#### **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 2018	30217				port ed B		CANDI	DATE		СОМ	<b>ITTEE</b>	✓	LOBE	SYIST	
Name of Filing C	Committee, Candid	late or L	obbyist:		FRIE	END	S OF	TONY SP	OSATO	)						
Street Address:	90 W. MAPLE	AVE														
City:	MORRISVILLE	Ē						State:		<b>Zip Code:</b> 19067						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE- PRIMARY 2. 30 DA' PRIMA						POST- 3.			AMENDM REPORT?		Yes	No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE- 5. 30 DAY ELECTION					POST-	6. <b>X</b>		TERMINA REPORT?		Yes	No	<b>\</b>	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2018					IG METHO				PAPER		<b>/</b>	DISKE	ГТЕ
Name of Office S	= Sought by Candida	ite:			_			DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
								мо	DAY	YE	AR		1	REP		
								11		6	2018		(SEE IN	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
Expenditures	from:		10 23	2	018	Т	0	11	2	26	2018					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			1	96.68					
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	eI)	\$				0.00					
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			1	96.68					
D. Total Expend	ditures (From Sch	edule II	I)				\$				0.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C	<b>E)</b>			\$			1	96.68					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sc	hedu	le II	[)	\$		3	300,0	00.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	)			\$				0.00			'		
				AFF	ID/	٩VI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign h	nere. I	[f th	is is	a Can	didate re	eport, c	andi	date sig	gn here.				
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	e attached sch	edules	filed	d on	paper (	or by elect	ronic me	edium	, are to t	the best o	f my knov	wledge a	and belie	f , true
Sworn to and subs	cribed before me thi day of	s	20							s	ignature	of Perso	n Submit	ting Rep	ort	
	Signati	ıre					- -					Prin	ted Name	<u> </u>		
My Commission Ex	cpires						_					Ema	il			
	мо	D	AY	YR					Are	ea Cod	e	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	e, C	andida	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of led.	ny knowl	edge and belie	ef this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this										s	ignature o	of Candida	ate		
	day of						-					Printe	d Name			
	Signature						-									
My Commission Exp	ires											Ema	il			
	МО	D	AY	YR			•		Area	Code		Da	aytime T	elephon	e Numbe	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF TONY SPOSATO	From:	10/23/201	<u>l8</u> To:	11/26/2018
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 onl with an aggregate value		\$2		) in the			
Nume of Fining Comm		From:			То	:		
					DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	<b>!</b>	<b>I</b>	!		<u> </u>			DAGE 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 Candidate  Fr					eriod	To	o:	
			l		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	Reporting 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 Scho	edule 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.)

Name of Filing Committee or Candida	nme of Filing Committee or Candidate				orting Pe	riod			
					n:		То	:	
					D	ATE		AN	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	i <b>4</b> )					
Employer Name	•	•			Occupa	tion	•	•	
Employer Mailing Address/Principal Business	Place of		City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on So	chedule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	AGE 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	lame of Filing Committee or Candidate				od			
			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	GE 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 Per	iod	
FRIENDS OF TONY SPOSATO	From:	<u>10/23/2018</u> <b>To:</b>	11/26/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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)	\$	300,000.00
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,	•	\$	300,000.00

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidate				Reporting Period				
	From:			То:				
				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 Sche	dule II. In-Kind (	Contributions Deta	iled Sum	marv Pac	ıe.		PAGE TOTAL	
Section 2.	<b>,</b>			<b>,</b>		\$	0.00	

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate

Reporting Period

FRIENDS OF TONY SPOSATO

From: 10/23/2018 To: 11/26/2018

FRIENDS OF TONY SPOSATO	RIENDS OF TONY SPOSATO				om: <u>10/23/2018</u> To:			<b>To:</b> <u>11/26/2018</u>	
						DATE		AMOUNT	
Full Name of Contributor REPUBLICAN PARTY OF PA				мо		DAY	YEAR		
Mailing Address 112 STATE ST								\$ 250,000.00	
City HARRISBURG	<b>State</b> PA		Zip Code(Plus 4) 17101		10	25	2018		
Employer of Contributor					Occupation				
Employer Mailing Address/Principal Pl Business	ace of	City	State		Zip 4)	Code(Plus	Descri	ption of Contribution	
Full Name of Contributor REPUBLICAN PARTY OF PA				мо	)	DAY	YEAR		
Mailing Address 112 STATE ST								\$ 50,000.00	
City HARRISBURG	<b>State</b> PA		<b>Zip Code(Plus 4)</b> 17101		11	1	2018		
Employer of Contributor	ľ			Осс	upat	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		l	l				<u> </u>	PAGE TOTAL	

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or (	Reporting Period						
	From			То:			
				DATE			AMOUNT
To Whom Paid	МО	DAY	YEAR				
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item I							PAGE TOTAL
						\$	0.00