### **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	20180	0547				Repor		CA	NDII	DATE	<b>*</b>	_ c	OMMITTE	IMITTEE LOBBYIST				
Name of Filing C	ommittee, C	Candida	te or Lo	bbyis	t:	E	RIC R	DE											
Street Address:																			
City:									State	e:				Zip Cod	<b>e:</b> 19	382-1	.632		
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND F PRIMA	RIDAY ARY	PRE-	2.	30 DA		Р	OST-	3.		AMENDM REPORT?		Yes	١	lo	<b>\</b>
(place X to the right of	6TH TUESDA PRE-ELECTIO		4.	2ND F ELECT		PRE-	5. <b>X</b>	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	١	lo	<b>\</b>
report type)	ANNUAL RE	PORT	7.	Year	2018	FILING METHOD ( ) CHECK ONE							PAPER		<b>\</b>	DISK	ETTE		
Name of Office S	ought by Ca	ındidate	e:				Ī		DAT	ΈO	F ELE	СТІ	ON	District Number	Office Code	Pai	rty Cod	e Cour	
REPRESENTATI	VE IN THE (	GENER/	AL ASSI	EMBLY	ſ				МО		DAY		YEAR	158	STH	REF	•		
				I						11		6	2018		(SEE IN				5)
Summary of Expenditures		ınd	МО	<b>DA</b>	<b>Y</b> 18	<b>YEAR</b> 20	10 T	0	МО	10	DAY	22	<b>YEAR</b> 2018		R OFFIC	E USE	ONLY		
A. Amount Bro	ught Forwar	d From	Last Re		10		10 -			10	•	22	0.00	4					
B. Total Moneta				-	From	Sched	ule I)	\$					0.00	4					
C. Total Funds	Available (S	um Of I	Lines A	and B	5)			\$					0.00						
D. Total Expend	ditures (Fro	m Sche	dule II	[)				\$					548.70	1					
E. Ending Cash	Balance (Su	ıbtract	Line D	From	Line C	)		\$				(	548.70)	]					
F. Value Of In-	Kind Contrib	utions	Receive	ed (Fr	om Sc	hedule	e II)	\$					0.00						
G. Unpaid Debt	s And Obliga	ations (	From S	chedu	ıle IV)	)		\$					0.00						
						AFFI	DAVI	T SE	CTIO	NC									
PART I - If this is	a Committe	ee repo	rt, trea	surer	sign h	ere. If	this is	a Car	ndidat	te re	port, c	can	didate si	gn here.					
I swear (or affirm) correct and comple		ort, inclu	ding the	attach	ed sch	edules 1	filed on	paper	or by e	electr	onic m	ediu	ım, are to	the best of	my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before day of	me this		20						•			Signatu	e of Person	Submitt	ing Re	port		_
		Signature	e	- ,				- -						Print	ed Name	1			
My Commission Ex	rpires							_						Emai	l				
	МО		DA	Υ		YR					Arc	ea C	ode	Daytime	e Teleph	one Nu	mber		
Part II- If this is	a report of	a candi	date's	autho	rized (	Commi	ttee, C	andid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		est of my	y knowle	dge an	d belie	f this p	olitical	comm	ittee h	as no	ot viola	ted	any provi	sions of the	act of Ju	ıne 3,1	937 (P	.L. 133	з,
Sworn to and subsc	ribed before n	ne this		20									:	Signature o	f Candida	ate			_
				20 -				_						Printe	d Name				- <b> </b>
My Commission Exp	_	nature						-						Emai	I				-
,								_											_
	ŀ	МО	DA	λY		YR					Area	Cod	le	Da	ytime To	elephor	ne Num	ber	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
ERIC ROE	From:	9/18/201	<u>8</u> To:	10/22/2018
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)			\$	0.00
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
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	Period	(4)	\$	0.00
			I	
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			\$	0.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu								
Name of Filing Comm	nittee or Candidate		Reporting Period						
			From: To:				:		
		<u> </u>			DATE			AMOUNT	
Full Name of Contributi	ing Committee			МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	)						
	•	·			•	•	$\overline{}$	DACE TOTAL	

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	e		Rep					
			From: To				<b>)</b> :	
					DATE			AMOUNT
Full Name of Contributor				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

#### **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:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	nmary 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				Rep	orting Pe	riod				
				Fror	n:		To	o:		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State	Zi	p Code (Plus	4)						
Employer Name		•			Occupa	tion	•	•		
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	Code (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	<b>TAL</b> 0.00

## 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		Report	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 o	on Schedule I. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z 5</i> 4a. <b>y</b> 1 4 <b>9</b> 0,	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 Perio	od	
ERIC ROE	From:	<u>9/18/2018</u> <b>To:</b>	10/22/2018
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 Candid	ate		Reporting	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	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	1				Re	porting	Period				
					Fro	om:		То	:		
					•		DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•					Occupa	ation				
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Desc	cript	ion of	f Contribution
Enter Grand Total of Part G on Sci Summary Page, Section 3.	nedule II, I	n-Kind	Contributi	ons De	etaile	ed					PAGE TOTAL 0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reporti	ng Period				
ERIC ROE			From	9/18	8/2018	То:	10/22/2018	
				DATE			AMOUNT	
To Whom Paid FRIENDS OF ERIC ROE			мо	DAY	YEAR			
Mailing Address P.O. BOX 32	83		8	23	2018	\$	73.70	
City WEST CHESTER  State PA  193813283				Description of Expenditure SEALING WAX FOR ENVELOPES				
To Whom Paid OLD TOWN DELI				DAY	YEAR			
Mailing Address 512 N. THIR	D STREET		10	18	2018	\$	300.00	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101		otion of Exp & BE\			RAISER	
<b>To Whom Paid</b> USPS	·		мо	DAY	YEAR			
Mailing Address 101 E. GAY S	STREET		7	16	2018	<b>\$</b>	175.00	
City WEST CHESTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19380	<b>Descrip</b> STAMP	otion of Exp	penditure			
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item							PAGE TOTAL	

548.70