Campaign Finance Report

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

Filer Identification 2023C0210 Number :						eport		CANDIDATE / COI			DMMITTEE LOBBYIST						
Name of Filing C	ommittee, Ca	ndidate or	Lobbyist	t:	MIC	CHAE	L A. S	STENDE	R, JR.								
Street Address:																	
City:								State:				Zip Code	: 17	801			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FR	RIDAY PRE ARY	-	2.	30 DA PRIMA		POST- 3.			AMENDME REPORT?	NT	Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION		2ND FR ELECTI	RIDAY PRE ION	Ε-	5.	30 DA		POST-	6.		TERMINAT REPORT?	ION	Yes	No	•	/
report type)	ANNUAL REP	ORT 7.	Year 2					IG METH CHECK C		PAPER		\	DISKE	TTE			
Name of Office S	ought by Can	didate:						DATE (OF ELE	CTION		District Number	Office Code	Par	ty Code	Coun	
								мо	DAY	YEAI	2	108	STH	REP	,	•	
REPRESENTATIVE IN THE GENERAL ASSEMBLY								5	5	16 2	2023		(SEE INS	ISTRUCTIONS FOR CODES)		,	
Summary of		d MO	DAY	Y YEAR	ł			МО	DAY	YEAI	R	FOR	OFFIC	E USE	ONLY		
Expenditures	from:		12	7 2	023	3 T	0	Ē	5	1 2	2023						
A. Amount Bro	ught Forward	From Last	Report				\$			(0.00						
B. Total Moneta	ary Contributi	ons And R	eceipts (F	From Sche	dule	e I)	\$			(0.00						
C. Total Funds	Available (Su	m Of Lines	A and B))			\$			(0.00						
D. Total Expend	ditures (From	Schedule	III)				\$			(0.00						
E. Ending Cash	Balance (Sub	tract Line	D From L	ine C)			\$			C	0.00						
F. Value Of In-	Kind Contribu	tions Rece	ived (Fro	m Schedu	le I	I)	\$			C	0.00						
G. Unpaid Debt	s And Obligat	ions (Fron	n Schedul	le IV)			\$			(0.00		,				
				AFF	·ID/	AVI	T SE	CTION									
PART I - If this is	a Committee	report, tr	easurer s	sign here.	If th	his is	a Can	ndidate r	eport, o	candida	te siç	ın here.					
I swear (or affirm) correct and comple		:, including t	the attache	ed schedule	s file	ed on	paper (or by elec	tronic m	edium, aı	re to t	the best of i	my know	vledge	and belie	ef , tru	ıe
Sworn to and subs	cribed before m day of	e this	20							Sigr	nature	e of Person	Submitt	ing Rep	ort		-
	- <u> </u>	nature				_	<u>-</u> -					Printe	d Name				-
My Commission Ex	-	nature										Email					- [
	мо		DAY	YR					Ar	ea Code		Daytime	Telepho	one Nu	mber		
Part II- If this is	a report of a	candidate	's author	ized Comr	nitte	ee, C	andid	ate shall	sign h	ere.							百
I swear (or affirm) No 320) as amende		t of my kno	wledge and	d belief this	s poli	itical	commi	ittee has i	not viola	ted any p	rovis	ions of the	act of Ju	ıne 3,1	937 (P.L.	1333	3,
Sworn to and subsc		this									S	ignature of	Candida	ite			-
	day of 		20				_					Printed	Name				-
	Signa						_					riiiteu	Name				_
My Commission Exp	_											Email					
	МС	,	DAY	YR			-		Area	Code		Day	time Te	elephor	e Numbe	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
MICHAEL A. STENDER, JR.	From:	<u>12/7/202</u>	<u>3</u> To:	<u>5/1/2023</u>
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
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:		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

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)

(Exclude cont		r ponticui conni		.03 .01	Joi tea	in i di c	~,			
Name of Filing Committee or Candidate Reporting Period										
			Fro	m:		To):			
					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.

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	\$		0.00
Mailing Address							7		0.00
City	State	Zip Cod	e (Plus 4)						
							-	PAGE TO	TAL
Enter Grand Total of Part C on Scheo	lule 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 or Candidate				Rep	orting Pe	riod				
					n:					
					D	ATE		AMOUNT		
Full Name of Contributor					мо	DAY	YEAR	\$	0.00	
Mailing Address								7		
City	State	Zi	p Code (Plus	s 4)						
Employer Name	•				Occupa	tion	-	-		
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)	
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary 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 of	or Candidate		Report	ing Peri	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)				
Receipt Description	•	•					
Enter Grand Total of Part I	on Schodulo I. Dotailed	Summary Dage	Soction	4			PAGE TOTAL
cincer Granu Total of Part I	on Schedule 1, Detailed	Summary Page,	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	
MICHAEL A. STENDER, JR.	From:	<u>12/7/2023</u> To:	<u>5/1/2023</u>
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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Re				Reporting Period				
F						То:		
				DATE			AMOUNT	
Full Name of Contributor				DAY	YEAR			
Mailing Address						7 \$	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•	•			
Enter Grand Total of Part F on	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL	
Section 2.						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate			Re	porting	g Period					
					om:		To:	То:		
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$	0.00	
City	State		Zip Code(Plus 4)							
Employer of Contributor	•		•		Occu	pation				
Employer Mailing Address/Principal Pla	ice of Business	Cit	ty	Stat	e Zi	ip Code(Plus 4)	Descri	iptio	n of Contribution	
Enter Grand Total of Part G on Sci	nedule II, In-K	ind	Contributions D	etaile	ed				PAGE TOTAL	
Summary Page, Section 3.	,								0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period					
1						То:			
				DATE			AMOUNT		
To Whom Paid				DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
Enter Grand Total of Expenditures	on Dago 1 Bonort C	Cover Page Item F					PAGE TOTAL		
Lines Grand Total of Expenditures (ni rage 1, keport c	Lovei Fage, Itelli L	, .			\$	0.00		