	C	AMPAIGN F	FINANCE REF	PORT				
	Name and	Address of Fi	ling Candidate	or Com	mitte	ee		
Name: Address: City, State,	Zip:	Committee to Elect Andrea Naugle 2304 E Fairmont St Allentown PA 18109 Report Filed By						
Candidate		No	Committee			Yes		
Type of Report			Election Date	Amend	led	Termination		
2009 Annual Report				No		No		
Office Sought By Candidate			Party	County				
Lehigh County Clerk of Judicial Records			D	Lehigh				
79	Sur	nmary of Rec	eipts & Expend	litures				
From: 01/01/2009			To:	12/31/2009				
A. Amount Brought Forward From Last Report						3169.19		
B. Total Mo	19.88							
C. Total Fu	3189.07							
D. Total Ex	0.00							
E. Ending Cash Balance (Subtract Line D from Line C)						3189.07		
F. Value of In-Kind Contributions Received (from Schedule II)						0.00		
G. Unpaid I	0.00							
			encuale 1 v j		0.00			

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

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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.

Name of Filing Committee or Candidate Committee to Elect.	Andr	ea Naughe		Reporting From _	Period 1/1/09	To 12/31/09
· · · · · · · · · · · · · · · · · · ·						
Full Name L, C. E. F. C. U.						
Mailing Address 455 W. Hami Iton	ST					
Allen town	State	Zip Code (Plus 4) 18101 - 1614	MO. l	DAY	YEAR 09	\$ 7,98
Receipt Description	•					
Full Name LCEFCU						
Mailing Address					• • • • • •	
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR O 9	Amount 3,92
Receipt Description	I.		1 1			
Full Name LCEFCU						
Mailing Address			· · · · · · · · · · · · · · · · · · ·			
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	* 3.97
Receipt Description				_11	101	<u> </u>
Full Name LC EFCU						
Mailing Address						
City	State	Zip Code (Plus 4)		DAY		Amount \$ 4,01
Receipt Description			10		09	4 1101
Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
Receipt Description		_				\$
Fuil Name						
Mailing Address						
City	State	Zip Code (Plus 4) —	MO.	DAY	YEAR	Amount \$
Receipt Description	<u> </u>			<u> </u>	1	
						PAGE TOTAL
Enter Grand Total of Part E on Sche	dule I,	Detailed Summary	y Page	, Sectio	n 4.	\$ 19,88

DSEB-502 (7-99)