Campaign Finance Report

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

Filer Identification	on 20	018C1526			Rep File	port ed B		CAN	IDI	DATE	√	CC	MMITTEE		LOBI	BYIST		
Name of Filing C	ommittee, Can	didate or L	obbyist:		LOU	JAS	SIKOF	F						_				
Street Address:																		
City:								State	:				Zip Code	: 18	419			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	- 2	2.	30 DA PRIMA		P	OST-	3.		AMENDME REPORT?	NT	Yes	No		/
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5	5.	30 DA ELECT		Р	OST-	6. X		TERMINAT REPORT?	ION	Yes	No		/
	ANNUAL REPO	RT 7.	Year 2018					IG ME					PAPER		\	DISKE	TTE	
Name of Office S	ought by Cand	idate:	-					DAT	E O	F ELE	CTION		District Number	Office Code	Par	ty Code	Coun	
	- 							МО		DAY	YEA	R	117	STH	LIB			
REPRESENTATI	VE IN THE GEI	VERAL ASS	EMBLY						11		6	2018		(SEE INS	TRUCTI	ONS FOR (CODES)
Summary of I		мо	DAY	YEAR			-	МО		DAY	YEA	ıR	FOR	OFFIC	E USE	ONLY		
Expenditures	from:		10 23	20	018	Т	0		11	2	26	2018						
A. Amount Brou	ught Forward F	rom Last R	eport				\$				1,24	9.94						
B. Total Moneta	ary Contributio	ns And Rec	eipts (From	Sched	dule	Ι)	\$				1,60	0.00]					
C. Total Funds	Available (Sum	Of Lines A	and B)				\$				2,84	9.94						
D. Total Expend	ditures (From S	Schedule II	1)				\$				2,53	4.35						
E. Ending Cash	Balance (Subt	ract Line D	From Line C)			\$				31	5.59						
F. Value Of In-I	Kind Contributi	ons Receiv	ed (From Sch	hedul	le II)	\$					0.00						
G. Unpaid Debt	s And Obligation	ons (From S	Schedule IV)				\$				33	8.70		'				
				AFF	IDA	AVI	T SE	CTIC	N									
PART I - If this is	a Committee	report, trea	ısurer sign h	ere. I	lf thi	is is	a Can	ndidat	e re	port, c	andida	te sig	gn here.					
I swear (or affirm) correct and comple		including the	a attached sche	edules	ifiled	no t	paper (or by e	lectr	ronic me	edium, a	re to 1	the best of 1	my know	/ledge	and beli	ef , tru	пе
Sworn to and subse	cribed before me day of	this	20						,		Sig	nature	e of Person	Submitt	ing Rep	oort		-
	Siar	nature				_	<u>-</u>						Printe	d Name				-[
My Commission Ex	-	etai c							•				Email					-
	мо	D	AY	YR			_			Are	ea Code		Daytime	Telepho	one Nu	mber		
Part II- If this is	a report of a c	andidate's	authorized C	Comm	nitte	e, C	andid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my knowl	edge and belief	f this	polit	ical:	commi	ittee ha	as no	ot violat	ted any	provis	ions of the	act of Ju	ine 3,1	937 (P.L	. 1333	3,
Sworn to and subsc		:his										s	ignature of	Candida	te			-
	day of —— ———						-						Printed	Name				-
	Signatu	ıre					-											_
My Commission Exp	ires												Email					
	МО	D	PAY	YR			-			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		
LOU JASIKOFF	From:	10/23/201	<u>8</u> To:	11/26/2018
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	100.00
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)			\$	500.00
TOTAL for the Reporting	Period	(2)	\$	500.00
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)			\$	1,000.00
TOTAL for the Reporting	Period	(3)	\$	1,000.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page			\$	1,600.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•			•	•		PAGE TOTAL

