus 4) | MO 11 Descrip October MO 11 Descrip | DAY 9 otion of Exp r fees DAY 5 | 2018 Penditure YEAR 2018 | | | | |
| Mailing Address 8500 Gover City Symmes Township To Whom Paid Debbie Noel Mailing Address 277 Timber City Morgantown To Whom Paid Vantiv LLC | State OH Ridge Rd State | Zip Code (Plus 4) 45249-1384 Zip Code (Plus 4) | MO 11 Descrip October MO 11 Descrip Office S | DAY 9 ption of Exp r fees DAY 5 ption of Exp Gupport | 2018 Penditure YEAR 2018 Penditure | | | | |
| Mailing Address 8500 Gover City Symmes Township To Whom Paid Debbie Noel Mailing Address 277 Timber City Morgantown To Whom Paid Vantiv LLC | Priors Hill Drive State OH | Zip Code (Plus 4) 45249-1384 Zip Code (Plus 4) | MO 11 Descrip October MO 11 Descrip Office S | DAY 9 ption of Exp r fees DAY 5 ption of Exp Support | 2018 Penditure YEAR 2018 Penditure YEAR 2018 | \$ | 600.00 | | |

| To Whom Paid | | | | | | | | | | |
|--------------------------------------|------------------------|-------------------------|---------|----------------------------|----------|----|------------|--|--|--|
| Vantiv LLC | | | МО | DAY | YEAR | | | | | |
| | | | | | | | | | | |
| Mailing Address 8500 Gove | 10 | 27 | 2018 | \$ | 50.00 | | | | | |
| City Symmes Township | State | Zip Code (Plus 4) | Descrit | tion of Exp | enditure | | | | | |
| OH 45249-1384 | | | | Pass through fees | | | | | | |
| To Whom Paid | | | | | | | | | | |
| Brian Lahmann | | | МО | DAY | YEAR | | | | | |
| Mailing Address PO Box 98 | . | | 11 | 12 | 2018 | \$ | 74.10 | | | |
| | | | | | | · | , | | | |
| City Birdsboro | State | Zip Code (Plus 4) | | Description of Expenditure | | | | | | |
| | PA | 19508 | Expens | e Reimbur | sement | | | | | |
| To Whom Paid | | | МО | DAY | YEAR | | | | | |
| Berks County Democratic Con | nmittee | | | | | | | | | |
| Mailing Address 434 Walnut St | | | | 12 | 2018 | \$ | 200.00 | | | |
| City Reading | State | Zip Code (Plus 4) | Descrit | tion of Exp | enditure | | | | | |
| reduing | Election Night | | | | | | | | | |
| To Whom Paid | | | | DAY | YEAR | | | | | |
| TOSKR Inc | | | МО | DAT | TEAR | | | | | |
| Mailing Address 1330 Broa | dway - 3rd Floor | | 11 | 26 | 2018 | \$ | 481.99 | | | |
| City Oakland State Zip Code (Plus 4) | | | | Description of Expenditure | | | | | | |
| CA 94612 | | | | exting | | | | | | |
| | I | | | | | | PAGE TOTAL | | | |
| Enter Grand Total of Exper | nditures on Page 1, Re | port Cover Page, Item D |). | | | \$ | 14,938.47 | | | |