CAMPAIGN FINANCE REPORT Name and Address of Filing Candidate or Committee JohnDonches4Commissioner Name: 559 Minor St Address: Emmaus PA 18049 City, State, Zip: X Committee Candidate **Termination Election Date** Amended Type of Report 05/16/2017 2017 - 30 Day Post - Primary Termination Report? Office Sought By Candidate County Party Lehigh County Commissioner Dist #5 R Lehigh Summary of Receipts & Expenditures 06/05/2017 05/02/2017 To: From: A. Amount Brought Forward From Last Report 610.00 B. Total Monetary Contributions & Receipts (from Schedule I) 6,085.19 6,695.19 C. Total Funds Available (Sum of Lines A & B) 5,012.85 D. Total Expenditures (from Schedule III) E. Ending Cash Balance (Subtract Line D from Line C) 1,682.34 F. Value of In-Kind Contributions Received (from Schedule II) 0.00 G. Unpaid Debts & Obligations (from Schedule IV) (-3,000.00)

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

SCHEDULE I

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	riod
John Donales 4 Commissioner From 5/	2/2017 TO 4/9/2017

UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER	CONT	RIBL	ITOR	Call the settles in the set
TOTAL for the Reporting Period	(1)	\$	80.0	Ø

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ 0
All Other Contributions (Part B)	\$ 550,00
TOTAL for the Reporting Period (2	\$ 550.00

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ 2453.19
All Other Contributions (Part D)	\$ 3 000.00
TOTAL for the Reporting Period (3)	\$ 5455119

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TOTAL for the Reporting Period	(4)	\$	D	

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.)	\$ 6,085,19
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PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

John Donales 4	011111111111111111111111111111111111111	01 J.k.)			<i>71</i>	1017 to 6/9/2017
Full Name of Contributing Committee				DATE DAY	VEAR	AMOUNT
						\$
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City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	s
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Enter Grand Total of Part A on	0-1			<u> </u>	_	PAGE TOTAL

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

John Donches 4 Commissioner		From _	5/2/20	117 to 6/9/2017
		DATE		AMOUNT
Full Name of Contributor Tohn Mondin	5 MO	DAY 2	2017	\$ 100.00
Mailing Address 1646 Shimarville Rd.	MQ		YEAR	\$
Em mary DA 18849-		DAY	YEAR	\$
Full Name of Contributor M atay's American Pizza	Мо	DAY	YEAR	\$ 100.00
Mailing Address 1303 Broadway (Rear)	Mo		AO17 YEAR	\$
City State Zip Code (P		DAY	YEAR	*
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Full Name of Contributor Mater's Famous Churseytaks	5 Mo	DAY 5	DO17	\$ 100.00
Mailing Address Brandmay	- Mo	DAY	YEAR	\$
City gethlaham PA 18015-		DAY	YEAR	\$
	MO	DAY	YEAR	
Full Name of Contributor Cilento, Peter + Shalevar, Maryam	\$ 	DAY	2017	\$ 150.00
NOM S. Cedar Crest Blvd St. 1	00		TEMN	\$
City Programmy State Zip Code (P) 14 103-		DAY	YEAR	\$
Full Name of Contributor BUSI 1955 Solutions	Mo	DAY	YEAR	\$ 100.00
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H351 Hillary Drive City _ State Zip Code (P)	lue A)			\$
Ermmany PA 18044		DAY	YEAR	\$
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				PAGE TOTAL
Enter Grand Total of Part B on Schedule I, Detailed Su	ımmary Page	, Section	1 2.	\$ 550,00

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.

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Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3. \$\frac{4}{9},455.19\$		Page, Section 3.	\$0,455.19

PAGE 6 OF 12

Reporting Period

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate

John Drucker 4 Cor	MMI	istoner		From _	5/4/22	817 TO 6/9/2617
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Full Name of Contributor Jahn Donel	وع،		30	44	JEAR 2017	\$ 3,000,00
Mailing Address 559 Minur H			MO	DAY		\$
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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.

