



RECEIPTS AND EXPENDITURES QUARTERLY REPORT

NEW JERSEY ELECTION LAW ENFORCEMENT COMMISSION

P.O. Box 185, Trenton, NJ 08625-0185
(609) 292-8700 or Toll Free Within NJ 1-888-313-ELEC (3532)
www.elec.nj.gov

FORM R-3
FOR STATE USE ONLY

ELEC RECEIVED
MAY 08 2019

PLEASE TYPE OR PRINT

Committee Name or Approved Acronym Lumberton Republican County Committee

Address (Number and Street) Check if different than previously reported P.O. Box 220

City, State, Zip Code Lumberton, N.J. 08048 ELEC Identification Number 10317000122Q 2018

Committee Type CPC PPC LLC Check if: Amendment First Report Filed Report Quarter Apr 15 Jul 15 Oct 15 Jan 15 Year 2018

Do not attempt to complete the "Depository Information" or the "Net Financial Summary" until the appropriate schedules have been completed.

DEPOSITORY INFORMATION		Column A	Column B
Period Covered	From	Through	Calendar
			Year-to-Date
1. Cash on Hand, January 1, <u>2018</u>	<u>10/1/2018</u>	<u>12/31/2018</u>	This Report
2. Cash on Hand, Beginning of Reporting Period			35,319.11
3. Monetary Receipts (+)			32,862.44
4. Subtotal			22,600.00
5. Monetary Expenditures (-)			55,462.44
6. Cash on Hand, Close of Reporting Period			5,590.88
			49,871.56

NET FINANCIAL SUMMARY

7. Cash on Hand, Close of Reporting Period		49,871.56
8. Debt owed to Committee (+)		0
9. Subtotal		49,871.56
10. Debt Owed by Committee (-)		0
11. Total (Net Worth)		49,871.56

TREASURER CERTIFICATION

I certify that the statements on this document are true, and that the contribution amounts received conform with the limitations designated by law. I am aware that if any of the statements are willfully false, I may be subject to punishment.

1/14/2019
DATE

JAMES A. MILLER JR.
PRINT NAME

[Signature]
SIGNATURE

679 RAYSTOWN Rd.
ADDRESS

609-668-1242
*(AREA CODE) DAY TELEPHONE NUMBER

Lumberton, N.J. 08048

609-668-1242
*(AREA CODE) EVENING TELEPHONE NUMBER

Do not attempt to complete Tables I and II until the appropriate schedules have been completed.

TABLE I RECEIPTS	Column A	Column B
	This Report	Calendar Year-to-Date
Monetary Receipts		
1. Contributions, \$300 or less	0	0
2. Contributions, more than \$300 (Schedule A)	22600.00	24600.00
2a. Currency Contributions (Schedule A)	0	0
3. Total (Add lines 1, 2 and 2a)	22600.00	24600.00
4. Refund of Contributions (Adjustment Schedule) (-)	0	0
5. Subtotal (Subtract line 4 from line 3)	22600.00	24600.00
Other Receipts		
6. Reimbursements/Refunds (Schedule A)	0	0
7. Dividends/Interest (Schedule A)	0	0
8. Loans Received by Committee, \$300 or Less	0	0
9. Loans Received by Committee more than \$300 and all Currency Loans (Schedule B)	0	0
10. Total Monetary Receipts (Add lines 5 through 9)	22600.00	24600.00
11. In-kind Contributions, \$300 or less	0	0
12. In-kind Contributions, more than \$300 (Schedule A)	0	0
13. Gross Receipts (Add lines 10, 11 and 12)	22600.00	24600.00
TABLE II EXPENDITURES		
14. Operating Disbursement (Schedule C)	2131.73	5184.26
Contributions (from the Committee) to:		
15a. NJ gubernatorial Candidates/Committees (Schedule D)	0	0
15b. NJ Legislative Candidates/Committees (Schedule D)	0	0
15c. All other Candidates/Committees (Schedule D)	0	0
Expenditures Made on Behalf of:		
16a. NJ gubernatorial Candidates/Committees (Schedule E)	0	0
16b. NJ Legislative Candidates/Committees (Schedule E)	0	0
16c. All other Candidates/Committees (Schedule E)	3459.15	4863.29
16d. Independent Expenditures (Schedule E)	0	0
17. Loan Payments (Schedule B)	0	0
18. Total Monetary Expenditures (Add lines 14 through 17)	5590.88	10047.55
19. In-kind contributions, \$300 or Less (Table I, Line 11)	0	0
20. In-kind contributions, more than \$300 (Table I, Line 12)	0	0
21. Gross Expenditures (Add lines 18 through 20)	5590.88	10047.55

DEPOSITORY SUMMARY - PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.

