### **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 2017	70083				port ed B		CANDI	CANDIDATE COMMITTEE \( \square \) LOBBYIST							
Name of Filing C	Committee, Candid	late or L	obbyist:		FRIE	END	S OF (	CRAIG S	TEDMA	۸N			_			
Street Address:	171 RIDGEW	AY AVE														
City:	EPHRATA							State:	PA			Zip Cod	de: 17	7522		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. <b>X</b>	2ND FRIDAY P PRIMARY	RE-	. [2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- [	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	<b>~</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2019					IG METHO				PAPER		$\checkmark$	DISKE	ГТЕ
Name of Office S	Sought by Candida	ite:	•					DATE 0	F ELE	CTIO	N	District Number	Office Code	Part	ty Code	County Code
	,							МО	DAY	YE	AR	ivanibei	code	REP		Couc
								11		5	2019		(SEE IN	STRUCTIO	NS FOR C	ODES)
Summary of Expenditures	Receipts and	МО	DAY YE	AR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
			1 1	20	)19	Т	0	4	-	1	2019					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			1,4	156.89					
B. Total Moneta	ary Contributions	And Rec	eipts (From So	hec	dule	e I)	\$				0.00					
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			1,4	156.89					
D. Total Expend	ditures (From Sch	edule II	I)				\$			1,2	95.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			1	61.89					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	dul	e II	[)	\$				0.00					
G. Unpaid Debt	ts And Obligations	(From	Schedule IV)				\$				0.00			1		
			А	FF:	IDA	٩VI	T SE	CTION								
	s a Committee rep		_													
I swear (or affirm) correct and complete	) that this report, inc ete.	luding the	e attached sched	ules	filed	d on	paper o	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge a	nd belie	f , true
Sworn to and subs	cribed before me thi day of	s	20							s	ignature	of Perso	n Submit	ting Rep	ort	
	- Ciarrate						<b>-</b>					Prin	ted Name	e		
My Commission Ex	Signatı opires	ire										Ema	il			—
	мо	D	AY	YR			_		Are	ea Cod	e	Daytim	e Teleph	none Nur	nber	
Part II- If this is	a report of a can	didate's	authorized Co	mm	itte	e, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowl	edge and belief t	this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate		
	day of 						_					D	d Nac			
	Signature						-					Printe	d Name			
My Commission Exp	_											Ema	il			
	МО	D	AY	YR			-		Area	Code		Da	aytime T	elephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF CRAIG STEDMAN	From:	1/1/201	<u>9</u> To:	4/1/2019
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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	J 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	J 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

	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 o	r Candidate		Rep Fro	oorting P	eriod	To	o:	
			l		DATE			AMOUNT
Full Name of Contributor				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 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		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	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.)

			orting Pe	ilou			
		Fron	n:		То	:	
			D/	ATE		АМ	OUNT
			МО	DAY	YEAR		
						\$	0.00
State	Zip Code (Plus	s <b>4</b> )					
			Occupat	tion			
e of	City			State		Zip Code	(Plus 4)
dule I, Detailed Su	ımmary Page,	Section	on 3.				<b>GE TOTAL</b> 0.00
	e of	e of City	State Zip Code (Plus 4)	State Zip Code (Plus 4) Occupat	State Zip Code (Plus 4)  Occupation  Other State	State Zip Code (Plus 4)  Occupation  Occupation  Other State  Occupation  Output  Outp	DATE AM  MO DAY YEAR  \$ State Zip Code (Plus 4)  Occupation  City State Zip Code

## 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		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•		•	•	
Enter Grand Total of Part E o	on Schedule I. Detailed	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 1, Betanet	. Jammar y r uge,	500.011				\$	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 Period							
FRIENDS OF CRAIG STEDMAN	From:	<u>1/1/2019</u> <b>To:</b>	4/1/2019					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR							
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candidat	:e		Reporting	g Period			
			From:			То:	
				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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candida	te				Re	porting	Period				
					Fro	m:		То	:		
					<u> </u>		DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State		Zip Code(F	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 0	Candidate		Reporti	ng Period			
FRIENDS OF CRAIG STEDMAI	N		From	<u>1/:</u>	1/2019	То:	<u>4/1/2019</u>
				DATE			AMOUNT
To Whom Paid MANHEIM TWP REPUBLICAN (	COMMITTEE C/O JEREM	Y KIEHL	мо	DAY	YEAR		
Mailing Address 2585 LITIT	ΓΖ PIKE		1	14	2019	\$	250.00
City LANCASTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u>'</u>	
	PA	17601	DINNE				
To Whom Paid WARWICK AREA REPUBLICAN	I COMMITTEE C/O STEP	HANIE HILL	МО	DAY	YEAR		
Mailing Address 6 SHERI L	ANE		1	14	2019	\$	250.00
City LITITZ	State PA	<b>Zip Code (Plus 4)</b> 17543	<b>Descrip</b> DINNER				
To Whom Paid ELIZABETHTOWN AREA REPU	BLICAN COMMITTEE C/0	O JOANN MURPHY	МО	DAY	YEAR		
Mailing Address 2 E. HIGH	ST		2	4	2019	\$	175.00
City MAYTOWN	<b>State</b> PA	Zip Code (Plus 4)		otion of Exp JRSEMENT			₹
To Whom Paid LANCASTER YOUNG REPUBLIC	CANS		МО	DAY	YEAR		
Mailing Address 902 COLUI	MBIA AVE		2	4	2019	\$	250.00
City LANCASTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	·	
	PA	17603	DONAT	-			
To Whom Paid SOLANCO REPUBLICAN COMM	IITTEE C/O AMY BROW!	N	мо	DAY	YEAR		
Mailing Address PO BOX 31	1		2	4	2019	\$	120.00
City QUARRYVILLE	State	Zip Code (Plus 4)	Descrip	otion of Exp	enditure	)	

17566

PΑ

TICKET - AD.

							FAGL 12
<b>Fo Whom Paid</b> REPUBLICAN COMMITTEE OF I	ANCASTER COUNTY		мо	DAY	YEAR		
Mailing Address 902 COLUN	1BIA AVE					\$	250.00
City LANCASTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17603	Description of Expenditure ENDORSEMENT TABLE			•	
Enter Grand Total of Expen	ditures on Page 1, Re	port Cover Page, Item D	-			\$	<b>PAGE TOTAL</b> 1,295.00