#### **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	C1526				port ed B		CAN	DIDATE COMMITTEE LOBBYIST									
Name of Filing C	ommittee,	Candida	ate or Lo	obbyist:		LOL	J JAS	SIKOF	F										
Street Address:																			
City:									State:					Zip Code	: 18	419			
TYPE OF REPORT	6TH TUESD PRE-PRIMA		1.	2ND FRIDAY PRIMARY	Y PRE	-	2.	30 DA PRIMA		Р	OST-	3.		AMENDME REPORT?	NT	Yes	No	•	<b>/</b>
(place X to the right of	6TH TUESE PRE-ELECT		4. 2ND FRIDAY PRE- ELECTION 5.X 30 DAY POST- ELECTION 6.							TERMINAT REPORT?	ION	Yes	No		<b>\</b>				
report type)	ANNUAL F	FILING METHOD ( ) CHECK ONE									PAPER		<b>√</b>	DISKE	TTE				
Name of Office S	ought by (	Candidat	:e:						DATE	0	F ELE	CTION		District Number	Office Code	Par	ty Code	Coun	
353505NITATI	- -	- OFNED	· • • • • •	=					МО		DAY	YEA	R	117	STH	LIB			•
REPRESENTATI	VE IN THE	GENEK	AL ASS	EMBLY						11		6	2018		(SEE INS	TRUCTI	ONS FOR (	CODES	)
Summary of		and	МО	DAY	YEAR	ł .			МО		DAY	YEA	R	FOR	OFFIC	E USE	ONLY		
Expenditures	from:			9 18	2	018	Т	0		10	2	22	2018						
A. Amount Bro	ught Forwa	ard From	1 Last R	eport				\$					0.00						
B. Total Moneta	ary Contrib	outions A	and Rec	eipts (From	Sche	dule	e I)	\$				4,23	5.00						
C. Total Funds	Available (	(Sum Of	Lines A	and B)				\$				4,23	5.00						
D. Total Expend	ditures (Fr	om Sche	dule II	[)				\$				2,98	5.06						
E. Ending Cash	Balance (	Subtract	Line D	From Line (	Σ)			\$				1,24	9.94						
F. Value Of In-	Kind Contr	ibutions	Receive	ed (From Se	chedu	le I	I)	\$				(	0.00						
G. Unpaid Debt	s And Obli	gations	(From S	chedule IV	)			\$					0.00		•				
					AFF	ID	AVI	T SE	CTIO	Ν									
PART I - If this is	a Commit	ttee repo	ort, trea	surer sign l	here. I	If th	nis is	a Can	didate	re	port, c	andida	te sig	jn here.					
I swear (or affirm) correct and comple	that this re ete.	port, incl	uding the	attached sch	nedules	s file	ed on	paper (	or by el	ectr	onic me	edium, a	re to t	the best of i	my know	/ledge	and beli	ef , tru	ue.
Sworn to and subs	cribed befor day of	e me this		20						•		Sig	nature	e of Person	Submitti	ing Rep	ort		_
		Signatur						-		•				Printe	d Name				_
My Commission Ex	pires	Signatui	e							-				Email					-
	М	10	D#	ΑΥ	YR			_			Are	ea Code		Daytime	Telepho	one Nu	mber		
Part II- If this is	a report o	of a cand	idate's	authorized	Comn	nitte	ee, C	andida	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		best of m	y knowle	dge and beli	ef this	poli	itical	commi	ittee ha	s no	ot violat	ted any	provis	ions of the	act of Ju	ine 3,1	937 (P.L	. 1333	3,
Sworn to and subsc		me this											s	ignature of	Candida	te			-
	day of — –							-						Printed	Name				-
	Si	gnature						-		_									_
My Commission Exp	ires													Email					
	_	мо	D/	AY	YR	l		-			Area	Code		Day	time Te	lephon	e Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	Period		
LOU JASIKOFF	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)	\$	435.00
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)			\$	1,750.00
TOTAL for the Reporting	Period	(2)	\$	1,750.00
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)			\$	2,050.00
TOTAL for the Reporting	Period	(3)	\$	2,050.00
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 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1			\$	4,235.00

