	CAN	MPAIGN F	INANCE REP	ORT		
	Name and Ac	ldress of Fi	ling Candidate	or Com	mitte	e
Name: Lisa Scheller						
Address:		751 Benner				
City, State, Zip: Allentown PA 18104						
		Repo	rt Filed By			
Candidate		X	Committee			
Type of Repo	ort 30 Day Post	Election	Election Date	Amend	led	Termination
			11/08/2011			
TERMINATIO	ON REPORT			No		No
Office Sought By Candidate Party County					T	
Lehigh County Commissioner At-Large R Lehigh						
	Sumn	nary of Rec	ceipts & Expend	litures		
From: 10/25/2011 To: 11/28/2011						
A. Amount Brought Forward From Last Report				(46,275.00)		
B. Total Monetary Contributions & Receipts (from Schedule I)					135.00	
C. Total Funds Available (Sum of Lines A & B)					(46,140.00)	
D. Total Expenditures (from Schedule III)				13,135.00		
E. Ending Cash Balance (Subtract Line D from Line C)				(59,275.00)		
F. Value of In-Kind Contributions Received (from Schedule II)				1,912.96		
G. Unpaid De	ebts & Obligat	ions (from S	chedule IV)		0.00	

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

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

PAGE 2 OF

Detailed Summary Page

Name of Filing Committee or Candidate USA SCHELLER	Reporting Period

TOTAL for the Reporting Period (1) \$	Ø

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Contributions Received from Political Committees (Part A)	\$	Ø
All Other Contributions (Part B)	\$	Ø
TOTAL for the Reporting Period (2)	\$	Ø

SERVINIBLE OF THE SERVING SERVINE SERVING SERV		
Contributions Received from Political Committees (Part C)	\$	Ø
All Other Contributions (Part D)	\$	Ø.
TOTAL for the Reporting Period (3) \$	Ø

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TOTAL for the Reporting Period	(4)	\$ 135.0	5 Q

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING	
	35.00

PART E 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.

Lisa Scheller			From <u>11</u>	125/2	UI TO 11/28/2011
-uli Name 1					
My Lehigh County PA	<u></u>				
PO Box 30/2		Zio Code (Pius A)			Amount
Allentoun	PA	Zip Code (Pius 4)	11 13	ZOH	\$ /35.00
Pe-Imbursement for Gle	'n	Meatern Ever	nt		
ul! Name					
failing Address					
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leceipt Description	<u> </u>				\$
uii Name					
Mailing Address					
lity	State	Zip Code (Plus 4)	MO. DAY	YEAN	Amount \$
Receipt Description					
Full Name					
Mailing Address					
Eity	State	Zip Code (Plus 4)	MO. ZOAY	YUN	Amount
Receipt Description		<u> </u>			\$
Full Name					
Mailing Address					
City	State	Zip Code (Plus 4)	ELORA PERME	NEAR P	Amount \$
Receipt Description					.
Full Name					
Mailing Address				<u> </u>	
City	I ganta I	The Conda Missall			TX. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
	State	Zip Code (Plus 4)			\$
Receipt Description					
		* · · · · · · · · · · · · · · · · · · ·			PAGE TOTAL
Enter Grand Total of Part E on School	lule I,	Detailed Summary	Page, Section	1 4 .	\$ 135.00

DSEB-502 (7-99)

SCHEDULE II

PAGE 4 OF 6

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 Per		1 =- 11/2× /2×12
CISA SCHERE	From _/U/	25 / CVI	1 To 11/28/2011
TEANNI TEANNE THE TRANSPORT OF THE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OFFICE OF		GSE)=	
TOTAL for the Reporting Peri	iod (1)	\$	Ø
Z NEXHAULSON FREEDONS HEISENED - VALUE OF SHOOT IS S	ation tries	PART	
TOTAL for the Reporting Peri	od (2)	\$	Ø
	man a sangan		
2 N KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (F			
TOTAL for the Reporting Peri	od (3)	\$19,	120.96
		_	
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)		\$19,	120.96
		•	

