

CAMPAIGN FINANCE REPORT				
Name and Address of Filing Candidate or Committee				
Name:		<i>Citizens for Common Sense</i>		
Address:		<i>2600 Gracie lone</i>		
City, State, Zip:		<i>Macungie PA 18062</i>		
Report Filed By				
Candidate		Committee		
Type of Report		Election Date	Amended	Termination
2013 – 30 Day Post Election		11/05/2013		
Termination Report?				
Office Sought By Candidate		Party	County	
<i>County Executive</i>		<i>D</i>	<i>Lehigh</i>	
Summary of Receipts & Expenditures				
From:	<i>10/22/2013</i>	To:	<i>11/25/2013</i>	
A. Amount Brought Forward From Last Report			<i>2,989.00</i>	
B. Total Monetary Contributions & Receipts (from Schedule I)			<i>0.00</i>	
C. Total Funds Available (Sum of Lines A & B)			<i>2,989.00</i>	
D. Total Expenditures (from Schedule III)			<i>1,500.00</i>	
E. Ending Cash Balance (Subtract Line D from Line C)			<i>1,489.00</i>	
F. Value of In-Kind Contributions Received (from Schedule II)			<i>0.00</i>	
G. Unpaid Debts & Obligations (from Schedule IV)			<i>0.00</i>	

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

SCHEDULE I
Contributions and Receipts
Detailed Summary Page

Filer Identification Number	Citizens for Common Sense		
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1. Unitemized Contributions and Receipts—\$50.00 or Less per Contributor			
Total for the reporting period	(1)	\$	

2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)			
Contributions Received from Political Committees (Part A)		\$	
All Other Contributions (Part B)		\$	
Total for the reporting period	(2)	\$	

3. Contributions Over \$250.00 (From Part C and Part D)			
Contributions Received from Political Committees (Part C)		\$	
All Other Contributions (Part D)		\$	
Total for the reporting period	(3)	\$	

4. Other Receipts—Refunds, Interest Earned, Returned Checks, ETC. (From Part E)			
Total for the reporting period	(4)	\$	

Total Monetary Contributions and Receipts during this reporting period <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i>		\$	0.00
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SCHEDULE III
Statement of Expenditures

Filer Identification Number:	Citizens for Common Sense
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To Whom Paid		The WS Group				Date (MM/DD/YYYY)	\$	1,500
House #	219	Street Address		State Street		Description of Expenditure		
City	Harrisburg	State	PA	Zip Code	17101	Mail Design Fees		
To Whom Paid						Date (MM/DD/YYYY)	\$	
House #		Street Address				Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date (MM/DD/YYYY)	\$	
House #		Street Address				Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date (MM/DD/YYYY)	\$	
House #		Street Address				Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date (MM/DD/YYYY)	\$	
House #		Street Address				Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date (MM/DD/YYYY)	\$	
House #		Street Address				Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date (MM/DD/YYYY)	\$	
House #		Street Address				Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date (MM/DD/YYYY)	\$	
House #		Street Address				Description of Expenditure		
City		State		Zip Code				