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

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 Candidat	e		Rep	orting Pe	eriod			
LOU JASIKOFF			Fro	m:	10/23/2	2018 T o) :	11/26/2018
					DATE			AMOUNT
Full Name of Contributor LLOYD SCHAFER				МО	DAY	YEAR		
Mailing Address 3305 BRYNOOD DR	IVE						\$	50.00
City WHITEHALL	State PA	Zip Code (Plus 4) 18052		10	25	2018		
Full Name of Contributor JOHN DILIBERTO				МО	DAY	YEAR		
Mailing Address 47 WELLES ST. City WILKES BARRE	State PA	Zip Code (Plus 4) 18702		10	29	2018	\$	200.00
Full Name of Contributor CHRISTINE JONES				МО	DAY	YEAR		
Mailing Address 100 BOBCAT LANE							\$	50.00
City CLARKS SUMMIT	State PA	Zip Code (Plus 4) 18411		10	29	2018		
Full Name of Contributor WILLIAM SAUNDERS				МО	DAY	YEAR		
Mailing Address 756 S. WARNOCK S City PHILADELPHIA	State PA	Zip Code (Plus 4) 19147		10	29	2018	\$	100.00
Full Name of Contributor STEPHEN MAJCHEREK				МО	DAY	YEAR		
Mailing Address 22946 AVENIDA VA	LVERDE						\$	100.00
City LAGUNA HILLS	State CA	Zip Code (Plus 4) 92653		10	29	2018		

PAGE TOTAL

\$ 500.00

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

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 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.)

Name of Filing Committee of Candid	ate			Кер	orting Pe	riod			
LOU JASIKOFF				Fron	n:	10/23/2	<u>018</u> To):	<u>11/26/2018</u>
					D/	ATE		АМ	OUNT
Full Name of Contributor WILLIAM EARNSHAW					МО	DAY	YEAR		
Mailing 832 JAYNES BENI Address	O RD.							\$	500.00
City MEHOOPANY	State	Zi	p Code (Plus	4)	10	29	2018		
PERIODIANI	PA	18	8629						
Employer Name SELF					Occupat	ion R	ETIRED)	
Employer Mailing Address/Principal Business	Place of		City			State		Zip Code	(Plus 4)
832 JAYNES BEND RD.			MEHOOP	ANY		PA		18629	
Full Name of Contributor JOHN TAYLOR					МО	DAY	YEAR		
Mailing 145 CHURCH ST.								\$	500.00
City FAIR HAVEN	State	Zi	p Code (Plus	4)	10	29	2018		
- TAINTIAVEN	NJ	07	704						
Employer Name SELF					Occupat	ion M	1D		
Employer Mailing Address/Principal Business	Place of		City		ı	State		Zip Code	(Plus 4)
145 CHURCH ST.			FAIRHAV	EN		NJ		07704	
Enter Grand Total of Part C on S	chedule I, Detailed S	Sumn	nary Page,	Section	on 3.		:	PA \$	1,000.00

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	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name		-		мо	DAY	YEAR		-
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description								
Enter Grand Total of Part E on S	Schedule I Detailer	d Summary Page	Section	4		[P	PAGE TOTAL
zne. Grana rotar or r art z on o	renedure 1/ Detaned	· Summary rage,	Section	•			\$	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	
LOU JASIKOFF	From:	<u>10/23/2018</u> To:	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)	\$	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			
			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 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	1				Re	porting l	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									- \$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Can	didate		Reporti	ng Period			
LOU JASIKOFF			From	10/2	3/2018	То:	11/26/2018
				DATE			AMOUNT
To Whom Paid KEMMERER GRAPHICS			мо	DAY	YEAR		
Mailing Address PO BOX 131			10	23	2018	\$	361.13
City WIND GAP	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	18091	SIGNS				
To Whom Paid USPS			МО	DAY	YEAR		
Mailing Address			10	24	2018	\$	7.83
City FACTORYVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	18419	POSTA				
To Whom Paid WYOMING WEEKLY GROUP			мо	DAY	YEAR		
Mailing Address PO BOX 3478			10	26	2018	\$	338.70
City SCANTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	18505	ADVER	TISING			
To Whom Paid SHEETZ	·		МО	DAY	YEAR		
Mailing Address 1109 NORTH	ERN BLVD		10	29	2018	\$	30.08
City CLARKS SUMMIT	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA		FUEL/S	SIGNS			
To Whom Paid SHEETZ		·	МО	DAY	YEAR		
Mailing Address 1109 NORTH	ERN BLVD		10	30	2018	\$	30.02
City CLARKS SUMMIT	State	Zip Code (Plus 4)	Descrir	tion of Exp	enditure	<u> </u>	
CLARRO SUMMI							

