### **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	20230	0210			Rep File			CAND	IDATE	1	/ C	OMMITTEE		LOB	BYIST		
Name of Filing C	ommittee, C	andida	te or Lo	obbyist:		MICI	HAE	LA.S	STENDE	R, JR.								
Street Address:																		
City:	_								State:				Zip Cod	e: 17	801			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRIDA PRIMARY	Y PRE-	- 2	2.	30 DA		POST-	3.		AMENDMENT REPORT?		Yes	N	0	<b>√</b>
(place X to the right of	6TH TUESDAY PRE-ELECTIO		4.	ELECTION				30 DA		POST-	6.		TERMINAT REPORT?	ΓΙΟΝ	Yes	N	0	<b>\</b>
report type)	ANNUAL REI	PORT	7.	Year 2023 FILING M ( ) CHEC								PAPER		<b>\</b>	DISK	ETTE		
Name of Office S	- Sought by Car	ndidate	e:						DATE	OF EL	ECT	ION	District Number	Office Code	Pai	ty Cod	Code	
REPRESENTATI	VE IN THE G	SENER/	AL ASSI	FMBI Y					МО	DAY		YEAR	108	STH	REF	)		
					_					5	16	2023		(SEE IN	STRUCTI	ONS FOR	CODES	)
Summary of Expenditures		nd	МО	DAY	YEAR		_	_	МО	DAY		YEAR	FOI	OFFIC	E USE	ONLY	,	
				5 2	2	023		<u>о</u>		5	26	2023	<u> </u>					
A. Amount Bro	ught Forward	d From	Last R	eport				\$				0.00	4					
B. Total Moneta	ary Contribut	tions A	nd Rec	eipts (Fron	n Sche	dule	I)	\$				0.00	4					
C. Total Funds	Available (Su	um Of I	Lines A	and B)				\$				0.00						
D. Total Expend	ditures (Fron	n Sche	dule III	[)				\$				697.21	_					
E. Ending Cash	Balance (Su	btract	Line D	From Line	C)			\$				(697.21)	-					
F. Value Of In-						le II	)	\$				0.00	-					
G. Unpaid Debt	s And Obliga	ations (	From S	chedule I\	/)			\$				0.00						
					AFF	IDA	VI	T SE	CTION									
PART I - If this is		=	•	_									_			1	e a.	
I swear (or affirm) correct and comple		ort, inciu	aing the	attached sc	nedules	s riiea	on	paper	or by elec	tronic i	neai	um, are to	tne best or	ту кпоч	vieage	and be	iler , tr	ue
Sworn to and subs	cribed before r day of	me this		20								Signatur	e of Person	Submitt	ing Re	oort		
	Si	ignature	e					-					Print	ed Name	1			
My Commission Ex	rpires							_					Email					
	мо		DA	ΛΥ	YR					Α	rea	Code	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a	a candi	date's	authorized	Comn	nitte	e, C	andid	ate shal	l sign l	here	) <b>.</b>						
I swear (or affirm) No 320) as amende		est of my	y knowle	dge and bel	ief this	politi	ical	comm	ittee has	not vio	lated	any provi	sions of the	act of Ju	ıne 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before m day of	e this		20								!	Signature of	Candida	ate			_
								-					Printed	Name				-
My Commission 5	_	ature						-					Email					_
My Commission Exp								_					4					_
	М	10	DA	ΛY	YR					Are	a Co	de	Da	ytime To	elephor	ne Num	ber	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
MICHAEL A. STENDER, JR.	From:	<u>5/2/202</u>	<u>3</u> To:	5/26/2023
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 ar 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 Ca	andidate		Reporting	Period			
		F	rom:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Comm	ittee		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

## 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						
			From: To			o:			
					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.

#### **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	\$	0.00
Mailing Address							7 *	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
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					
				Fron	n:		1	o:			
					D	ATE			АМО	UNT	
Full Name of Contributor					МО	DAY	YEAR	ł	\$		0.00
Mailing Address											
City	State	Zip	Code (Plus	4)							
Employer Name					Occupa	tion					
Employer Mailing Address/Principal Plac	e of Business		City		•	State		Ziı	p Code (	Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	umm	ary Page,	Section	on 3.				PAG	E TOTAL	
								\$		0.0	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:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	<b>'</b>						<u> </u>	
	- C		<b>.</b> .:	_				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 Period		
MICHAEL A. STENDER, JR.	From:	<u>5/2/2023</u> <b>To:</b>	<u>5/26/2023</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 Car	ndidate		Reporting Period					
			From:			To	:	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	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	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting			
MICHAEL A. STENDER, JR.	From	5/2/2023	То:	5/26/2023
		DATE		AMOUNT

				DATE			AMOUNT	
To Whom Paid			мо	DAY	YEAR			
DOLLAR TREE			М		ILAK			
Mailing Address			5	8	2023	\$	48.73	
City LEWISBURG	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	178377491	EVENT DECOR					
To Whom Paid  DOLLAR TREE			мо	DAY	YEAR			
Mailing Address				16	2023	\$	37.83	
City SHAMOKIN DAM State Zip Code (Plus 4				tion of Exp	enditure			
PA 178769520				DECOR				
To Whom Paid  AMERICUS HOSE COMPANY	, INC.		мо	DAY	YEAR			
Mailing Address			5	16	2023	\$	466.50	
City SUNBURY	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1		
	PA	17801	ROOM F	RENTAL/EV	ENT FOO	D &	BEVERAGE	
To Whom Paid			МО	DAY	YEAR			
NATIONAL PEN CO. LLC								
Mailing Address			5	4	2023	<b>\$</b>	144.15	
City DALLAS	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	TX	752847203	CAMPAI	GN PEN PL	JRCHASE			
							PAGE TOTAL	
Enter Grand Total of Expe	enditures on Page 1, Rep	port Cover Page, Item D	).			\$	697.21	