

| CAMPAIGN FINANCE REPORT | | | | |
|---|---------------------------|----------------------|--------------------|--------------------|
| Name and Address of Filing Candidate or Committee | | | | |
| Name: | <i>Vote Lisa Scheller</i> | | | |
| Address: | <i>751 Benner Rd</i> | | | |
| City, State, Zip: | <i>Allentown PA 18104</i> | | | |
| Report Filed By | | | | |
| Candidate | | Committee | <i>X</i> | |
| Type of Report | <i>Annual 2011</i> | Election Date | Amended | Termination |
| <i>TERMINATION REPORT</i> | | | <i>No</i> | <i>No</i> |
| Office Sought By Candidate | | Party | County | |
| <i>Lehigh County Commissioner At-Large</i> | | <i>R</i> | <i>Lehigh</i> | |
| Summary of Receipts & Expenditures | | | | |
| From: | <i>11/29/2011</i> | To: | <i>12/31/2011</i> | |
| A. Amount Brought Forward From Last Report | | | <i>318.99</i> | |
| B. Total Monetary Contributions & Receipts (from Schedule I) | | | <i>6,000.00</i> | |
| C. Total Funds Available (Sum of Lines A & B) | | | <i>6,318.99</i> | |
| D. Total Expenditures (from Schedule III) | | | <i>6,200.00</i> | |
| E. Ending Cash Balance (Subtract Line D from Line C) | | | <i>118.99</i> | |
| F. Value of In-Kind Contributions Received (from Schedule II) | | | <i>0.00</i> | |
| G. Unpaid Debts & Obligations (from Schedule IV) | | | <i>(13,800.00)</i> | |

*Complete reports including signatures are on file in the Office of Voter Registration.

CONTRIBUTIONS AND RECEIPTS**Detailed Summary Page**

| | |
|---|---|
| Name of Filing Committee or Candidate VOTE LISA SCHEUER | Reporting Period From <u>11/29/2011</u> to <u>12/31/2011</u> |
|---|---|

| | |
|---|-------------|
| 1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR | |
| TOTAL for the Reporting Period (1) | \$ <u>0</u> |

| | |
|--|-------------|
| 2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B) | |
| Contributions Received from Political Committees (Part A) | \$ <u>0</u> |
| All Other Contributions (Part B) | \$ <u>0</u> |
| TOTAL for the Reporting Period (2) | \$ |

| | |
|--|--------------------|
| 3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D) | |
| Contributions Received from Political Committees (Part C) | \$ <u>6,000.00</u> |
| All Other Contributions (Part D) | \$ <u>0</u> |
| TOTAL for the Reporting Period (3) | \$ |

| | |
|--|-------------|
| 4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E) | |
| TOTAL for the Reporting Period (4) | \$ <u>0</u> |

| | |
|--|--------------------|
| TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.) | \$ <u>6,000.00</u> |
|--|--------------------|

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 over \$250.00 in the reporting period.

| | |
|--|---|
| Name of Filing Committee or Candidate VOTE USA SCHEUER | Reporting Period From 11/29/2011 To 12/31/2011 |
|--|---|

| | | | | DATE | | | AMOUNT |
|--|--------------------|-------------------------------------|--|-----------|-----------|-------------|--------------------|
| | | | | MO. | DAY | YEAR | |
| Full Name of Contributing Committee VOLUNTEERS FOR ARBAU | | | | 11 | 30 | 2011 | \$ 1,000.00 |
| Mailing Address P.O. Box 241 | | | | MO. | DAY | YEAR | \$ |
| City TAMAQUA, | State PA | Zip Code (Plus 4) 18252 - | | MO. | DAY | YEAR | \$ |
| Full Name of Contributing Committee MY LEHIGH COUNTY PAC | | | | 12 | 5 | 2011 | \$ 5,000.00 |
| Mailing Address P.O. Box 3012 | | | | MO. | DAY | YEAR | \$ |
| City AUENTOWN | State PA | Zip Code (Plus 4) 18106 - | | MO. | DAY | YEAR | \$ |
| Full Name of Contributing Committee | | | | MO. | DAY | YEAR | \$ |
| Mailing Address | | | | MO. | DAY | YEAR | \$ |
| City | State | Zip Code (Plus 4) | | MO. | DAY | YEAR | \$ |
| | | | | | | | \$ |
| Full Name of Contributing Committee | | | | MO. | DAY | YEAR | \$ |
| Mailing Address | | | | MO. | DAY | YEAR | \$ |
| City | State | Zip Code (Plus 4) | | MO. | DAY | YEAR | \$ |
| | | | | | | | \$ |
| Full Name of Contributing Committee | | | | MO. | DAY | YEAR | \$ |
| Mailing Address | | | | MO. | DAY | YEAR | \$ |
| City | State | Zip Code (Plus 4) | | MO. | DAY | YEAR | \$ |
| | | | | | | | \$ |
| Full Name of Contributing Committee | | | | MO. | DAY | YEAR | \$ |
| Mailing Address | | | | MO. | DAY | YEAR | \$ |
| City | State | Zip Code (Plus 4) | | MO. | DAY | YEAR | \$ |
| | | | | | | | \$ |
| Full Name of Contributing Committee | | | | MO. | DAY | YEAR | \$ |
| Mailing Address | | | | MO. | DAY | YEAR | \$ |
| City | State | Zip Code (Plus 4) | | MO. | DAY | YEAR | \$ |
| | | | | | | | \$ |
| Full Name of Contributing Committee | | | | MO. | DAY | YEAR | \$ |
| Mailing Address | | | | MO. | DAY | YEAR | \$ |
| City | State | Zip Code (Plus 4) | | MO. | DAY | YEAR | \$ |
| | | | | | | | \$ |

