#### **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 20:	18C0397				Repor Filed			CANDI	DATE	*		ОММІТТІ	E	LOB	BYIS	ST	
Name of Filing C	Committee, Cand	idate or L	obbyis	st:	Ē	DWAF	RD T.	SAI	NDERS	III								
Street Address:																		
City:								St	tate:				Zip Co	<b>Zip Code:</b> 17815				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND F PRIMA		Y PRE-	2.	30 E PRIN			POST-	3.	AMENDMENT Yes REPORT?					No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND F		Y PRE-	- 5.	30 E							TERMINATION REPORT?			No	<b>\</b>
report type)	ANNUAL REPOR	7.	Year	2018					METHO				PAPER	PAPER			KETTE	
Name of Office S	Sought by Candid	late:	-			•		D	ATE O	F ELE	CT:	ION	District Number	Office Code	Pa	rty Co	ode Cor	
								М	0	DAY		YEAR	109	STH	DE	M	190.	
REPRESENTATIVE IN THE GENERAL ASSEMBLY									11		6	201	8	(SEE II	NSTRUCT	ONS F	OR CODE	S)
	Receipts and	МО	DA	Υ	YEAR			М	0	DAY		YEAR	FC	OR OFFI	CE USI	ON	LY	
Expenditures	from:		10	23	20	18	ГО		11		26	201	8					
A. Amount Bro	ught Forward Fr	om Last R	eport				9	\$			(	(550.00	)					
B. Total Moneta	ary Contribution	s And Red	eipts (	(From	Sched	lule I)		\$				500.0	0					
C. Total Funds Available (Sum Of Lines A and B)								\$				(50.00	)					
D. Total Expend	ditures (From So	hedule II	Ι)					\$				200.0	)					
E. Ending Cash	Balance (Subtra	act Line D	From	Line (	C)			\$			(	250.00	)					
F. Value Of In-	Kind Contributio	ns Receiv	ed (Fr	om So	chedule	e II)		\$				0.00	)					
G. Unpaid Debt	s And Obligation	ns (From	Schedu	ule IV	)		!	\$				0.0	0		'			
					AFFI	[DAV]	IT SI	ECT	ΓΙΟΝ									
PART I - If this is		• •								•								
I swear (or affirm) correct and comple		ncluding th	e attach	ned sch	nedules 1	filed or	pape	r or I	by elect	ronic m	ediu	ım, are to	the best o	of my kno	owledge	and	belief , 1	true
Sworn to and subs	cribed before me t day of	his	20									Signatu	re of Perso	n Submi	tting Re	port		_
	Signa	ture	_				<u>-</u>						Prir	ted Nam	ie			_
My Commission Ex	cpires						_						Ema	il				
	МО	D	AY		YR					Ar	ea C	Code	Daytin	ne Telep	hone N	ımbe	r	
Part II- If this is	a report of a ca	ndidate's	autho	rized	Commi	ittee, (	Candi	date	e shall	sign h	ere.	•						
I swear (or affirm) No 320) as amende		f my knowl	edge ar	nd belie	ef this p	politica	comi	mitte	ee has n	ot viola	ted	any prov	isions of th	e act of .	June 3,1	937	(P.L. 13	33,
Sworn to and subsc	ribed before me th day of	is	20										Signature	of Candid	date			- $ $
	— ——		_ 20 _				_						Print	ed Name				-
My Commission E	Signatur	e					_						Ema	nil				-
My Commission Exp							_											_
	МО	D	AY		YR					Area	Cod	le	D	aytime '	Telepho	ne Nu	ımber	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
EDWARD T. SANDERS III	From:	10/23/20	<u>18</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)	\$	500.00
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			\$	500.00

#### **PART A**

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

\$50.01 TO \$250.00

Name of Filing Committee or Candidate				Period			
			From:		То	:	
		<b>I</b>		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 Fining 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)	١						

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	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					Reporting Period						
				Fror	n:		To	То:			
					D	ATE			AMOUNT		
Full Name of Contributor					мо	DAY	YEAR				
Mailing Address								\$		0.00	
City	State	Zi	p Code (Plus	<b>4</b> )							
Employer Name		•			Occupa	tion	•	•			
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	ode (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	Reporting Pe		
EDWARD T. SANDERS III	From:	<u>10/23/2018</u> <b>To:</b>	11/26/2018

			D	ATE		AMOUNT
Full Name  COMMITTEE TO ELECT ED SANDER	МО	DAY	YEAR			
Mailing Address 207 OMAN ROA	11	16	2018	\$ 500.00		
City BLOOMSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17815	11	10	2018	
Receipt Description CAMPAIGN	LOAN REIMBURS	EMENT				

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

**PAGE TOTAL \$** 500.00

#### **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	od							
EDWARD T. SANDERS III	From:	<u>10/23/2018</u> <b>To:</b>	11/26/2018						
1. 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 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						
	Fı					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	ле Г		PAGE TOTAL			
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL			
						\$	0.00			

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate					Re	porting	Period				
					Fro	m:		То	То:		
							DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State	Zip Code(Plus 4)									
Employer of Contributor	•		•			Occupa	ation				
Employer Mailing Address/Principal P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	ripti	on of C	ontribution
Enter Grand Total of Part G on S	chedule II, I	In-Kind	Contributi	ons De	taile	ed					PAGE TOTAL
Summary Page, Section 3.											0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
EDWARD T. SANDERS III	From	10/23/2018	То:	11/26/2018	

			DATE				AMOUNT
To Whom Paid COMMITTEE TO ELECT ED SANDERS III			МО	DAY	YEAR		
Mailing Address 207 OMAN ROAD		11	2	2018	\$	200.00	
City BLOOMSBURG	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17815	CAMPAIGN LOAN				
	•	•					PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	200.00	