#### **PART A**

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

\$50.01 TO \$250.00

	his Part to itemize only with an aggregate valu							
Name of Filing Committee or Candidate			Reporting Period					
			Fre	om:		То	:	
		-			DATE			AMOUNT
Full Name of Contribution	ng Committee			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)

**Reporting Period** Name of Filing Committee or Candidate LOU JASIKOFF From: <u>9/18/2018</u> **To:** 10/22/2018 DATE **AMOUNT Full Name of Contributor** МО DAY YEAR JANET SHAW **Mailing Address** 231 ORCHARD DR. 50.00 State Zip Code (Plus 4) City **FALLS** PΑ 18616 **Full Name of Contributor** мо DAY YEAR JAMES KOBRYNICH **Mailing Address** 276 STANTON TOWN RD 100.00 State Zip Code (Plus 4) City WEST ABINGTON PA 18414 **Full Name of Contributor** мо DAY YEAR WAYNE RISCH **Mailing Address** 604 MAPLE ST 100.00 10 8 2018 State Zip Code (Plus 4) City **BERWICK** PΑ 18603 **Full Name of Contributor** DAY YEAR МО MICHAEL HARRISON **Mailing Address** 53 ONEIDA AVE 100.00 2018 10 8 State Zip Code (Plus 4) City ATLANTIC HIGHLANDS NJ 07716 **Full Name of Contributor** DAY YEAR мо **RONALD GOODMAN Mailing Address 52 HOPE TERRACE** 100.00 2018 10 Zip Code (Plus 4) City State **CARLISLE** PΑ 17013

Full Nam	ne of Contril	butor						
TRAVIS	NICKS				МО	DAY	YEAR	
Mailing A	Address	7115 S. ACOMA WA	ΑΥ					\$ 100.00
City	LITTLETON		State	Zip Code (Plus 4)	10	8	2018	
			со	80120				
	ne of Contril	butor			мо	DAY	YEAR	
Mailing A	Address	810 ULYSSES DR						\$ 100.00
City <sub>F</sub>	PALISTON (	CDA	State	Zip Code (Plus 4)	10	6	2018	
	BALLSTON S	SPA	NY	12020				
	ne of Contril PRUSACK	butor			МО	DAY	YEAR	
Mailing A	Address	119 FOX HOLLOW F	RD.					\$ 50.00
City [	DRUMS		State	Zip Code (Plus 4)	8	22	2018	
			PA	18222				
	ne of Contril ILIBERTO	butor			мо	DAY	YEAR	
	ILIBERTO	47 WELLES ST.			МО			\$ 100.00
JOHN DI	ILIBERTO  Address	47 WELLES ST.	State	Zip Code (Plus 4)	<b>MO</b>	<b>DAY</b> 22	<b>YEAR</b> 2018	\$ 100.00
JOHN DI	ILIBERTO	47 WELLES ST.	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18702				\$ 100.00
JOHN DI	ILIBERTO  Address	47 WELLES ST.						\$ 100.00
JOHN DI	Address WILKES BAI ne of Contril	47 WELLES ST.			9	DAY	2018 YEAR	\$ 100.00 250.00
Mailing A  City \ Full Nam GARY JO  Mailing A	Address WILKES BAI ne of Contril OHNSON Address	47 WELLES ST.  RRE  butor			9	22	2018	
Mailing A  City \ Full Nam GARY JO  Mailing A	Address WILKES BAI ne of Contril	47 WELLES ST.  RRE  butor	PA	18702	9	DAY	2018 YEAR	
Mailing A  City \ Full Nam GARY JO  Mailing A  City E	Address WILKES BAI THE OF CONTRIBUTION WILKES BAI THE OF CONTRIBUTION THE OF CONTRIBUT	47 WELLES ST.  RRE  butor  PO BOX 1858	PA	18702 Zip Code (Plus 4)	9	DAY	2018 YEAR	
JOHN DI Mailing / City \ Full Nam GARY JC  City E	Address WILKES BAI ME of Contril OHNSON Address EL PRADO Me of Contril OGEDIN	47 WELLES ST.  RRE  butor  PO BOX 1858	PA	18702 Zip Code (Plus 4)	<b>мо</b>	22 DAY	2018  YEAR  2018	
Full Name GARY JC  City  Full Name GARY JC  Mailing A  City  Full Name LORI BC  Mailing A	Address WILKES BAI MILKES BAI MIL	47 WELLES ST.  RRE  butor  PO BOX 1858  butor  1 EAST TIOGA ST.	PA	18702 Zip Code (Plus 4)	<b>мо</b>	22 DAY	2018  YEAR  2018	\$ 250.00
Full Name GARY JC  City  Full Name GARY JC  Mailing A  City  Full Name LORI BC  Mailing A	Address WILKES BAI ME of Contril OHNSON Address EL PRADO Me of Contril OGEDIN	47 WELLES ST.  RRE  butor  PO BOX 1858  butor  1 EAST TIOGA ST.	State NM	<b>Zip Code (Plus 4)</b> 87529	9 <b>MO</b> 9	22 DAY 22	2018  YEAR  2018	\$ 250.00