FUEL/SIGNS

PΑ

To Whom Paid DALTON LUMBER	МО	DAY	YEAR	
Mailing Address RT 6 & amp; 11	10	31	2018	\$ 10.06
City DALTON State Zip Code (Plus 4	Descrip SIGNS	otion of Exp	penditure	
To Whom Paid KEELEE	мо	DAY	YEAR	
Mailing Address 302 STATE ST.	10	31	2018	\$ 215.00
City WYALUSING State PA Zip Code (Plus 4	Descrip	otion of Exp	enditure	
To Whom Paid DALTON LUMBER	мо	DAY	YEAR	
Mailing Address RT 6 & amp; 11	10	31	2018	\$ 4.24
City DALTON State Zip Code (Plus 4) Descrip	tion of Exp	enditure	
PA	SIGNS			
To Whom Paid GULF OIL	SIGNS	DAY	YEAR	
To Whom Paid		DAY 1	YEAR 2018	\$ 30.62
To Whom Paid GULF OIL	MO 11	1 otion of Exp	2018	30.62
To Whom Paid GULF OIL Mailing Address RTS 118 & State Zip Code (Plus 4)	MO 11	1 otion of Exp	2018	30.62
To Whom Paid GULF OIL Mailing Address RTS 118 & DALLAS State PA To Whom Paid	MO 11 Description FUEL /	1 otion of Exp SIGNS	2018 penditure	30.62 28.87
To Whom Paid GULF OIL Mailing Address RTS 118 & DALLAS City DALLAS State PA To Whom Paid NICHOLSON FUEL Mailing Address	MO 11 Description FUEL / MO 11	DAY 2 potion of Exp	2018 penditure YEAR 2018	\$
To Whom Paid GULF OIL Mailing Address RTS 118 & State PA To Whom Paid NICHOLSON FUEL Mailing Address 377 MAIN ST City NICHOLSON State PA Zip Code (Plus 4 Zip Code (Plus 4	MO 11 Descrip FUEL / MO 11 Descrip	DAY 2 potion of Exp	2018 penditure YEAR 2018	\$
To Whom Paid GULF OIL Mailing Address RTS 118 & State PA To Whom Paid NICHOLSON FUEL Mailing Address 377 MAIN ST City NICHOLSON State PA Zip Code (Plus 4 PA Zip Code (Plus 4 PA Zip Code (Plus 4 PA	MO 11 Description MO 11 Description FUEL /	DAY 2 ption of Exp SIGNS	2018 Penditure YEAR 2018 Penditure	\$

						PAGE 1				
To Whom Paid DALTON LUMBER	мо	DAY	YEAR							
Mailing Address RT. 6 & amp; 11			5	2018	\$		119.12			
City DALTON State	DALION				Description of Expenditure SIGNS					
To Whom Paid EXXON MOBIL			DAY	YEAR						
Mailing Address 50 LACKAWANNA TRL.			5	2018	\$		30.06			
City FACTORYVILLE State PA			Description of Expenditure FUEL / SIGNS							
To Whom Paid DALTON LUMBER		МО	DAY	YEAR						
Mailing Address RT 6 & amp; 11			5	2006	\$		38.08			
City DALTON State	Zip Code (Plus 4)	Description of Expenditure SIGNS								
10		310113								
To Whom Paid EXXON MOBIL		MO	DAY	YEAR						
To Whom Paid			DAY 5	YEAR 2006	\$		30.00			
To Whom Paid EXXON MOBIL	Zip Code (Plus 4)	MO	5 otion of Exp	2006	\$		30.00			
To Whom Paid EXXON MOBIL Mailing Address 50 LACKAWANNA TRL. City FACTORYVILLE State	Zip Code (Plus 4)	MO 10 Descrip	5 otion of Exp	2006	\$		30.00			
To Whom Paid EXXON MOBIL Mailing Address 50 LACKAWANNA TRL. City FACTORYVILLE To Whom Paid	Zip Code (Plus 4)	MO 10 Descrip FUEL/S	5 Otion of Exp IGNS	2006 penditure	\$		30.00			
To Whom Paid EXXON MOBIL Mailing Address 50 LACKAWANNA TRL. City FACTORYVILLE State PA To Whom Paid VALLEY MART	Zip Code (Plus 4) Zip Code (Plus 4)	MO 10 Descrip FUEL/S MO 10	5 DAY Stion of Exp DAY 5	2006 Penditure YEAR 2006						
To Whom Paid EXXON MOBIL Mailing Address 50 LACKAWANNA TRL. City FACTORYVILLE State PA To Whom Paid VALLEY MART Mailing Address City DALLAS		MO 10 Descrip FUEL/S MO 10 Descrip	5 DAY Stion of Exp DAY 5	2006 Penditure YEAR 2006						
To Whom Paid EXXON MOBIL Mailing Address 50 LACKAWANNA TRL. City FACTORYVILLE State PA To Whom Paid VALLEY MART Mailing Address City DALLAS State PA		MO 10 Descrip FUEL/S MO 10 Descrip FUEL /	DAY 5 btion of Exp IGNS 5 btion of Exp SIGNS	2006 YEAR 2006 Denditure						

