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 :	ion 2018	C0740			Report Filed B		CANDI	DATE	✓	СС	OMMITTE		LOB	BYIS	г		
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		AMY FA	-											
Street Address:																	
City:							State:					Zip Code: 15066					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY				AY I ARY	POST-	Г- 3.		AMENDMENT REPORT?		Yes	\checkmark	No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE- 5.X 3 ELECTION				AY I TION	POST-	POST- 6.		TERMINATION REPORT?		Yes		No	\checkmark	
report type)	ANNUAL REPORT	7.	Year 2018				NG METHO CHECK O				PAPER		\checkmark	DIS	KETTE	•	
Name of Office S	Sought by Candidat	te:					DATE O	F ELE	CTION	1	District Number	Office Code	Pa	ty Co	de Cou Coo		
							мо	DAY	YEA	R	14	STH	DEI	4			
REPRESENTATIVE IN THE GENERAL ASSEMBLY							11		6	2018	i	(SEE INS	TRUCTI	ONS F	DR CODE	S)	
Summary of	Receipts and	мо	DAY	YEAR			мо	DAY	YEA	R	FOI	R OFFIC	e use	ONL	Y		
Expenditures	s from:		9 18	20	018 T	Ο	10	2	22	2018							
A. Amount Bro	ught Forward Fron	n Last Ro	eport			\$			(4,02	0.00)							
B. Total Monet	ary Contributions	And Rece	eipts (From	n Schee	dule I)	\$	391.81										
C. Total Funds Available (Sum Of Lines A and B)							5		(3,62	3.19)							
D. Total Expen	ditures (From Sche	edule III	[)			\$	5		39	1.81]						
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		\$	5		(4,020	.00)							
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedul	le II)	\$	5			0.00	-						
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')		\$	\$ 0.00										
				AFF	IDAVI	T SE	CTION										
	s a Committee repo		-					•		-	-				-11-6		
correct and compl) that this report, incl ete.	uaing the	attached sc	neaules	filed on	paper	or by elect	ronic me	eaium, a	are to	the best of	ту кпом	leage	and b	ellet , t	true	
Sworn to and subs	scribed before me this day of 	5	20						Sig	natur	e of Person	Submitti	ing Re	port			
	Signatu	re				-					Print	ed Name					
My Commission E	xpires					_					Email						
	МО	DA	Y	YR				Are	ea Code		Daytime	e Telepho	one Nu	mber			
	a report of a cance) that to the best of m ed.							-		provis	ions of the	act of Ju	ne 3,1	937 (P.L. 13	33,	
Sworn to and subso	cribed before me this									s	ignature of	f Candida	te			-	
	day of		20			_					Drinter	i Name				_	
	Signature					-					· · ····eu						
My Commission Exp	-										Email						
	мо	DA	NY	YR		-		Area	Code		Da	ytime Te	lepho	ne Nu	nber	_	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: <u>9/18/2018</u> To: AMY FAZIO 10/22/2018 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 391.81 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 391.81 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PAGE 3

PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting Period						
Fr			From: To:						
		· · · ·		DATE			AMOUNT		
Full Name of Contributing Cor	nmittee		мо	DAY	YEAR				
Mailing Address						\$	0.00		
City State Zip Code (Plus 4))						
						Γ	PAGE TOTAL		

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

0.00

\$

PART B 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	orting P	eriod			
From: To):		
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	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		А	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	0.00

PART D 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	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

PART E **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 Period					
AMY FAZIO From:				m: <u>9/18/2018</u> To:				<u>10/22/2018</u>	
				D	ATE			AMOUNT	
Full Name AMY FAZIO				мо	DAY	YEAR			
Mailing Address 974 TULIP DRIVE							\$	391.81	
City NEW BRIGHTON	State PA	Zip Code (15066	Plus 4)	10	8	2018	3		
Receipt Description REIMBURSEN	IENT OF EXPENSES	5							
Enter Grand Total of Part E on Sched	lule T. Detailed S	ummary Page	Section	4				PAGE TOTAL	
		annar y Tuge,	Section				\$	391.81	

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 Period		
AMY FAZIO	From:	<u>9/18/2018</u> то :	<u>10/22/2018</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 Candidate R			Reporting Period					
F						То:		
				DATE		АМО	UNT	
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

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

Name of Filing Committee or Candidate				Reporting Period							
					Fro	From: To:					
					DATE				AMOUNT		
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(F	Plus 4)							
Employer of Contributor						Occupat	tion				
Employer Mailing Address/Principal Place of City State Business				State		Zip Code(Plus Descri			ption of Contribution		

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidat	Reporting Period							
AMY FAZIO	From	<u>9/18</u>	<u>8/2018</u>	То:	<u>10/22/2018</u>			
		AMOUNT						
To Whom Paid AMY FAZIO				DAY	YEAR			
Mailing Address 974 TULIP DRIVE			10	8	2018	\$	391.81	
City NEW BRIGHTON	State PA	Zip Code (Plus 4) 15066	· ·	otion of Exp L, CAMPAI			STAGE	
							PAGE TOTAL	
Enter Grand Total of Expenditures	s on Page 1, R	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				\$	391.81	