							г	
Full Name of Cont	tributor			МО	DAY	VEAD		
HENRY HALLER				МО	DAY	YEAR		
Mailing Address	6196 RIDGE RD.						\$	100.00
City VALENCIA	A	State	Zip Code (Plus 4)	9	20	2018		
		PA	16059					
Full Name of Cont				МО	DAY	YEAR		
Mailing Address	1356 CROSSING LA	ANE					\$	100.00
City STROUDS	SRUPG	State	Zip Code (Plus 4)	-				
STROODS	DONG	PA	18360					
Full Name of Cont SANDY ARENELL				мо	DAY	YEAR		
Mailing Address	136 PROSPECT ST.						\$	50.00
City FARMING	DALE	State	Zip Code (Plus 4)	1				
		NY	11725					
			11735					
Full Name of Cont	tributor	<u>                                     </u>	11735	МО	DAY	YEAR		
	tributor 186 VANAUGEN HI		11735	мо	DAY	YEAR	\$	50.00
PAUL BOOS  Mailing Address	186 VANAUGEN HI		Zip Code (Plus 4)	<b>MO</b> 9	DAY 14	<b>YEAR</b> 2018	\$	50.00
PAUL BOOS  Mailing Address	186 VANAUGEN HI	LL RD.					\$	50.00
PAUL BOOS  Mailing Address	186 VANAUGEN HI	LL RD.	Zip Code (Plus 4)				\$	50.00
PAUL BOOS  Mailing Address  City MILFORD	186 VANAUGEN HI	LL RD.  State PA	Zip Code (Plus 4)	9	14	2018	\$	50.00
PAUL BOOS  Mailing Address  City MILFORD  Full Name of Cont JASON SCHEURE  Mailing Address	186 VANAUGEN HI tributor R 2100 LEE HIGHWA	LL RD.  State PA	Zip Code (Plus 4)	9	14	2018		
PAUL BOOS  Mailing Address  City MILFORD  Full Name of Cont JASON SCHEURE  Mailing Address	186 VANAUGEN HI tributor R 2100 LEE HIGHWA	LL RD.  State PA	<b>Zip Code (Plus 4)</b> 18337	9 <b>MO</b>	DAY	2018 YEAR		
PAUL BOOS  Mailing Address  City MILFORD  Full Name of Cont JASON SCHEURE  Mailing Address	186 VANAUGEN HI tributor R 2100 LEE HIGHWA	State PA State	Zip Code (Plus 4) 18337  Zip Code (Plus 4)	9 <b>MO</b>	DAY	2018 YEAR		
PAUL BOOS  Mailing Address  City MILFORD  Full Name of Cont JASON SCHEURE  Mailing Address  City ALLINGTO	186 VANAUGEN HI tributor R 2100 LEE HIGHWA	State PA State	Zip Code (Plus 4) 18337  Zip Code (Plus 4)	<b>MO</b>	14 DAY	2018  YEAR  2018		
PAUL BOOS  Mailing Address  City MILFORD  Full Name of Cont JASON SCHEURE  Mailing Address  City ALLINGTO  Full Name of Cont KATHY DOBASH	186 VANAUGEN HIL  tributor R 2100 LEE HIGHWA	State PA State	Zip Code (Plus 4) 18337  Zip Code (Plus 4)	<b>MO</b>	14 DAY	2018  YEAR  2018	\$	50.00