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SCHEDULE II

PAGE 8 OF 12

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 Peri	
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SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			R	eporting	Period	
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Mailing Address			MO.	DAY	YEAR	\$
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Description of Contribution:	<u>. </u>		_ 	1	L _.	
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Mailing Address			MO.	DAY	YEAR	_
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Description of Contribution:	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	
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Full Name of Contributor			MO.	DAY	YEAR	*
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Description of Contribution:	<u> </u>		<u> </u>	<u> </u>	I	
Full Name of Contributor			MO.	DAY	YEAR	
			140.		1500	\$
Mailing Address	-		Mo	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Description of Contribution:	1			L		
Full Name of Contributor				DAY	YEAR	
THE PARTY OF WALLET IN MESON			MO.	-	IEAN	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	ĐAY	YEAR	\$
Description of Contribution:	1		.	<u> </u>	<u> </u>	
						BACE TOTAL
Enter Grand Total of Part F on School Summary Page, Section 2.	dule II	, In-Kind Contribut	ions De	etailed		PAGE TOTAL \$
· -						

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

John Done Sy & Com	1m/y	Honar		From 5	1/2/20	017 TO 4/9/2017
	نـــــــــــــــــــــــــــــــــــــ	7.0.4		DATE		AMOUNT
Full Name of Contributor			MO.		YEAR	
Malling Address		The state of the s	MO.	DAY	YEAR	s
Сіту	State	Zip Code (Plus 4)	MO		YEAR	*
Employer of Contributor			Occupa	ation		
Employer Mailing Address/Principal Place of Business				iption of Con	ntribution	
		····				
Full Name of Contributor			EMO.	DAY	YEAR	\$
Mailing Address			MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	ESDAVASI	YEAR	\$
Employer of Contributor	<u></u>		Occupa	etion	_	
Employer Mailing Address/Principal Place of Business			Descrip	ption of Con	ntribution	
Full Name of Contributor			MO.	DAY	EY FAN	\$
Mailing Address			24.7.7.7.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MQ.	DAY	YEAR	\$
Employer of Contributor			Occupat	ition	<u></u>	
Employer Mailing Address/Principal Place of Business			Descrip	ption of Con	itribution	
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			NO.	DAY	YEAR	\$
	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer of Contributor			Occupat	tion		
Employer Mailing Address/Principal Place of Business			Descrip	ption of Cont	tribution	
Full Name of Contributor			MC.		YEAR !	\$
Mailing Address			Mo.	DAY	EV-A:	
City	State	Zip Code (Plus 4)	MO.	- DAY	YEAR	\$
Employer of Contributor		_	Occupati	tion		\$
Employer Mailing Address/Principal Place of Business			Descrip	otion of Cont	•ribution	
Enter Grand Total of Part G on Schedu Summary Page, Section 3.	ule II,	In-Kind Contribu	tions D	etailed		PAGE TOTAL \$

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate John Donches H Co	mη	1551000LC		eporting From <u>5</u>		017 to 4/9/2017
To Whom Paid County of Letingh		.	МО. 5	DAY 4	YEAR JOI7	Amount \$ / 5 . Ov
Mailing Address 19 5 7th 54			Description		enditure	
Allentown	S'è'	Zip Code (Plus 4)] 		
To Whom Paid Fell EX			MO.	DAY 4	YEAR 2017	Amount \$ 5.52
942 South Shady Grove Ra	L		Description	on of Expe	enditure	
Man phils	State	Zip Code (Plus 4) 38127 -				
To Whom Paid Cold Spark			MO.	DAY §	YEAR	Amount \$ 4,910.38
307 Fourth Aug 14th			Description M A i	on of Expe もから	Poin	1.05
City Pittsburgh	State	Zip Code (Plus 4) 15222-		11		
To Whom Paid Cold Spank Mailing Address			MO.	18	2017	Amount \$ 81.95
30% fourth Aug 14th	F		Description	DEAL		
liftsbungh	State	Zip Code (Plus 4) 15232 –				
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address			Descriptio	n of Expe	nditure	
City	State	Zip Code (Plus 4)				
To Whom Paid	<u> </u>		MO.	DAY	YEAR	Amount
Mailing Address			Descriptio	n of Expe	nditure	\$
City	State	Zip Code (Plus 4)				
To Whom Paid		_	MO.	DAY	YEAR	Amount
Mailing Address			Description	n of Expe	nditure	\$
City	State	Zip Code (Plus 4)				
To Whom Paid	<u> </u>	-	Monte	DAY I	YE SR	Amount
Mailing Address			Description			\$
City	State	Zip Code (Plus 4)				
		_				
Enter Grand Total of Expenditures on Pa	ge 1, i	Report Cover Pa	age, iten	n D.		PAGE TOTAL \$ 5,012,85
			-g-,			→ J, Y(A), 80