Committee Name: Lumberton Republican County Committee

BANK ACCOUNT INFORMATION

1. Name of Bank INVESTORS BANK (Area Code) Telephone Number 856-273-3900

Mailing Address 3100 Route 38

City, State, Zip Code Mount Laurel, NJ. 08054

Account Name Lumberton Republican County Committee

Opening Balance this Period <u>32862.44</u>	Deposits this Period <u>22600.00</u>	Disbursements this Period <u>5590.88</u>	Closing Balance this Period <u>49871.56</u>
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If the committee has more than one bank account within the same bank, the name(s) of the additional account(s) must be provided.

Account Name _____

Opening Balance this Period	Deposits this Period	Disbursements this Period	Closing Balance this Period
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2. Name of Bank _____ (Area Code) Telephone Number _____

Mailing Address _____

City, State, Zip Code _____

Account Name _____

Opening Balance this Period	Deposits this Period	Disbursements this Period	Closing Balance this Period
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If the committee has more than one bank account within the same bank, the name(s) of the additional account(s) must be provided.

Account Name _____

Opening Balance this Period	Deposits this Period	Disbursements this Period	Closing Balance this Period
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OTHER ASSETS

Other than the bank account(s) listed above, does this committee hold any of the following (please X):

<input type="checkbox"/> Investment Institution Money Market Account	<input type="checkbox"/> Bonds
<input type="checkbox"/> Certificate of Deposit (C.D.)	<input type="checkbox"/> Stocks
<input type="checkbox"/> Mutual Fund Account	<input type="checkbox"/> Real Property
<input type="checkbox"/> Other (please specify) _____	

For each item checked ("X") above (other than real property), please complete the following information. If real property is held, a Real Property Schedule must be filed as part of the Form R-3. Contact the Commission for a Real Property Schedule and instructions.

1. Name of Depository or Issuer _____ (Area Code) Telephone Number _____

Mailing Address _____

City, State, Zip Code _____

Account Name _____

Type of Asset
 Money Market C.D. Mutual Fund Bonds Stocks Other (specify) _____

Value of Asset at Purchase if Applicable	Date of Maturity, if Applicable
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Opening Balance this Period	Deposits this Period	Disbursements this Period	Closing Balance this Period
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PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.

Receipt Type (Use a separate "Schedule A" for each type and for each separate account.)
 Currency All other Monetary Contributions In-Kind Contributions-Expenditures Made by Others
 Reimbursements/Refunds of Disbursements Dividends/Interest

Committee Name

Account Name

Contributor Name: *LABORERS LOCAL 172* Contributor Address (Number and Street): *604 BORDENTOWN Rd.*
 Occupation: City, State, Zip Code: *TRENTON, N.J. 08610*

Employer Name	Date(s) Received this Period	Amount(s) Received this Period
Employer Address		
City, State, Zip Code		
Receipt Description (If In-Kind)		

10/1/2018 *7200.00*

Contributor Name: *FRIENDS OF KRISTIA JANUSEKI* Contributor Address (Number and Street):
 Occupation: City, State, Zip Code:

Employer Name	Date(s) Received	Amount(s) Received
Employer Address		
City, State, Zip Code		
Receipt Description (If In-Kind)		

12/31/2018 *1000.00*

Contributor Name: *FRIENDS OF JIM CONWAY* Contributor Address (Number and Street):
 Occupation: City, State, Zip Code:

Employer Name	Date(s) Received	Amount(s) Received
Employer Address		
City, State, Zip Code		
Receipt Description (If In-Kind)		

11/13/2018 *7200.00*

Contributor Name: *FRIENDS OF MIKE* Contributor Address (Number and Street):
 Occupation: City, State, Zip Code:

Employer Name	Date(s) Received	Amount(s) Received
Employer Address		
City, State, Zip Code		
Receipt Description (If In-Kind)		

11/13/2018 *7200.00*

1. SUBTOTAL (Add all receipts listed on this page.)	<i>22600.00</i>
2. TOTAL RECEIPTS, THIS PERIOD (Complete this line on the last page used for each receipt type. Carry forward to applicable line on Page 2, Column A.)	<i>22600.00</i>

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.
 Use a separate "SCHEDULE B" for each separate account.

