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 201	80212			Report Filed B		CANDI	DATE	СОМ	MITTEE	\checkmark	LOBE	BYIST	
Name of Filing C	Committee, Candi	idate or Lo	bbyist:		KINNEY,	, REB	ECCA L F	RIENDS	5 OF					
Street Address:	6244 SR 84	8												
City:	NEW MILFO	RD					State:	PA		Zip Co	de: 18	834-2	313	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-		30 DA PRIMA		POST-	3.	AMENDN REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE		30 DA		POST- 6.		TERMINATION REPORT?		Yes	✓ No	
report type)	ANNUAL REPOR	T 7. X	Year 2018				NG METHO CHECK O			PAPER		\checkmark	DISKE	TTE
Name of Office S	L Sought by Candid	late:					DATE O	F ELEC	District Number		Par	ty Code	County Code	
							мо	DAY	YEAR	111	STH	DEN	1	58
REPRESENTATI	VE IN THE GENE	ERAL ASSE	MBLY				11		5 2018	 	(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of	Receipts and	мо	DAY	YEAR	1		мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	from:	1	1 27	20	018 T	0	12	3	1 2018					
A. Amount Bro	ught Forward Fre	om Last Re	eport			\$			36.46					
B. Total Monet	ary Contributions	s And Rece	ipts (From	n Sche	dule I)	\$			0.00					
C. Total Funds	Available (Sum (Of Lines A	and B)			\$			36.46					
D. Total Expen	ditures (From Sc	hedule III)			\$			36.46					
E. Ending Cash	Balance (Subtra	ict Line D I	rom Line	C)		\$			0.00					
F. Value Of In-	Kind Contributio	ns Receive	d (From S	chedu	le II)	\$			0.00					
G. Unpaid Deb	s And Obligation	ns (From S	chedule IV	')		\$			0.00					
				AFF	IDAVI	ΓSE	CTION							
PART I - If this is	s a Committee re	port, treas	surer sign	here. 1	If this is	a Car	ndidate re	eport, ca	ndidate si	gn here.				
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	attached sc	hedules	s filed on	paper	or by elect	ronic me	dium, are to	the best o	of my know	vledge	and beli	ef , true
Sworn to and subs	cribed before me th day of	nis	20						Signatur	e of Perso	on Submitt	ing Rep	ort	
						-				Prir	nted Name			
My Commission Ex	Signat cpires	ure								Ema	ail			
	мо	DA	Y	YR		-		Area	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a ca	ndidate's a	uthorized	Comm	nittee, Ca	andid	ate shall	sign hei	re.					
I swear (or affirm) No 320) as amende	that to the best of	f my knowle	dge and beli	ef this	political	comm	ittee has n	ot violate	ed any provis	ions of th	e act of Ju	ine 3,19	937 (P.L	. 1333,
Sworn to and subso		is							S	ignature	of Candida	ite		
	day of		20			-				Print	ed Name			
	Signature	9				-								
My Commission Exp	-	-								Ema	ail			
	мо	DA	Y	YR				Area C	ode	D	aytime Te	elephon	e Numb	er

SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
KINNEY, REBECCA L FRIENDS OF	<u>11/27/201</u>	<u>8</u> To:	<u>12/31/2018</u>	
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			-	
TOTAL for the Reporting	g 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	g 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	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	g 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 Pa			\$	0.00

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						
			From:	i cirioù	То				
			From:		10	•			
				DATE			AMOUNT		
Full Name of Contributing) Committee		мо	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)							
						Г	PAGE TOTAL		
Enter Grand Total of Pa	art A on Schedule I, Detail	ed Summary Page, Sec	tion 2.			\$	0.00		

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

\$

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 Fror	orting P	eriod	Τα):	
					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 Schedule I, Detailed Summary Page, Section 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 Commit	ttee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
						ſ		PAGE TOTAL	
Enter Grand Total of Part C on	Schedule I, Detail	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		АМС	DUNT
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 Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
	-						\$	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 C	Name of Filing Committee or Candidate Re			Reporting Period					
			From:			То:			
			I	D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description	I				1				
Enter Grand Total of Part E o	- Schadula I. Datailac	l Summary Page	Section	4				PAGE TOT	AL
	i Schedule 1, Detailet	summary raye,	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 Perio	d	
KINNEY, REBECCA L FRIENDS OF	From:	<u>11/27/2018</u> то:	<u>12/31/2018</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 PART	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					
	From:			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 Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						, 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						
F					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State	Zip Code(Plus 4)								
Employer of Contributor			•			Occupation				
Employer Mailing Address/Principal Place of Business City State			State		Zip 4)	Code(Plus	Descri	ption o	f Contribution	

	i
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 Candidate			Reporting Period				
KINNEY, REBECCA L FRIENDS OF			From	From <u>11/27/2018</u> To:			<u>12/31/2018</u>
			DATE				AMOUNT
To Whom Paid Susquehanna County Democrats			мо	DAY	YEAR		
Mailing Address 948 Main St.			12	14	2018	\$	36.46
City New Milford	State PA	Zip Code (Plus 4) 18834	Description of Expenditure contribution				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	36.46