Full Name of Contributor KATHY DOBASH	мо	DAY	YEAR			
Mailing Address 1250 BACO				<b>\$</b> 125.00		
ity FORT MEYERS  State FL  Zip Code (Plus 4) 33913		9	9	2018		
Full Name of Contributor DAVID BRADLEY	<u>'</u>		МО	DAY	YEAR	
	RT ROAD		<b>MO</b>	<b>DAY</b> 30	<b>YEAR</b> 2018	\$ 100.00

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

PAGE TOTAL									
\$	1,750.00								

#### **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	ame of Filing Committee or Candidate Repo			Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	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.)

ame of Filing Committee or Candidate					Reporting Period						
LOU JASIKOFF				Fron	n:	9/18/2	018 <b>T</b> o	<b>)</b> :	10/22/2018		
					DA	TE		Α	MOUNT		
Full Name of Contributor JOHN MANKO					МО	DAY	YEAR				
Mailing 1115 QUINCY AVE Address								\$	50.00		
City DUNMORE	State PA		Code (Plus	4)	8	22	2018				
Employer Name AGO INSURANCE SOFTWARE					Occupat	ion I	Γ				
Employer Mailing Address/Principal Place of Business  City					State		Zip Cod	de (Plus 4)			
Business  100 VALLEY RD.SUITE 105  MT ARLINGTON					LNJ		07856	5			
Full Name of Contributor JOHN MANKO					МО	DAY	YEAR				
Mailing 1115 QUINCY AVE								\$	500.00		
City DUNMORE	<b>State</b> PA		Code (Plus	4)	9	1	2018				
Employer Name AGO INSURANCE SOF	TWARE				Occupation IT						
Employer Mailing Address/Principal Place Business	e of		City			State		Zip Cod	de (Plus 4)		
100 VALLEY RD.SUITE 105			MT ARLIN	IGTON		LNJ		07856	5		
Full Name of Contributor WM. FELDBAUMER					МО	DAY	YEAR				
Mailing 675 AIRPORT RD.								\$	500.00		
City LEHIGHTON	State PA		Code (Plus	4)	9	4	2018				
Employer Name SELF					Occupation RETIRED						
Employer Mailing Address/Principal Place Business	e of		City		State			Zip Code (Plus 4)			
675 AIRPORT RD.			LEHIGHT	ON		PA		1823	18235		

									TAGE 10
Full Name of Cor BARBARA LACE					мо	DAY	YEAR		
Mailing Address	PO BOX 1447							<b>\$</b>	500.00
City BLANCO		State	<b>Zip Code (Plus 4)</b> 78606			25	2018	3	
		TX	78	3606					
Employer Name SELF					Occupat	ion	IOUSEV	VIFE	
Employer Mailing Address/Principal Place of City Business					State		Zip Cod	e (Plus 4)	
PO BOX 1147 BLANCO					TX Z				
Full Name of Cor RON FORMAN	Full Name of Contributor RON FORMAN				мо	DAY	YEAR		
Mailing Address	147 ROGER HOLLOW	RD.						\$	500.00
City MEHOOF	PANY	State	Zi	Code (Plus 4)	10	11	2018	3	
		PA	18	3629					
Employer Name	SELF		1		Occupation FARMER				
Employer Mailing Business	g Address/Principal Plac	e of		City	1	State		Zip Cod	e (Plus 4)
147 ROGER HOLLOW RD. MEHOOPANY				MEHOOPANY		PA		18629	
Enter Grand To	Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section							P	AGE TOTAL
Litter Grand It	and the constitution	auic 1, Detailed 3	w1111	iai y i age, secti	J.1 J.			\$	2,050.00