PAGE	5	ΩF	6
- 74-			

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	•			Reporting	Period	
Cisa Scheller				From <u>I</u>	1/25/20	11 To 11/28/2011
				DATE		AMOUNT
Full Name of Contributor			416	die als 21 Vac	EVEAUS	
My Lengh County MAC	<u>.</u>		1/	128	Coll	\$ 19,120.96
Full Name of Contributor My Lehigh County PAC Mailing Address PU BUX 3012- City			MG.	DAY	YEAR	\$
City SUK 30722	State	Zip Code (Plus 4)	- 100	DAY.	16270 A 1144	
Allensown	PA	2ip Code (Plus 4) 18/06 -				\$
Employer of Contributor			Occupa	ition		
Employer Mailing Address/Principal Place of Business			Descri	otion of Cor	ntribution	27 (1.14)
						erTISING_
Full Name of Contributor				LOAY	l state of the latest	\$
Mailing Address			· MO.	DAY	YEAR	\$
						*
City	State	Zip Code (Plus 4) —	MO.	- DAY		\$
Employer of Contributor			Occupa	tion		· · · · · · · · · · · · · · · · · · ·
Employer Mailing Address/Principal Place of Business			Descri	ption of Co	tribution	
Employer Warning State and Transport Floor of Sections				,,,,,,,		
Full Name of Contributor			100	DAT		S
						7
Mailing Address			M ₀ .	DAY		\$
City	State	Zip Code (Plus 4)	Moz	DAY	ETEM.	\$
Employer of Contributor	İ	-	Occupa	l tion	<u> </u>	
Employer of John Butts			Cutapa	reton.		
Employer Mailing Address/Principal Place of Business			Descri	ption of Co	ntribution	
Full Name of Contributor			MQ.	DAY		
						\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	J. DAY	YEAR	e
		-]	4
Employer of Contributor			Occupe	ition		
Employer Mailing Address/Principal Place of Business		:	Descri	ption of Co	ntribution	
Full Name of Contributor			× 102	- DAY	YEAR	\$
Meiling Address						
THE PARTY OF THE P			32112	-DAY		\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer of Contributor			Occupa	1 Ition	<u> </u>	-
. 6						
Employer Mailing Address/Principal Place of Business		:	Descri	ption of Co	ntribution	
Enter Grand Total of Part G on Sched	dula II	I in-Kind Cantella	utiona	Deteiled		PAGE TOTAL
Summary Page, Section 3.	WUIT	, ar-king Contribl	uuona I	-611140		\$ 19,120.96
Summary rage, Section 3.						٠ ١ (١

DSEB-502 (7-99)

PAGE 6 OF 6

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period			
Lisa Scheller				From 10/25/2011 To 11/28/2011			
LISA SCIETE					, ,		
To Whom Paid			4 . 3	255.5 A		Amount	
Glen Meakeem - Educational Mailing Address	Ex	: <u>+</u>		3	Z.011	\$ 135,00	
Malling Address			Descript	ion of Expe	inditure	Event for	
City	State	Zip Code (Plus 4)		du catro		CACUL LEEF	
		· 	<u> </u>	ducano	ONLL	<u>.</u>	
To Whom Paid			Mo.	DAY	医方心部	Amount	
Mote LISA Scheller (LUAN) Mailing Address	<u> </u>		Descript	ion of Expe	2011	\$ 10,000.00	
751 Benny Ld.				on or expe		09h	
Allestown	State	Zip Code (Plus 4)			/··		
To Whom Paid	<i>[</i>		Me	- OXY	YEAR	Amount	
Mailing Address	Garj	paika	Descript	7	20//	\$ 500, W	
To Whom Paid Flect New Sheriff Anda Mailing Address 3213 Clear Stream Dr.	'	*	1 6	C	name.	unctives	
CIRC	State		1	suga.	//\ <u></u>	W.C.	
Whitehall	PA	18052					
To Whom Paid			M 0.		MEAN S	Amount \$ 2500,00	
Mailing Address		- ^ ^	/(Descript	14 ion of Expe	2011	2 2000,00	
1544 HAMILTON BUP, 2) <i>Ul</i> (t	5 202					
Mailing Address HAMILTON BUP, S City AUGNTONN	State	Zip Code (Plus 4) 8102 -					
To Whom Paid			Mo	DAY.	YEAR	Amount	
Mailing Address			Descript	ion of Expe	nditure.	\$	
mailing Address			(Jesu, 15.	ton or East.	Shorter &	•	
City	State	Zip Code (Plus 4)	1			,	
		-		·			
To Whom Paid			MO.	DAY	TEAT	Amount &	
Mailing Address			Descript	ion of Expe	inditure	\$	
			<u> </u>				
City	State	Zip Code (Plus 4)					
To Whom Paid		_		TOAY		Amount	
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Mailing Address			Descript	ion of Expe	enditure		
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watting Address			Descript	ion of Expe	Maitura		
City	State	Zip Code (Plus 4)	- 	•••		Market and the second	
						PAGE TOTAL	
Enter Grand Total of Expenditures on Pag	ge 1, i	Report Cover	Page, It	em D.		\$ 13 135.00	