CAMPAIGN FINANCE REPORT

Name:Committee to Elect Glen EckhartAddress:511 East Federal StCity, State, Zip:Allentown PA 18103							
Candidate	e	Committee			X		
Type of R	eport	Election Date	Amend	led	Termination		
2017 – AN	INUAL REPORT						
Terminati	on Report?						
Office Sou	ight By Candida	Party	County	7			
Lehigh County ExecutiveRLehigh							
	Sum	ary of Receipts & Expend	ditures				
From:	11/27/2017	To:	12/3120	017	<u> </u>		
A. Amoun	t Brought Forwa	l From Last Report	1	17.04	1		
B. Total N	Ionetary Contrib	ions & Receipts (from Sch	edule I)	500.00			
C. Total F	unds Available (m of Lines A & B)		517.04			
D. Total E	xpenditures (fro	Schedule III)		20.00)		
E. Ending	Cash Balance (S	otract Line D from Line C)		497.0)4		
F. Value o	f In-Kind Contri	tions Received (from Sche	dule II)	0.00			
G. Unpaid	Debts & Obliga	ns (from Schedule IV)		(-17.	135.77)		

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

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CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing	Committee o	Candidate				Reporting Period	4
Comm	nitlee	to	Elect	Gleww	ÉckharT	From 11 28 1	To 123118

I. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR (1) \$ TOTAL for the Reporting Period

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART & AND PART B)	14 (738) 27 (1997)	
Contributions Received from Political Committees (Part A)	\$	250.00
All Other Contributions (Part B)	\$	250.00
TOTAL for the Reporting Period (2)	\$	500.00

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)	\$

		Reporting Period	(4)	State and a state business		
4. OTHER RECEIPTS - REFUNDS, INT	TEREST EARNE	D, RETURNED CHEC	KS, ETC	. (FRO	M PART E)	

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING	[
	\$	500.00
loxes 1, 2, 3 and 4; also enter this amount on Page 1, Report		500.00
Cover Page, Item B.)		

SCHEDULE I	
	Deserve

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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.

Name of Filing Committee or Candidate				Reporting	Period	_
Committee to Elect	GIE	un Eckh	aut	From 1	1/28/	18 TO 12/31/17
				DATE		AMOUNT
Full Name of Contributing Committee	ROL	<i>we</i>	мо. 12	27	year 17	\$ 250.00
Mailing Address 3320 Hamilton	ß	slud	MO.	DAY	YEAR	\$
City Allostown	State PA	Zip Code (Plus 4) 19103 -	MO.	DAY	YÉAR	\$
Full Name of Contributing Committee	<u> </u>	17105	MO.	DAY	YEAR	Ψ
Mailing Address			MO.		YEAR	\$
						\$
City	State	Zip Code (Plus 4) 	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
Full Name of Contributing Committee		-	MO.	DAY	YEAR	\$
						\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) 	<u>. MO.</u>	DAY	YEAR	\$
Full Name of Contributing Committee			мо.	DAY	YEAR	\$
Mailing Address			MO,	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	-
Full Name of Contributing Committee	L			DAY		\$
	·····		MO.			\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) —	MQ.	DAY	YEAR	\$
Full Name of Contributing Committee	·		MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)				\$
ur,	State	-	MO.		YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO,	DAY	YEAR	\$
City	State	Zip Code (Plus 4) -	MQ.	DAY	YEAR	\$
						PAGE TOTAL
Enter Grand Total of Part A on Sched	ule I, I	Detailed Summ	ary Page	a, Sectio	n 2.	\$ 250.00

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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.)