Committee Name Lumberton Republican County Committee

Account Name

Name and Address of Lender	Original Loan Amount	New Loan this Period	Total Amount of Loan Plus Interest	Outstanding Balance this Period
	Payments this Period	Amount	Check No(s)	Date(s)

Occupation | Terms: | Date Incurred | Date Due | Annual Interest Rate

Employer Name and Address (Number, Street, City, State and Zip Code) | Aggregate Year-to-Date

1. Name and Address of Guarantor | Amount Outstanding

Occupation | Employer Name and Address (Number, Street, City, State and Zip Code) | Aggregate Year-to-Date

2. Name and Address of Guarantor | Amount Outstanding

Occupation | Employer Name and Address (Number, Street, City, State and Zip Code) | Aggregate Year-to-Date

Name and Address of Lender	Original Loan Amount	New Loan this Period	Total Amount of Loan Plus Interest	Outstanding Balance this Period
	Payments this Period	Amount	Check No(s)	Date(s)

Occupation | Terms | Date Incurred | Date Due | Annual Interest Rate

Employer Name and Address (Number, Street, City, State and Zip Code) | Aggregate Year-to-Date

1. Name and Address of Guarantor | Amount Outstanding

Occupation | Employer Name and Address (Number, Street, City, State and Zip Code) | Aggregate Year-to-Date

2. Name and Address of Guarantor | Amount Outstanding

Occupation | Employer Name and Address (Number, Street, City, State and Zip Code) | Aggregate Year-to-Date

1. TOTAL NEW LOANS, THIS PERIOD (Complete this line on the last page used. Carry forward to Page 2, Line 9, Column A.)	0
2. TOTAL AMOUNT OF LOANS PLUS INTEREST, THIS PERIOD	0
3. TOTAL LOAN PAYMENTS, THIS PERIOD (Complete this line on the last page used. Carry forward to Page 2, Line 17, Column A.)	0
4. TOTAL OF ALL OUTSTANDING LOANS PLUS INTEREST (Complete this line on the last page used. Carry back to Page 10, "Schedule F", Line 1.)	0

ADJUSTMENT SCHEDULE - REFUND OF CONTRIBUTIONS

Page No. 1 of 1

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.
Use a separate "ADJUSTMENT SCHEDULE" for each separate account.

Committee Name

Lumberton Republican County Committee

Account Name

IF A MONETARY CONTRIBUTION IN EXCESS OF THE CONTRIBUTION LIMIT IS DEPOSITED, PLEASE REPORT THE REFUND OF THE EXCESS AMOUNT ON THIS ADJUSTMENT SCHEDULE.

Payment Date	Check No.	Payee Name and Address	Refunded Amount

1. TOTAL REFUND OF CONTRIBUTIONS, THIS PERIOD (Complete this line on the last page used. Carry forward to Page 2, Line 4, Column A.)

0

ITEMIZED OPERATING DISBURSEMENTS

SCHEDULE C

Page No. 1 of 1

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.
Use a separate "SCHEDULE C" for each separate account.

Committee Name Lumberton Republican County Committee

Account Name

Payee or Creditor Name, Address (Number, Street, State, City, State and Zip Code)	Purpose*	Amount(s) Disbursed this Period	Transaction Dates	Check No(s)
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*Legislative Leadership Committees - See instructions concerning permissible uses of funds.

Costco 100 Centerton Rd. Mount Laurel, NJ. 08054	GIFT CARDS - Chief Retirement	181.47	11/5/18	Debit
East Coast Limo 392 MAIN ST. Lumberton, N.J. 08048	Shuttle to NEW Firehouse	288.00	11/5/2018	Debit
Amy's Flower Junction 708 MAIN ST. Lumberton, N.J. 08048	CITIZEN Recognition Flowers	47.98	11/19/2018	Debit
The Local Eatery 64 Hight St. Mount Holly NJ. 08060	RETIREMENT PARTY	1479.58	12/20/2018	Debit
MARO BROTHERS 1500 Rt. 38 HAINESPORT NJ 08036	WINE GIFTS	134.70	12/20/2018	Debit

1. SUBTOTAL (Add all disbursements listed on this page.)	2131.73
2. TOTAL DISBURSEMENTS, THIS PERIOD (Complete this line on the last page used. Carry forward to Page 2, Line 14, Column A.)	

ITEMIZED MONETARY CONTRIBUTIONS MADE TO CANDIDATES/COMMITTEES | SCHEDULE D | Page No. 1 of 1

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.
 Use a separate "SCHEDULE D" for each separate account and each separate recipient type.

