Campaign Finance Report

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

						l_			CAN	DI	DATE	-	60			LOBI	BYIST		
Filer Identificati Number :	on	2018	C0870				port ed B		CAN	ונטו	DATE	V	Co	MMITTEE		СОВІ	31131		
Name of Filing C	Committe	e, Candida	ate or Lo	obbyist:		ERI	C J.	EPST	EIN										
Street Address:																			
City:									State	:				Zip Code	e: 17	112			
TYPE OF REPORT	6TH TUES	_	1.	2ND FRIDA PRIMARY	Y PRE	<u>-</u>	2.	30 DA		Р	OST-	3.		AMENDME REPORT?	NT	Yes	No)	\
(place X to the right of	6TH TUES		4.	2ND FRIDA ELECTION	Y PRI	E-	5. X	30 DA		Р	OST-	6.		TERMINAT REPORT?	ΓΙΟΝ	Yes	No)	√
report type)	ANNUAL	. REPORT	7.	Year 2018					IG MET					PAPER		✓	DISKE	TTE	
Name of Office S	Sought by	/ Candidat	te:						DATE	0	F ELE	CTIC	ON	District Number	Office Code	Par	ty Code	Cour	
									МО		DAY	Υ	EAR	105	STH	DEN	1	Joods	
REPRESENTATI	VE IN TH	HE GENER	AL ASS	EMBLY						11		6	2018		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of	Receipts	s and	МО	DAY	YEAR	ł			МО		DAY	Y	'EAR	FOF	R OFFIC	E USE	ONLY		
Expenditures	from:			9 18	2	018	Т	0		10	2	22	2018						
A. Amount Bro	ught For	ward Fron	ı Last R	eport				\$	•			((58.80)						
B. Total Monet	ary Conti	ributions A	And Rec	eipts (From	Sche	dule	e I)	\$				3,	705.84						
C. Total Funds	Available	e (Sum Of	Lines A	and B)				\$				3,	647.04						
D. Total Expend	ditures (From Sche	edule II	I)				\$				3,	705.84						
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$				(58.80)						
F. Value Of In-	Kind Con	tributions	Receiv	ed (From S	chedu	le II	[)	\$					0.00						
G. Unpaid Debt	s And Ob	oligations	(From S	Schedule IV	')			\$					0.00		,				
					AFF	ID/	٩VI	T SE	CTIO	Ν									
PART I - If this is	s a Comn	nittee repo	ort, trea	surer sign	here.	If th	is is	a Car	ndidate	e re	port, c	andi	idate sig	ın here.					
I swear (or affirm) correct and comple		report, incl	uding the	attached sc	hedule	s file	d on	paper	or by el	ectr	onic me	ediun	n, are to t	he best of	my know	/ledge	and beli	ef , tr	ue
Sworn to and subs	cribed bef day of	ore me this		20									Signature	of Person	Submitti	ing Rep	ort		_
	_	Signatu	re					-						Printe	ed Name				
My Commission Ex	cpires									-				Email					
		мо	D	AY	YR						Are	ea Co	de	Daytime	Telepho	one Nu	mber		
Part II- If this is	a report	of a cand	lidate's	authorized	Comr	nitte	ee, C	andid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		ne best of m	y knowle	edge and beli	ef this	poli	tical	comm	ittee ha	s no	ot viola	ted a	ny provisi	ons of the act of June 3,1937 (P.L. 133					
Sworn to and subsc		re me this											Si	ignature of	Candida	te			-
	day of —							_						Printed	Name				_
		Signature						-											_
My Commission Exp	oires													Email					
	-	МО	D	AY	YR	ł		-			Area	Code		Day	time Te	lephon	e Numb	er	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
ERIC J. EPSTEIN	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)	\$	3,705.84
			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			\$	3,705.84

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize on with an aggregate val							
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•					-	Г	PAGE 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 Filling Committee of Candidate				Reporting Period From: To:				
					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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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			Repo	orting Pe	riod			
			Fron	n:		To):	
				D	ATE		A	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			1	PAGE TOTAL
							\$	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 Can	didate		Report	ing Perio	d			
ERIC J. EPSTEIN			From:		9/18/201	<u>8</u> To:		10/22/2018
				D	ATE			AMOUNT
Full Name FRIENDS OF ERIC EPSTEIN (CAI	MPAIGN)			МО	DAY	YEAR		
Mailing Address 4100 HILLSE	ALE RD.						\$	3,705.84
City HBG	State PA	Zip Code (17112	Plus 4)	10	22	2018	3	
Receipt Description REIMBU	JRSEMENT FOR CAMPA	AIGN EXPENSES PA	AID BY CA	NDIDAT	E		·	
Enter Grand Total of Part E on S	Schedule T. Detailed	l Summary Page.	Section	4.				PAGE TOTAL
	,	·	2220011				\$	3,705.84

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	d	
ERIC J. EPSTEIN	From:	<u>9/18/2018</u> To:	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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidat	e		Reporting	g Period			
			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 Sch	edule II, In-Kin	d Contributions Deta	iled Sum	marv Pac	ie, F		PAGE TOTAL
Section 2.	,			, .	,	\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting P	Period			
					Fro	om:		То:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor						Occupa	tion			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	iedule II, I	In-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Co	ommittee or Candid	ate		Reporti	ng Period			
ERIC J. EPSTEIN				From	9/18	8/2018	То:	10/22/2018
			I		DATE			AMOUNT
To Whom Paid COMMUNITY REV	IEW			МО	DAY	YEAR		
Mailing Address	JEWISH FEDERA ST.	TION GREATER HE	BG 3301 NORTH FRONT	10	9	2018	\$	1,370.00
City HBG		State PA	Zip Code (Plus 4) 17110		otion of Exp			
To Whom Paid LAMAR				МО	DAY	YEAR		
Mailing Address 308 S. 10TH ST.				10	10	2018	\$	1,875.00
City LEMOYNE		State PA	Zip Code (Plus 4) 17043	Descrip BILLBC	otion of Exp	penditure		
To Whom Paid STAPLES CREDIT	PLAN	•		МО	DAY	YEAR		
Mailing Address	DEPT 51 PO BOX	78004		10	15	2018	\$	95.14
City PHOENIX		State AZ	Zip Code (Plus 4) 85062		otion of Exp			
To Whom Paid MELLOW MINDED) CAFE			мо	DAY	YEAR		
Mailing Address	5943 LINGLESTO	OWN RD.		10	15	2018	\$	365.70
City HBG		State PA	Zip Code (Plus 4) 17112		otion of Exp ING FUNDE			
								PAGE TOTAL
Enter Grand Tol	tal of Expenditure	es on Page 1, Re	port Cover Page, Item D).			١.	3 705 84

3,705.84