Campaign Finance Report

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

Filer Identification 20130261 Number :							port ed B		CAND	IDATE		СОМ	4ITTEE	✓	LOBE	BYIST			
Name of Filing C	ommittee	e, Candida	ate or Lo	obbyist:		SCC	TTC	NAGN	IER FOR	SENA	TE								
Street Address:																			
City:	MANC	CHESTER				State:				PA	PA			Zip Code: 17345					
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3.			AMENDMENT Yes No REPORT?					
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRIDA ELECTION	Y PRE	<u>-</u>	5.	30 DA		POST-				ATION	Yes	No			
report type)	ANNUAL	REPORT	7. X	Year 2018					IG METH CHECK (PAPER / D			DISKE	ΓΤΕ		
Name of Office S	ought by	Candidat	e:						DATE	OF EL	ECTI	ON	District Number	Office Code	Par	ty Code	County Code		
									МО	DAY	,	YEAR	Ivamber	couc	REP		Couc		
									1	L	6	2018		(SEE IN	STRUCTIO	ONS FOR C	ODES)		
Summary of		and	МО	DAY	YEAR	ł			МО	DAY	,	YEAR	FO	R OFFI	CE USE	ONLY			
Expenditures	trom:		1	.1 27	2	018	T	0	1	2	31	2018							
A. Amount Bro	ught Forw	vard From	ı Last R	eport				\$	-		3	3,577.52							
B. Total Moneta	ary Contri	ibutions A	and Rec	eipts (Fron	1 Sche	dule	e I)	\$			1	,000.00							
C. Total Funds Available (Sum Of Lines A and B) \$ 4,577.52																			
D. Total Expenditures (From Schedule III) \$ 6,032.07																			
E. Ending Cash Balance (Subtract Line D From Line C) \$ (1,454.55)																			
F. Value Of In-	Kind Cont	ributions	Receive	ed (From S	chedu	le II	I)	\$				0.00							
G. Unpaid Debt	s And Ob	ligations	(From S	chedule IV	')			\$			319	,000.00			1				
					AFF	IDA	AVI	ΓSE	CTION										
PART I - If this is	a Comm	ittee repo	ort, trea	surer sign	here.	If th	nis is	a Can	ididate i	eport,	can	didate sig	jn here.						
I swear (or affirm) correct and comple		eport, inclu	uding the	attached sc	hedule	s file	d on p	paper (or by elec	tronic ı	nediu	ım, are to t	the best o	f my kno	wledge a	and belie	ef , true		
Sworn to and subs	cribed befo	ore me this		20								Signature	of Perso	n Submit	ting Rep	ort			
		Signatur	·e	-				• •					Prin	ted Name	e				
My Commission Ex	pires	-											Ema	il					
		мо	DA	lΥ	YR					Α	rea C	ode	Daytim	e Teleph	none Nu	mber			
Part II- If this is	a report	of a cand	idate's	authorized	Comn	nitte	ee, Ca	andida	ate shal	sign l	nere.								
I swear (or affirm) No 320) as amende		e best of m	y knowle	dge and beli	ef this	poli	itical	commi	ittee has	not viol	ated	any provis	ions of the	e act of J	une 3,19	937 (P.L.	1333,		
Sworn to and subsc	ribed befor day of	e me this		20								S	ignature o	of Candid	ate				
								-					Printe	d Name					
My Commission Exp		Signature						-					Ema	il					
,	_																		
		МО	DA	ΛY	YR	ł				Are	a Cod	e	Da	aytime T	elephon	e Numbe	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
SCOTT WAGNER FOR SENATE	From:	11/27/201	<u>8</u> To:	12/31/2018
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)			\$	1,000.00
All Other Contributions (Part D)			\$	0.00
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 Pa			\$	1,000.00

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 Candidat	Filing Committee or Candidate				Reporting Period		
		F	rom:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			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 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.

Name of Filing Com	nittee or Candidate		Reporting	Period			
			From:		Т	o:	
		<u> </u>		DATE			AMOUNT
Full Name of Contribu	tor		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
	I						PAGE TOTAL

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 P	Period		
SCOTT WAGNER FOR SENATE	From:	11/27/2018	То:	<u>12/31/2018</u>

DATE AMOUNT

Full N	ame of Contributing Committee	мо	DAY	YEAR			
ALTR1	ALTRIA PAC				DA!	ILAK	\$ 1,000.00
Mailin	Mailing Address				2	2018	_,,
City	WASHINGTON	State	Zip Code (Plus 4)	1		2010	
		DC	20001				

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL \$ 1,000.00

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			Rep	orting Pe	riod			
			Fron	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE 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 Candidate		Report	ing Peri	od			
			From:			To:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'						<u> </u>	
	- C		. .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	Section	4.			\$	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 Peri	od	
SCOTT WAGNER FOR SENATE	From:	<u>11/27/2018</u> To:	12/31/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period							
			From:			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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		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:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	Stat	e Zip	Code(Plus 4)	Desci	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting I	Period		
SCOTT WAGNER FOR SENATE	From	11/27/2018	То:	12/31/2018