## 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	ime of Filing Committee or Candidate			Reporting Period						
			From:			To:				
				D	ATE		AM	OUNT		
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			PAG	E TOTAL		
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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	d						
LOU JASIKOFF	From:	<u>9/18/2018</u> <b>To:</b>	10/22/2018					
. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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	g Period	eriod				
			From:			То:			
				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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL		
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL		
						\$	0.00		

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate			Re	eporting Period								
					Fro	m:		То	:			
					<u> </u>		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 P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	cripti	ion of (	Contributio	on
Enter Grand Total of Part G on S	chedule II, I	In-Kind	Contributi	ons De	taile	ed					PAGE TOT	ΓAL
Summary Page, Section 3.												0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period				
LOU JASIKOFF			From	9/18	8/2018	То:	10/22/2018	
				DATE			AMOUNT	
To Whom Paid NORTHEAST TAG & TITLE			МО	DAY	YEAR			
Mailing Address 159 W. TIOGA ST.			8	2	2018	\$	10.30	
City TUNKHANNOCK	NOCK PA  Zip Code (Plus 4) 18657			otion of Exp	penditure			
<b>To Whom Paid</b> GAMBAL PRINTING			МО	DAY	YEAR			
Mailing Address 1038 GOLDEN MILE	ROAD		9	7	2018	\$	320.36	
City TOWANDA State Zip Code (Plus 4) PA 18848				Description of Expenditure PALM CARDS				
To Whom Paid NICHOLSON WOMEN'S CLUB			МО	DAY	YEAR			
Mailing Address			9	11	2018	\$	25.00	
City NICHOLSON	SON State Zip Code (Plus 4) PA 18446			Description of Expenditure BOOTH AT BRIDGE DAY				
To Whom Paid STAPLES			мо	DAY	YEAR			
Mailing Address 951 VIEWMONT DR	IVE		9	12	2018	\$	5.71	
City SCANTON	<b>State</b> PA	Zip Code (Plus 4)		otion of Exp	penditure			
To Whom Paid DOLLAR GENERAL			МО	DAY	YEAR			
Mailing Address 138 COLLEGE AVE.			9	26	2018	\$	13.99	
<b>City</b> FACTORYVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18419		otion of Exp ONE MEET				

						PAG	E 16
<b>To Whom Paid</b> BELLA PIZZA			мо	DAY	YEAR		
Mailing Address 97 COLLEG	GE AVE		9	27	2018	\$	65.75
City FACTORYVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18419		otion of Exp KEYSTONE		amp; GREE	Г
To Whom Paid MOBIL			МО	DAY	YEAR		
Mailing Address 50 LACKA	10	11	2018	<b>\$</b>	30.00		
City FACTORYVILLE	State PA	<b>Zip Code (Plus 4)</b> 18419	<b>Descrip</b> FUEL/S	l otion of Exp IGNS	l penditure		
<b>To Whom Paid</b> JAWORSKI SIGN			мо	DAY	YEAR		
Mailing Address 913-15 SC	OUTH MAIN AVE		10	12	2018	\$	450.00
City SCRANTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18504	Description of Expenditure SIGNS				
<b>To Whom Paid</b> FOOD MART			МО	DAY	YEAR		
Mailing Address 8032 RT.	6		10	15	2018	\$	30.00
City MESHOPPEN	<b>State</b> PA	Zip Code (Plus 4)	<b>Descrip</b> FUEL/S	otion of Exp	penditure		
To Whom Paid SUNOCO			МО	DAY	YEAR		
Mailing Address 2 LANE HI	LL RD.		10	15	2018	\$	30.08
City TUNKHANNOCK	<b>State</b> PA	Zip Code (Plus 4)	<b>Descrip</b> FUEL/S	otion of Exp	penditure		
To Whom Paid			МО	DAY	YEAR		
WNEP - TV	Mailing Address 16 MONTAGE MT. RD.						
Mailing Address	GE MT. RD.		10	15	2018	<b>\$</b>	375.00