New Jersey Governorial Candidates/Committees
 New Jersey Legislative Candidates/Committees
 All Other Candidates/Committees

Committee Name Lumberton Republican County Committee

Account Name _____

Recipient Name and Address (Number and Street, City, State, Zip Code)	Election Date District or County or Municipality	Check		Amount of each Contribution
		No(s)	Date(s)	

1. SUBTOTAL (Add all contributions made to each recipient type listed on this page.) 0

2. TOTAL, THIS RECIPIENT TYPE, THIS PERIOD (Complete this line on the last page used for each recipient type. Carry forward to Page 2, either Line 15a, Line 15b, or Line 15c, Column A.) 0

ITEMIZED EXPENDITURES MADE AND INCURRED ON BEHALF OF CANDIDATES/COMMITTEES	SCHEDULE E	Page No. <u>1</u> of <u>4</u>		
PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED. Use a separate "SCHEDULE E" for each separate account and each separate recipient type.				
<input type="checkbox"/> New Jersey Gubernatorial Candidates/Committees		<input type="checkbox"/> New Jersey Legislative Candidates/Committees		
<input checked="" type="checkbox"/> All Other Candidates/Committees		<input type="checkbox"/> Independent Expenditures		
Committee Name <u>Lumberton Republican County Committee</u>				
Account Name _____				
Payee Name and Address <small>(Number, Street, City, State and Zip Code)</small> <u>MARO BROTHERS</u> <u>1500 Rt. 38</u> <u>HAINESPORT N.J. 08036</u>	Purpose <u>DRINKS FOR FUNDRAISER</u>	Amount(s) this Period <small>Incurred/Not Paid</small>	Transaction <small>Date(s)</small> <u>10/25/2018</u>	Check <small>No(s)</small> <u>Debit</u>
ALLOCATION OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEE(S)				
Candidate/Committee Name	Election Date	District or County or Municipality	Pro-Rated Amount	
<u>FRIENDS of MIKE</u>	<u>11/6/2018</u>	<u>Lumberton</u>	<u>172.65</u>	
<u>FRIENDS of Jim Conway</u>	<u>11/6/2018</u>	<u>Lumberton</u>	<u>172.65</u>	
Payee Name and Address <small>(Number, Street, City, State and Zip Code)</small> <u>MARO BROTHERS</u> <u>1500 Rt. 38</u> <u>HAINESPORT N.J. 08036</u>	Purpose <u>DRINKS FOR PHONE BANK</u>	Amount(s) this Period <small>Incurred/Not Paid</small>	Transaction <small>Date(s)</small> <u>10/1/2018</u>	Check <small>No(s)</small> <u>Debit</u>
ALLOCATION OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEE(S)				
Candidate/Committee Name	Election Date	District or County or Municipality	Pro-Rated Amount	
<u>FRIENDS of MIKE</u>	<u>11/6/2018</u>	<u>Lumberton</u>	<u>7.19</u>	
<u>FRIENDS of Jim Conway</u>	<u>11/6/2018</u>	<u>Lumberton</u>	<u>7.19</u>	
1. SUBTOTAL (Add all disbursements made to each recipient type listed on this page.)			<u>359.68</u>	
2. TOTAL DISBURSEMENTS, THIS PERIOD (Complete this line on the last page used for each recipient type. Carry forward to Page 2, either Line 16a, Line 16b, or Line 16c, Column A.)				
3. SUBTOTAL (Add all outstanding obligations incurred/not paid, listed on this page.)				
4. TOTAL OUTSTANDING OBLIGATIONS INCURRED/NOT PAID (Complete this line on the last page used. Carry back to Page 10, "Schedule F", Line 2.)				

ITEMIZED EXPENDITURES MADE AND INCURRED ON BEHALF OF CANDIDATES/COMMITTEES

SCHEDULE E

Page No. 2 of 4

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED. Use a separate "SCHEDULE E" for each separate account and each separate recipient type.