Name of Filing Committee or Candidate			F	Reporting	Period	
Committee to Elect	GLEN	on Eckhav	T	From _	1/28/(<u> 71 12 31 07 7</u>
				DATE		AMOUNT
Full Name of Contributor	4		MO. IZ		YEAR	\$ 750,00
Mailing Address	<u> </u>		MO.	21 DAY	YEAR	
Mailing Address 970 North 38th	ьÇ	Træt		1		\$
	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
Allentains	X4	13104 -				\$
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	· · · · · · · · · · · · · · · · · · ·
						\$
Cíty	State	Zip Code (Plus 4)	MO.	DAY	YEAR	*
						\$
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	
				1		\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
						\$
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
						\$
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		-				\$
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
						\$
Full Name of Contributor			MO:	DAY	YEAR	\$
Mailing Address		*	MO.	DAY	YEAR	· · · · · · · · · · · · · · · · · · ·
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		-				\$
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	
				1		\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	•
		-		<u> </u>		\$
						PAGE TOTAL
Enter Grand Total of Part B on Sched	ule I, D	etailed Summary	y Page,	Section	ז 2. 🛛	\$ 250.00

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Î	Reporting	Period	
Committee to Elect G	Eur	U Eckh				17 TO 12/31/17
To Whom Paid Citzens for	BRI	DUNE	.om 12	31	YEAR 2017	Amount \$ 20.00
Mailing Address 3320 Hamilton	Blu	id	Ha	tion of Exp	benditure	BREUKEast
Mailing Address 3320 Hamilton City Albertown	PA	zip Code (Plus 4) 1903 -		onatin		
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address			Descrip	tion of Exp	enditure	
City	State	Zip Code (Plus 4) —		·····		· · · · · · · · · · · · · · · · · · ·
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address		* <u>************************************</u>	Descrip	tion of Exp	enditure	L¥
City	State	Zip Code (Plus 4) —				
To Whom Paid	<u> </u>		MO.	DAY	YEAR	Amount
Mailing Address			Descript	tion of Exp	enditure	\$
City	State	Zip Code (Plus 4)				
To Whom Paid			MO.	DAY	YEAR	Amount
Mailing Address			Descript	ion of Exp	enditure	\$
City	State	Zip Code (Plus 4) —				
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address			Descript	ion of Expe	anditure	Ψ
City	State	Zip Code (Plus 4)	1			
To Whom Paid			MO.	DAY	YEAR	Amount
Mailing Address			Descripti	ion of Expe	enditure	\$
City	State	Zip Code (Plus 4)	-	<u></u>		
To Whom Paid			MO	DAY	YEAR	Amount
Mailing Address	,		Descripti	on of Expe	nditure	\$
City	State	Zip Code (Plus 4)	1		<u> </u>	
			1			PAGE TOTAL
Enter Grand Total of Expenditures on Pag	je 1 , R	eport Cover F	'age, Ite	em D.		\$ 20.00

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SCHEDULE IV SCHEDULE IV 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 Committee to Elect		Reporting Period	17 TO 12131/17
Name of Creditor GIEWW Eckhav	XT.		Outstanding Balance of Deb \$ (7;いろり、77
Sity Allenton	A ST DATE DEBT INCURRED	MO. DAY VEAR 12 31 201 State Zip Code (Plus 4 PA 18103	7
Campairing 6	oaws	0	
Name of Creditor			Outstanding Balance of Del
Aailing Address Sity	DATE DEBT INCURRED	MO. DAY YEAR State Zip Code (Plus 4	
Description of Debt	· · · · · · · · · · · · · · · · · · ·		
lame of Creditor			Outstanding Balance of De
Nailing Address	DATE DEBT	MO. DAY YEAR	
ity	INCURRED	State Zip Code (Plus 4	7
Description of Debt		I	
ame of Creditor			Outstanding Balance of De \$
Nailing Address ity	DATE DEBT INCURRED	MO. DAY YEAR State Zip Code (Plus 4	
Description of Debt			
ame of Creditor			Outstanding Balance of De
Mailing Address	DATE	MO. DAY YEAR	\$
lity	DEBT INCURRED	State Zip Code (Plus 4	
Description of Debt			
lame of Creditor			Outstanding Balance of De
Nailing Address	DATE DEBT	MO. DAY YEAR	\$
Sity	INCURRED	State Zip Code (Plus 4	5
escription of Debt			
			PAGE TOTAL
nter Grand Total of Unpaid Debts of	n Page 1, Report Cove	r Page, Item G.	\$ 17,135.77