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL

\$ **6,000.00**

SCHEDULE III
STATEMENT OF EXPENDITURES

PAGE 4 OF 5

| | |
|---|---|
| Name of Filing Committee or Candidate VOTE LISA SCHEUER | Reporting Period From <u>11/29/2011</u> To <u>12/31/2011</u> |
|---|---|

| | | | | |
|---|--------------------|-------------------------------------|--|------------------------------|
| To Whom Paid LISA SCHEUER | | | MO. <u>12</u> DAY <u>7</u> YEAR <u>2011</u> | Amount \$ 6,200.00 |
| Mailing Address 751 BENNER ROAD | | | Description of Expenditure PARTIAL REPAYMENT OF LOAN | |
| City AUENTOWN | State PA | Zip Code (Plus 4) 18104 - | MADE TO CAMPAIGN ON 6/14/11 | |
| To Whom Paid | | | MO. DAY YEAR | Amount |
| Mailing Address | | | Description of Expenditure | |
| City | State | Zip Code (Plus 4) | | |
| To Whom Paid | | | MO. DAY YEAR | Amount |
| Mailing Address | | | Description of Expenditure | |
| City | State | Zip Code (Plus 4) | | |
| To Whom Paid | | | MO. DAY YEAR | Amount |
| Mailing Address | | | Description of Expenditure | |
| City | State | Zip Code (Plus 4) | | |
| To Whom Paid | | | MO. DAY YEAR | Amount |
| Mailing Address | | | Description of Expenditure | |
| City | State | Zip Code (Plus 4) | | |
| To Whom Paid | | | MO. DAY YEAR | Amount |
| Mailing Address | | | Description of Expenditure | |
| City | State | Zip Code (Plus 4) | | |
| To Whom Paid | | | MO. DAY YEAR | Amount |
| Mailing Address | | | Description of Expenditure | |
| City | State | Zip Code (Plus 4) | | |
| To Whom Paid | | | MO. DAY YEAR | Amount |
| Mailing Address | | | Description of Expenditure | |
| City | State | Zip Code (Plus 4) | | |

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

PAGE TOTAL
\$ 6,200.00

SCHEDULE IV 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 VOTE LISA SCHEUER | Reporting Period From 11/29/2011 To 12/31/2011 |
|---|---|

| | | | | | |
|---|--------------------|-------------------------------------|-----------------|--|--|
| Name of Creditor LISA SCHEUER | | | | Outstanding Balance of Debt \$ 10,000.00 | |
| Mailing Address 751 BENNER ROAD | DATE DEBT INCURRED | MO. 11 | DAY 4 | YEAR 2011 | |
| City AUENTOWN | State PA | Zip Code (Plus 4) 18104 - | | | |

Description of Debt
LOAN TO CAMPAIGN

| | | | | | |
|---|--------------------|-------------------------------------|------------------|---|--|
| Name of Creditor LISA SCHEUER | | | | Outstanding Balance of Debt \$ 3,800.00 | |
| Mailing Address 751 BENNER ROAD | DATE DEBT INCURRED | MO. 6 | DAY 14 | YEAR 2011 | |
| City AUENTOWN | State PA | Zip Code (Plus 4) 18104 - | | | |

Description of Debt
LOAN TO CAMPAIGN

| | | | | | |
|------------------|--------------------|-------------------------------|-----|--|--|
| Name of Creditor | | | | Outstanding Balance of Debt \$ | |
| Mailing Address | DATE DEBT INCURRED | MO. | DAY | YEAR | |
| City | State | Zip Code (Plus 4) - | | | |

Description of Debt

| | | | | | |
|------------------|--------------------|-------------------------------|-----|--|--|
| Name of Creditor | | | | Outstanding Balance of Debt \$ | |
| Mailing Address | DATE DEBT INCURRED | MO. | DAY | YEAR | |
| City | State | Zip Code (Plus 4) - | | | |

Description of Debt

| | | | | | |
|------------------|--------------------|-------------------------------|-----|--|--|
| Name of Creditor | | | | Outstanding Balance of Debt \$ | |
| Mailing Address | DATE DEBT INCURRED | MO. | DAY | YEAR | |
| City | State | Zip Code (Plus 4) - | | | |

Description of Debt

| | | | | | |
|------------------|--------------------|-------------------------------|-----|--|--|
| Name of Creditor | | | | Outstanding Balance of Debt \$ | |
| Mailing Address | DATE DEBT INCURRED | MO. | DAY | YEAR | |
| City | State | Zip Code (Plus 4) - | | | |

Description of Debt

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

| |
|--|
| PAGE TOTAL \$ 13,800.00 |
|--|