	CAI	MPAIGN F	INANCE REP	ORT		
	Name and A	ddress of Fi	ling Candidate	or Comi	nitte	е
Name:		Vic Mazziotti				
Address:		2430 Washington St				
City, State, Z	ip:	Allentown PA 18104				
		Repo	rt Filed By			
Candidate		X	Committee			
Type of Report 30 Day Post Election			Election Date	Amended		Termination
			11/08/2011			
TERMINATION REPORT				No		No
Office Sought By Candidate		e	Party	County		
Lehigh County Commissioner At-Large		R	Lehigh			
· · ·	Sum	mary of Re	ceipts & Expend	litures		
From:	10/25/2011		To:	11/28/2011		
A. Amount Brought Forward From Last Report				0.00		
B. Total Monetary Contributions & Receipts (from Schedule I)				0.00		
C. Total Funds Available (Sum of Lines A & B)				0.00		
D. Total Expenditures (from Schedule III)				0.00		
E. Ending Cash Balance (Subtract Line D from Line C)				0.00		
F. Value of In-Kind Contributions Received (from Schedule II)				dule II)	19,120.96	
G. Unpaid D	ebts & Obliga	tions (from S	Schedule IV)		0.00	)

<sup>\*</sup>Complete reports including signatures are on file in the Office of Voter Registration.

## SCHEDULE II

PAGE 2 OF 3

## 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** 

Reporting Period				
From 10-	From 10-25-1 To 11-28-11			
\$50.00 OR L	ESS PE	R CONTRIBUTOR		
iod (1)	\$			
250.00 (FRON	I PART			
iod (2)	\$			
ROM PART G				
iod (3)	\$ 1	9.120.96		
	\$ 10	9,120.96		
	\$50.00 OR L od (1) 250.00 (FROM	\$50.00 OR LESS PE od (1) \$  250.00 (FROM PART od (2) \$  ROM PART G) od (3) \$		

PAGE	3	OF	3
		-	

## SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate			R	eporting		
Vic Mazzie	14;	•		From #1	2-25-	<u>// ™ 11-28-11</u>
/ 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				DATE		AMOUNT
Full Name of Contributor My Lehigh Co	MAN	PAC	MO.	DAY		\$ 19,120.96
Mailing Address	301	12	MO.	DAY	YEAR	\$
Allestours	State	Zip Code (Plus 4)	MC.	DAY	YEAR	\$
Employer of Contributor	•	_	Occupati	on		
Employer Mailing Address/Principal Place of Business			Descripti	on of Con	tribution	
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MQ.	DAY	YEAR	\$
Employer of Contributor			Occupati			
Employer Mailing Address/Principal Place of Business			Descript	on of Con	tribution	
Full Name of Contributor			MO.	DAY	PASY	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) —	MO.	DAY	YEAR	\$
Employer of Contributor	•		Occupati	on		
Employer Mailing Address/Principal Place of Business			Descript	on of Con	tribution	
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) —	MO.	DAY	YEAR	\$
Employer of Contributor			Occupati	on		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Employer Mailing Address/Principal Place of Business	·		Descript	on of Con	tribution	
Full Name of Contributor		——————————————————————————————————————	MQ.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO;	DAY	YEAR	\$
Employer of Contributor	-		Occupati	on		
Employer Mailing Address/Principal Place of Business			Descript	on of Con	tribution	
						PAGE TOTAL
Enter Grand Total of Part G on School Summary Page, Section 3.	aule II	i, in-Kind Contrib	utions D	etailed		\$ 19,120.96

DSEB-502 (7-99)