- New Jersey Gubernatorial Candidates/Committees
 New Jersey Legislative Candidates/Committees
 All Other Candidates/Committees
 Independent Expenditures

Committee Name Lumberton Republican County Committee

Account Name

Payee Name and Address (Number, Street, City, State and Zip Code)	Purpose	Amount(s) this Period		Transaction Date(s)	Check No(s)
		Incurred/Not Paid	Disbursed		
<u>Shoprite 1520 Rt. 38 Hainesport N.J. 08036</u>	<u>Food - Fundraiser</u>		<u>642.68</u>	<u>10/26/2018</u>	<u>Debit</u>

ALLOCATION OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEE(S)

Candidate/Committee Name	Election Date	District or County or Municipality	Pro-Rated Amount
<u>FRIENDS of Mike</u>	<u>11/6/2018</u>	<u>Lumberton</u>	<u>321.30</u>
<u>FRIENDS of Jim Conway</u>	<u>11/6/2018</u>	<u>Lumberton</u>	<u>321.30</u>

Payee Name and Address (Number, Street, City, State and Zip Code)	Purpose	Amount(s) this Period		Transaction Date(s)	Check No(s)
		Incurred/Not Paid	Disbursed		
<u>AMAZON PRIME</u>	<u>PARTY Supplies</u>		<u>82.68</u>	<u>10/23/2018</u>	<u>Debit</u>

ALLOCATION OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEE(S)

Candidate/Committee Name	Election Date	District or County or Municipality	Pro-Rated Amount
<u>FRIENDS of Mike</u>	<u>11/6/2018</u>	<u>Lumberton</u>	<u>41.34</u>
<u>FRIENDS of Jim Conway</u>	<u>11/6/2018</u>	<u>Lumberton</u>	<u>41.34</u>

1. SUBTOTAL (Add all disbursements made to each recipient type listed on this page.)	<u>725.28</u>
2. TOTAL DISBURSEMENTS, THIS PERIOD (Complete this line on the last page used for each recipient type. Carry forward to Page 2, either Line 16a, Line 16b, or Line 16c, Column A.)	
3. SUBTOTAL (Add all outstanding obligations incurred/not paid, listed on this page.)	
4. TOTAL OUTSTANDING OBLIGATIONS INCURRED/NOT PAID (Complete this line on the last page used. Carry back to Page 10, "Schedule F", Line 2.)	

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED. Use a separate "SCHEDULE E" for each separate account and each separate recipient type.

- New Jersey gubernatorial Candidates/Committees New Jersey Legislative Candidates/Committees
 All Other Candidates/Committees Independent Expenditures

Committee Name Lumberton Republican County Committee
 Account Name

Payee Name and Address (Number, Street, City, State and Zip Code)	Purpose	Amount(s) this Period		Transaction Date(s)	Check No(s)
		Incurred/Not Paid	Disbursed		
WAWA 1522 Rt. 38 Lumberton, NJ. 08048	PHONE BANK GIFT CARDS		20.00	10/30/2018	Debit

ALLOCATION OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEE(S)

Candidate/Committee Name	Election Date	District or County or Municipality	Pro-Rated Amount
FRIENDS of Mike	11/6/2018	Lumberton	10.00
FRIENDS of Jim Conway	11/6/2018	Lumberton	10.00

Payee Name and Address (Number, Street, City, State and Zip Code)	Purpose	Amount(s) this Period		Transaction Date(s)	Check No(s)
		Incurred/Not Paid	Disbursed		
MARO BROTHERS 1500 Rte 38 HAINESPORT, NJ. 08036	PHONE BANK DRINKS		65.54	10/30/2018	Debit

ALLOCATION OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEE(S)

Candidate/Committee Name	Election Date	District or County or Municipality	Pro-Rated Amount
FRIENDS of Mike	11/6/2018	Lumberton	32.77
FRIENDS of Jim Conway	11/6/2018	Lumberton	32.77

1. SUBTOTAL (Add all disbursements made to each recipient type listed on this page.)	85.54
2. TOTAL DISBURSEMENTS, THIS PERIOD (Complete this line on the last page used for each recipient type. Carry forward to Page 2, either Line 16a, Line 16b, or Line 16c, Column A.)	
3. SUBTOTAL (Add all outstanding obligations incurred/not paid, listed on this page.)	
4. TOTAL OUTSTANDING OBLIGATIONS INCURRED/NOT PAID (Complete this line on the last page used. Carry back to Page 10, "Schedule F", Line 2.)	

ITEMIZED EXPENDITURES MADE AND INCURRED ON BEHALF OF CANDIDATES/COMMITTEES

SCHEDULE E

Page No. 4 of 4

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED. Use a separate "SCHEDULE E" for each separate account and each separate recipient type.