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		I	Reporting	Period	1 2	
John Donehas of Commy shion	0.0	ł	From 2	1/3/20	17 to 49/20	17
	21					
Name of Creditor					Outstanding Ralance of	Debt
John Donches					Outstanding Balance of \$ \$000,000	Debt
Mailing Address	DATE	MQ.	DAY	YEAR		
559 Minor St	INCURRED	5	4	2017		
Emmaus		State	Zip Code			
Description of Debt		PA	12049-	-		e green
Loan to PAC						
Name of Creditor				 .	0.44	. 5
					Outstanding Balance of \$	Debt
Mailing Address	DATE	MO.	DAY	YEAR	4	
	DEBT INCURRED					
City		State	Zip Code	(Plus 4)		
Description of Daha				•		
Description of Debt					-	
Name of Creditor					L'Outetendine III	
					Outstanding Balance of \$	Debt
Mailing Address	DATE	MO.	DAY	YEAR		
	DEBT INCURRED	-				4.0
City		State	Zip Code	(Plus 4)		* ******
Description of Pole						
Description of Debt						
Name of Creditor						
					Outstanding Balance of	Debt
Mailing Address	DATE	MO	Toav	VEAR	L \$	
	DEBT	MO.	DAY	YEAR		
Mailing Address City		MO.	BAY Zip Code		\$	
City	DEBT					
	DEBT					
City Description of Debt	DEBT					
City	DEBT				Outstanding Balance of	
City Description of Debt	DEBT	State	Zip Code	(Plus 4)		
City Description of Debt Name of Creditor Mailing Address	DEBT	State		(Plus 4)	Outstanding Balance of	
City Description of Debt Name of Creditor	DEBT INCURRED	State	Zip Code	(Plus 4)	Outstanding Balance of	
City Description of Debt Name of Creditor Mailing Address City	DEBT INCURRED	State	Zip Code	(Plus 4)	Outstanding Balance of	
City Description of Debt Name of Creditor Mailing Address	DEBT INCURRED	State	Zip Code	(Plus 4)	Outstanding Balance of	
City Description of Debt Name of Creditor Mailing Address City	DEBT INCURRED	State	Zip Code	(Plus 4)	Outstanding Balance of \$	Debt
City Description of Debt Name of Creditor Mailing Address City Description of Debt	DEBT INCURRED	State	Zip Code	(Plus 4)	Outstanding Balance of \$ Outstanding Balance of	Debt
City Description of Debt Name of Creditor Mailing Address City Description of Debt	DEBT INCURRED	MO.	Zip Code	(Plus 4) YEAR (Plus 4)	Outstanding Balance of \$	Debt
City Description of Debt Name of Creditor Mailing Address City Description of Debt Name of Creditor Mailing Address	DATE DEBT INCURRED	State	Zip Code	(Plus 4)	Outstanding Balance of \$ Outstanding Balance of	Debt
City Description of Debt Name of Creditor Mailing Address City Description of Debt Name of Creditor	DATE DEBT INCURRED	MO.	Zip Code	(Plus 4) YEAR (Plus 4)	Outstanding Balance of \$ Outstanding Balance of	Debt
City Description of Debt Name of Creditor Mailing Address City Description of Debt Name of Creditor Mailing Address City	DATE DEBT INCURRED	MO. State	Zip Code Zip Code	(Plus 4) YEAR (Plus 4)	Outstanding Balance of \$ Outstanding Balance of	Debt
City Description of Debt Name of Creditor Mailing Address City Description of Debt Name of Creditor Mailing Address	DATE DEBT INCURRED	MO. State	Zip Code Zip Code	(Plus 4) YEAR (Plus 4)	Outstanding Balance of \$ Outstanding Balance of	Debt
City Description of Debt Name of Creditor Mailing Address City Description of Debt Name of Creditor Mailing Address City	DATE DEBT INCURRED	MO. State	Zip Code Zip Code	(Plus 4) YEAR (Plus 4)	Outstanding Balance of \$ Outstanding Balance of \$	Debt
City Description of Debt Name of Creditor Mailing Address City Description of Debt Name of Creditor Mailing Address City Description of Debt	DATE DEBT INCURRED DATE DEBT INCURRED	MO. State	Zip Code Zip Code Zip Code	(Plus 4) YEAR (Plus 4)	Outstanding Balance of \$ Outstanding Balance of \$	Debt
City Description of Debt Name of Creditor Mailing Address City Description of Debt Name of Creditor Mailing Address City	DATE DEBT INCURRED DATE DEBT INCURRED	MO. State	Zip Code Zip Code Zip Code	(Plus 4) YEAR (Plus 4)	Outstanding Balance of \$ Outstanding Balance of \$	Debt