#### **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 2018	0207			Repor Filed		CA	NDI	DATE		COM	AITTEE	<b>Y</b>	LUBI	31131		
Name of Filing C	ommittee, Candid	ate or L	obbyist:		FRIEND	OS OF	BALT	AZA	R RUB	[0	•		•				
Street Address:	1400 N. PROV	'IDENCE	AVENUE,I	BUILD	ING 2,	SUITE	104	0									
City:	MEDIA						State	e:	PA			<b>Zip Code:</b> 19063					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA		F	POST-	3.		AMENDN REPORT		Yes	No	<b>\</b>	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.		30 DAY POST- 6. ELECTION					TERMINA REPORT		Yes	No		
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2018				NG ME					PAPER		$\checkmark$	DISKE	TTE	
Name of Office S	ought by Candida	te:					DAT	ΈO	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code	
REPRESENTATI			МО		DAY	YE	AR	166	STH	REP		23					
KEI KEGENTIKI				11		6	2018		(SEE IN	STRUCTI	ONS FOR	CODES)					
	Receipts and	МО	DAY	YEAR			МО		DAY	YI	EAR	FC	OR OFFI	CE USE	ONLY		
Expenditures	from:		11 27	20	018 <b>7</b>	ГО		12	3	1	2018						
A. Amount Bro	ught Forward Fron	ı Last R	eport			\$				2,4	179.50						
B. Total Moneta	ary Contributions A	And Rec	eipts (Fron	1 Sche	dule I)	\$					0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)			\$				2,4	179.50						
D. Total Expend	ditures (From Sch	edule II	I)			\$				2,4	79.50						
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$					0.00						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	le II)	\$				1,3	60.80						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	<b>'</b> )		\$	1				0.00			•			
					IDAV!												
I swear (or affirm)	that this report, incl	•	_								_		of my kno	wledge	and beli	ef , true	
correct and comple	cribed before me this										·:	-f D	- Cb	.: D			
	day of					_				3	oignature	or Perso	n Submit	ting Kep	ort		
	Signatu	re				_						Prin	ted Name	9			
My Commission Ex	pires					_						Ema	il				
	МО	D	AY	YR					Are	a Coc	le	Daytin	ne Teleph	one Nu	mber		
	a report of a cand				•				_								
No 320) as amende		iy knowle	edge and beli	ef this	political	comm	iittee r	nas n	ot violat	ed an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,	
Sworn to and subsc	ribed before me this day of		20								S	ignature	of Candid	ate	_		
		_						Printe	ed Name								
My Commission Exp	Signature ires											Ema	nil			—	
	мо	D	AY	YR		_			Area (	Code		D	aytime T	elephon	e Numb	er	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF BALTAZAR RUBIO	From:	11/27/20	<u>18</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)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	Period	(4)	\$	0.00
			Т	
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			\$	0.00

#### **PART A**

#### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

**PAGE TOTAL \$**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 Candidate				Reporting Period					
F			From: To				Го:		
					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	ame of Filing Committee or Candidate			Period			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.)

me of Filing Committee or Candidate				Reporting Period					
				n:		To	То:		
				D.	ATE		A	MOUNT	
				мо	DAY	YEAR			
Mailing Address  City State Zip Code (Plus 4)							\$	0.00	
State	Zi	p Code (Plus	s <b>4</b> )						
·	·			Occupa	tion				
al Place of		City			State		Zip Cod	le (Plus 4)	
Schedule I, Detai	iled Sumr	mary Page,	Section	on 3.				PAGE TOTAL 0.00	
	al Place of	al Place of	al Place of City	State Zip Code (Plus 4)  al Place of City	State Zip Code (Plus 4) Occupa	State Zip Code (Plus 4)  Occupation  Oliver State	State Zip Code (Plus 4)  Occupation  Olympia Place of City State  Schedule I, Detailed Summary Page, Section 3.	State Zip Code (Plus 4)  Occupation  Olivy  State Zip Code  Occupation  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	. Jammary rage,	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 Pe	riod	
FRIENDS OF BALTAZAR RUBIO	From:	11/27/2018 <b>To</b> :	12/31/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	OR .	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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)	\$	1,360.80
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,		\$	1,360.80

## 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:			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 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	Reporting Period							
FRIENDS OF BALTAZAR RUBIO	From:	11/27/2018 <b>To</b> :	12/31/2018					

						DATE			AMOUNT
Full Name of Contributor SPRINGFIELD REPUBLICAN PARTY					МО	DAY	YEAR		
Mailing Address 1400 N. PROVIDENCE ROAD BUILDING 2, SUITE 1040				1040				\$	1,360.80
City MEDIA State Zip Code(Plus 4)			Plus 4)	12	12	2018			
PA 19063									
Employer of Contributor SPRING	FIELD REPUBL	ICAN PA	RTY		Occupation				
Employer Mailing Address/Principal Business	Place of	City		State	Zip 4)	Code(Plus	Descri	ption of	Contribution
1400 N. PROVIDENCE ROAD BUILDING 2, SUITE MEDIA PA			PA	19063 CAMPAIGN TEXTING COS			EXTING COSTS		
Enter Grand Total of Part G on Schedule II In-Kind Contributions D				ons Deta	iled				PAGE TOTAL
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Det Summary Page, Section 3.				ons Deta					1,360.80

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candi	date		Reporti	ng Period						
FRIENDS OF BALTAZAR RUBIO			From	11/2	12/31/2018					
					DATE					
To Whom Paid BARSZ GOWIE AMON & Samp; FULTZ LLC				DAY	YEAR					
Mailing Address 1400 N. PROVIDENCE ROAD BUILDING 2, SUITE 1040			11	27	2018	\$	1,239.75			
City MEDIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19063		otion of Exp						
To Whom Paid LICETTE ALMONTE			МО	DAY	YEAR					
Mailing Address 501 E. MANOA ROAD			11	27	2018	\$	1,239.75			
City HAVERTOWN State Zip Code (Plus 4) PA 19083			1	otion of Exp						

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

**PAGE TOTAL** 

2,479.50

### 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							
FRIENDS OF BALTAZAR RUBIO			From:	<u>11</u>	./27/2018	То:		<u>12/3</u>	1/2018
					DATE				standing ince of Debt
Name of Creditor BALTAZAR RUBIO				МО	DAY	YEAR			
Mailing Address 501 E. MANOA ROAD			4	19	2018	3 ,	\$	500.00	
City HAVERTOWN	<b>State</b> PA	<b>Zip Code (Pl</b> o	Description of Debt LOAN						
		•		•					
					DATE				standing ince of Debt
Name of Creditor LICETTE ALMONTE				МО	DATE	YEAR			
	AD			<b>MO</b> 4		<b>YEAR</b> 2018			
LICETTE ALMONTE	AD State PA	Zip Code (Plu 19083	us 4)	4	DAY	2018		Bala	nce of Debt
Mailing Address 501 E. MANOA ROA	State	· ` `	us 4)	4 Descrip	<b>DAY</b> 20	2018		Bala \$	nce of Debt