To Whom Paid EXXON MOBIL				DAY	YEAR					
Mailing Address 50 LACKAWANNA TRAIL			11	7	2018	\$	27.94			
City FACTORYVILLE	FACTORYVILLE State PA Zip Code (Plus 4)				Description of Expenditure FUEL / SIGNS					
To Whom Paid SUNOCO			МО	DAY	YEAR					
Mailing Address 2 LANE HILL RD.			11	8	2018	\$	30.14			
City TUNKHANNOCK State PA Zip Code (Plus 4)				Description of Expenditure FUEL / SIGNS						
To Whom Paid BENAZIL CO.			МО	DAY	YEAR					
Mailing Address 117 W. TIOGA ST.			11	8	2018	\$	35.06			
City TUNKHANNOCK	State PA	Zip Code (Plus 4)	Descrip	otion of Exp						
To Whom Paid CASH. PEOPLES BANK										
			мо	DAY	YEAR					
CASH. PEOPLES BANK	/EL POND RD.		MO	DAY 8	YEAR 2018	\$	100.00			
CASH. PEOPLES BANK	/EL POND RD. State PA	Zip Code (Plus 4) 18411	11 Descrip		2018		100.00			
CASH. PEOPLES BANK Mailing Address 494 N. GRAV	State		11 Descrip	8 otion of Exp	2018		100.00			
CASH. PEOPLES BANK Mailing Address 494 N. GRAV City CLARKS SUMMIT To Whom Paid	State		11 Descrip POLL W	8 Pation of Exp PATCHERS	2018 penditure		100.00			
CASH. PEOPLES BANK Mailing Address 494 N. GRAV City CLARKS SUMMIT To Whom Paid SIDELINES	State		Descript POLL W	8 VATCHERS	2018 penditure YEAR 2018 penditure	\$				
CASH. PEOPLES BANK Mailing Address 494 N. GRAV City CLARKS SUMMIT To Whom Paid SIDELINES Mailing Address	State PA State	18411	Descript POLL W	8 Varion of Exp VATCHERS DAY 13	2018 penditure YEAR 2018 penditure	\$				
CASH. PEOPLES BANK Mailing Address 494 N. GRAV City CLARKS SUMMIT To Whom Paid SIDELINES Mailing Address City FACTORYVILLE To Whom Paid	State PA State PA	18411	Descrip POLL W MO 11 Descrip ELECTI	DAY 13 btion of Exp ON NIGHT	2018 Penditure YEAR 2018 Penditure CAMPAIG	\$				

To Whom Paid NATION BUILDER			мо	DAY	YEAR	
Mailing Address 520 S. GRAND AVE			11	1	2018	\$ 174.00
City LOS ANGELES	State CA	Zip Code (Plus 4) 90071	Description of Expenditure			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.			•			\$ PAGE TOTAL 2,534.35
						_,5555
						2,5055

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period					
LOU JASIKOFF			From:	<u>10</u>	/23/2018	То:	1	1/26/2018
					DATE			Outstanding Balance of Debt
Name of Creditor WYOMING WEEKLY GROUP				мо	DAY	YEAR		
Mailing Address PO BOX 3478				10	31	2018	\$	338.70
City SCANTON	State PA	Zip Code (Pl 18505	us 4)	Descrip	otion of De	bt	•	
								PAGE TOTAL
Enter Grand Total of Unpaid	Debts on Page	1, Report Cover Pa	ige, Item	ı G.			\$	338.70