					DATE			AMOUNT				
To Whom Paid					DAY	YEAR						
REFORM	1 PA PAC			МО								
Mailing Address					4	2018	\$	5,000.00				
CityMANCHESTERStateZip Code (Plus 4)PA17345					Description of Expenditure							
					DONATION							
To Whor	m Paid	мо	DAY	YEAR								
M&T BANK					JA.	ILAK						
Mailing Address					9	2018	\$	5.00				
City	MANCHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
		PA	17345	SERVICE CHARGE								
To Whor	m Paid			МО	DAY	YEAR						
M&	;T BANK			M		ILAK						
Mailing	Address			2	8	2018	\$	5.00				
City	MANCHESTER	State	Zip Code (Plus 4)	Description of Expenditure								
		PA	17345	SERVICE CHARGE								
To Whor	m Paid			МО	DAY	YEAR						
M&	;T BANK			MO	DAT	TEAR						
Mailing A	Address			3	8	2018	\$	5.00				
City	MANCHESTER	State	Zip Code (Plus 4)	Description of Expenditure								
		PA	17345	SERVICE CHARGE								
To Whor	m Paid			МО	DAY	YEAR						
M&	;T BANK			MO	DAT	TEAR						
Mailing A	Address			4	8	2018	\$	5.00				
City	MANCHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
PA 17345					SERVICE CHARGE							
To Whom Paid					DAY	YEAR						
M&T BANK					DAT	TEAR						
Mailing Address					8	2018	\$	5.00				
City	MANCHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
PA 17345				SERVICE CHARGE								
		-										

								PAGE	12		
To Whom Paid					DAY	YEAR					
M&T BANK				МО		l Z/III					
Mailing Address				6	8	2018	\$		5.00		
City MANCHESTER State Zip Code (Plus 4)					Description of Expenditure						
PA 17345					SERVICE CHARGE						
To Whom Paid					DAY	YEAR					
AMAZON					DAT	TEAK					
Mailing Address				6	25	2018	\$		17.60		
City SEATTLE State Zip Code (Plus 4)				Description of Expenditure							
WA 98108				OFFICE SUPPLIES							
To Wh	om Paid				DAY	YEAR					
M&am	p;T BANK			МО	DAY	YEAR					
Mailin	g Address			7	10	2018	\$		5.00		
City	MANCHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		PA	17345	SERVIC	E CHARGE						
To Wh	om Paid			мо	DAY	YEAR					
M&am	p;T BANK			MO	DAT	TEAR					
Mailin	g Address			8	8	2018	\$		5.00		
City	City MANCHESTER State Zip Code (Plus 4)				Description of Expenditure						
		PA	17345	SERVIC	E CHARGE						
To Wh	om Paid			мо	DAY	YEAR					
ноот	SUITE			140		ILAK					
Mailin	g Address			8	20	2018	\$		127.07		
City		State	Zip Code (Plus 4)	Description of Expenditure							
				SOCIAL PLATFORM							
To Wh	om Paid			мо	DAY	YEAR					
MICRO	DSOFT			140		TEAK					
Mailin	g Address			8	20	2018	\$		105.99		
City	REDMOND	State	Zip Code (Plus 4)	Descrip	Description of Expenditure						
		WA	98052	LICENS	E						
To Wh	om Paid			мо	DAY	YEAR			_		
M&T BANK						LAIN					
Mailing Address					11	2018	\$		5.00		
City MANCHESTER State Zip Code (Plus 4)					Description of Expenditure						
PA 17345				SERVIC	E CHARGE						
To Whom Paid				мо	DAY	YEAR					
M&T BANK						ILAK					
Mailing Address					9	2018	\$		5.00		
City	MANCHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
				SERVIC	SERVICE CHARGE						

To Whom Paid					DAY	YEAR			
SCOTT WAGNER FOR GOVERNOR				МО	DAI	ILAK			
Mailing Address					31	2018	\$	731.41	
City MANCHESTER State Zip Code (Plus 4)				Description of Expenditure					
PA 17345				DONATION					
								DACE TOTAL	
								PAGE TOTAL	
Enter	Grand Total of Expenditures	on Page 1, Report C	Cover Page, Item D	•			\$	6,032.07	
Enter	Grand Total of Expenditures	on Page 1, Report C	Cover Page, Item D				\$		
Enter	Grand Total of Expenditures	on Page 1, Report C	Cover Page, Item D				\$		
Enter	Grand Total of Expenditures	on Page 1, Report C	over Page, Item D				\$		

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				ting Period					
SCOTT WAGNER FOR SENATE	From:	om: <u>11/27/2018</u> To:			12/31/2018				
					DATE			Outstar Balance	nding e of Debt
Name of Creditor		мо	DAY	YEAR					
SCOTT WAGNER		140		LAK					
Mailing Address						\$	319,000.00		
City YORK	State	Zip Code (I	Plus 4)	Description of Debt					
	PA	17405		LOAN AMOUNT BROUGHT FORWARD FROM L REPORT					D FROM LAST
								P	AGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Pag				ı G.			\$		319,000.00