- New Jersey gubernatorial Candidates/Committees New Jersey Legislative Candidates/Committees
 All Other Candidates/Committees Independent Expenditures

Committee Name Lumberton Republican County Committee

Account Name

Payee Name and Address (Number, Street, City, State and Zip Code)	Purpose	Amount(s) this Period		Transaction Date(s)	Check No(s)
		Incurred/Not Paid	Disbursed		
<u>Bill Monka 300 53rd St, suite #C West Palm Beach FL 33407</u>	<u>Phone Calls DATA List</u>		<u>1050.00</u>	<u>11/5/2018</u>	<u>2036</u>

ALLOCATION OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEE(S)

Candidate/Committee Name	Election Date	District or County or Municipality	Pro-Rated Amount
<u>FRIENDS of Mike</u>	<u>11/6/2018</u>	<u>Lumberton</u>	<u>525.00</u>
<u>FRIENDS of Jim Conway</u>	<u>11/6/2018</u>	<u>Lumberton</u>	<u>525.00</u>

Payee Name and Address (Number, Street, City, State and Zip Code)	Purpose	Amount(s) this Period		Transaction Date(s)	Check No(s)
		Incurred/Not Paid	Disbursed		
<u>Dadz 744 Main St. Lumberton, N.J. 08048</u>	<u>Food + Drinks</u>		<u>1238.65</u>	<u>11/6/2018</u>	<u>Debit</u>

ALLOCATION OF EXPENDITURES BENEFITING CANDIDATE(S)/COMMITTEE(S)

Candidate/Committee Name	Election Date	District or County or Municipality	Pro-Rated Amount
<u>FRIENDS of Mike</u>	<u>11/6/2018</u>	<u>Lumberton</u>	<u>619.33</u>
<u>FRIENDS of Jim Conway</u>	<u>11/6/2018</u>	<u>Lumberton</u>	<u>619.32</u>

1. SUBTOTAL (Add all disbursements made to each recipient type listed on this page.)	<u>2288.65</u>
2. TOTAL DISBURSEMENTS, THIS PERIOD (Complete this line on the last page used for each recipient type. Carry forward to Page 2, either Line 16a, Line 16b, or Line 16c, Column A.)	<u>3459.15</u>
3. SUBTOTAL (Add all outstanding obligations incurred/not paid, listed on this page.)	
4. TOTAL OUTSTANDING OBLIGATIONS INCURRED/NOT PAID (Complete this line on the last page used. Carry back to Page 10, "Schedule F", Line 2.)	

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.
 Use a separate "SCHEDULE F" for each separate account.

Committee Name *Lumberton Republican County Committee*

Account Name

Creditor Name and Address (Number, Street, City, State, and Zip Code)	Outstanding Beginning Balance this Period	Amount Incurred this Period	Payments this Period	Outstanding Balance this Period
Debt Purpose				
Debt Purpose				
Debt Purpose				
Debt Purpose				
Debt Purpose				

SUMMARY OF DEBTS AND OBLIGATIONS	
1. TOTAL OUTSTANDING LOANS PLUS INTEREST FROM SCHEDULE B, PAGE 5, LINE 4	0
2. TOTAL OUTSTANDING OBLIGATIONS INCURRED/NOT PAID ON BEHALF OF CANDIDATES/COMMITTEES FROM SCHEDULE E, PAGE 9, LINE 4	0
3. TOTAL OUTSTANDING OBLIGATIONS, SCHEDULE F (Complete this line on the last page used.)	0
4. TOTAL OUTSTANDING DEBTS/OBLIGATIONS OWED BY COMMITTEE (Add lines 1, 2 and 3. Carry forward to front page, Line 10.)	0

PLEASE TYPE OR PRINT. PHOTOCOPIES MAY BE USED IF ADDITIONAL FORMS ARE NEEDED.
Use a separate "SCHEDULE G" for each separate account.

Committee Name Lumberton Republican County Committee
 Account Name _____

Debtor Name and Address (Number, Street, City, State, and Zip Code)	Balance Due at beginning of this Period	New Amount this Period	Total Amount Received this Period	Balance Due at Close of this Period
Date Debt Incurred Debt Description				
Date Debt Incurred Debt Description				
Date Debt Incurred Debt Description				
Date Debt Incurred Debt Description				
Date Debt Incurred Debt Description				

SUMMARY OF DEBTS AND OBLIGATIONS	
1. SUBTOTAL (Add all debts and obligations owed to committee listed on this page.)	<u>0</u>
2. TOTAL DEBTS AND OBLIGATIONS OWED TO COMMITTEE (Complete this line on the last page used. Carry forward to front page, Line 8.)	<u>0</u>