								PAGE	
<b>To Whom Paid</b> WNEP - TV				МО	DAY	YEAR			
Mailing Address	16 MONTAGE MT. RI	Э.		10	15	2018	\$		317.69
City MOOSIC State Zip Code (Plus 4) PA 18507					otion of Exp	enditure			
To Whom Paid KEMMELER GRAPH	ICS			мо	DAY	YEAR			
Mailing Address 6169 SULLIVAN TRAIL				10	16	2018	\$		350.20
<b>City</b> NAZARETH	State Zip Code (Plus 4)				otion of Exp	enditure			
To Whom Paid JOHN DILIBERTO				МО	DAY	YEAR			
Mailing Address	47 SOUTH WELLES			10	16	2018	\$		393.74
City WILKES BA	ARRE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18702	Description of Expenditure SIGNS					
To Whom Paid CITGO			l	МО	DAY	YEAR			
				<b>MO</b>	<b>DAY</b> 17	<b>YEAR</b> 2018	\$		20.00
CITGO	IOCK	<b>State</b> PA	Zip Code (Plus 4)	10	17 otion of Exp	2018	\$		20.00
CITGO  Mailing Address			Zip Code (Plus 4)	10  Descrip	17 otion of Exp	2018	\$		20.00
CITGO  Mailing Address  City TUNKHANN  To Whom Paid CASH - PEOPLES B		РА	Zip Code (Plus 4)	10  Descrip FUEL/S	17 otion of Exp IGNS	2018 penditure	\$		20.00
CITGO  Mailing Address  City TUNKHANN  To Whom Paid CASH - PEOPLES B	3ANK 494 N. GRAVEL PON	РА	Zip Code (Plus 4)  Zip Code (Plus 4)  18411	10  Descrip FUEL/S  MO  10  Descrip	17 Pition of Exp IGNS DAY	2018  penditure  YEAR  2018	\$	R TO DO	100.00
CITGO  Mailing Address  City TUNKHANN  To Whom Paid CASH - PEOPLES B  Mailing Address	3ANK 494 N. GRAVEL PON	PA  D RD.  State	Zip Code (Plus 4)	10  Descrip FUEL/S  MO  10  Descrip	17  otion of Exp IGNS  DAY  18  otion of Exp	2018  penditure  YEAR  2018	\$	R TO DO	100.00
CITGO  Mailing Address  City TUNKHANN  To Whom Paid CASH - PEOPLES B  Mailing Address  City CLARKS SU  To Whom Paid JAWORSKI SIGN	3ANK 494 N. GRAVEL PON	PA  D RD.  State PA	Zip Code (Plus 4)	10  Descrip FUEL/S  MO  10  Descrip CAMPA	17  Potion of Exp IGNS  DAY  18  Potion of Exp IGN SUPPO	2018  Penditure  YEAR  2018  Penditure  DRT CREV	\$	R TO DO	100.00

To Whom Paid DEMOCRACY ENGINE			мо	DAY	YEAR	
Mailing Address 2125 14TH ST. N.W				20	2018	\$ 69.64
City WASHINGTON	<b>State</b> DC	<b>Zip Code (Plus 4)</b> 20009		otion of Exp E POCESSI		
Enter Grand Total of Expend	itures on Page 1, Re	port Cover Page, Item D				\$ <b>PAGE TOTAL</b> 2,985.06