CAMPAIGN FINANCE REPORT

	·					
Name:		Citizens to Elect Brad Osborne				
Address:	7:	1460 Coventry Rd				
City, State	e, Zip:	Allentown PA 18104				
Candidate	•	Committee			X	
Type of R	eport	Election Date	e Amended		Termination	
2017 – AN	NUAL REPORT					
Terminati	on Report?					
Office Sou	ight By Candidat	Party	County	nty		
Lehigh Co	ounty Executive	R	Lehigh	Lehigh		
	Sum	ary of Receipts & Expen	ditures			
From:	11/28/2017	To:	12/3120	12/312017		
A. Amount Brought Forward From Last Report				2,044.70		
B. Total Monetary Contributions & Receipts (from Schedule I)					33,600.00	
C. Total Funds Available (Sum of Lines A & B)				35,644.70		
D. Total Expenditures (from Schedule III)				35,521.50		
E. Ending Cash Balance (Subtract Line D from Line C)				123.20		
F. Value of In-Kind Contributions Received (from Schedule II)				0.00		
		ns (from Schedule IV)		/ 11	0,150.00)	

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

SCHEDULE I Contributions and Receipts

Detailed Summary Page

Filer Identification Number

1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor	6 3999	
Total for the reporting period	(1)	\$ 0.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B).		
Contributions Received from Political Committees (Part A)		\$ 0.00
All Other Contributions (Part B)		\$ 0.00
Total for the reporting period	(2)	\$ 0.00
3. Contributions Over \$250.00 (From Part C and Part D)		
Contributions Received from Political Committees (Part C)		\$ 0.00
All Other Contributions (Part D)		\$ 33,600.00
Total for the reporting period	(3)	\$ 33,600.00
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)		
Total for the reporting period	(4)	\$ 0.00
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, Rep Cover Page, Item B)	port	\$ 33,600.00

PART D All Other Contributions

Over \$250.00

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

(Exclude contributions from political committees reported in Part C)

Filer Identification Number:				
	-			······
Full Name of Contributor			Date [MM/DD/YYY] \$	
Brad C	Osborne		12/04/2017	33,600.00
House # 1460 Street Address	Coventry Roa		Date [MM/DD/YYYY] \$	
Allentown	State PA	Zip Code 18104	Date [MM/DD/YYYY] \$	
Employer Name	Retired		Occupation	
Employer Mailing Address / Principal Place of Business				
Full Name of Contributor	<u> </u>		Date [MM/DD/YYYY] \$	
House # Street Address			Date [MM/DD/YYYY] S	
City	State	Zlp Code	Date [MM/DD/YYY] \$	
Employer Name			Occupation	•
Employer Mailing Address / Principal Place of Business				
Full Name of Contributor			Date (MM/DD/YYYY) \$	
House # Street Address			Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYY] \$	
Employer Name			Occupation	
Employer Mailing Address / Principal Place of Business				
Full Name of Contributor			Date [MM/DD/YYYY] S	
House # Street Address	Entropy of the second se		Date [MM/DD/YYYY] \$	
City	State	Zip Code	Date [MM/DD/YYYY] \$	
Employer Name			Occupation	
Employer Mailing Address / Principal Place of Business				

SCHEDULE III Statement of Expenditures

.

Filer Identif	Reation Number:					
To Whom					Date [MM/DD/YYYY] \$	
		n Concepts, LLC	·		12/05/2017	35,396.50
House #	2906 Street Address	William Penn H	·		Description of Expenditure	
City	Easton	State PA	Zip Code	18045	Marketing Expense.	
To Whom		Buck, & Oswald, Ll	LC		Date [MM/DD/YYYY] \$	405.00
House #	2571 Street Address	Baglyos Circle, S	-		Description of Expenditure	125.00
City	Bethlehem	State PA	Zip	18020	Accounting Fee.	
To Whom			COUR		Date [MM/DD/YYYY] \$	
House #	Street Address				Description of Expenditure	
City		State	Zip		やくなる時間です	
			Code		Date [MM/DD/YYYY] S	
To Whom	Paid					
House #	Street Address				Description of Expenditure	
City	K	State	Zip Code			
To Whom	Paid				Date [MM/DD/YYYY] \$	
House #	Street Address		tt		Description of Expenditure	
City		State	Zip Code			
To Whom	Paid g		code		Date [MM/DD/YYY] \$	
House #	Street Address				Description of Expenditure	-
City	Chick Provide State	State	Zip			
- Statester			Code		Date [MM/DD/YYY] \$	
To Whom	Palo					
House #	Street Address	-			Description of Expenditure	enter de la constance de la const La constance de la constance de
City		State	Zip Code			
To Whom	Paid				Date [MM/DD/YYYY] \$	
House #	Street Address				Description of Expenditure	
City	and the second second	State	Zip Code			

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.

File: Identification Number:	
Name of Creditor	Brad Osborne Outstanding Balance of Debt
House # 1460 Stree	DATE DEBT INCURRED \$ Coventry Road [MM/DD/YYYY] 11/1/2017 110,150.00
Description of Debt	Loan to Committee.
Name of Creditor House # Stree	Outstanding Balance of Debt Address DATE DEBT INCURRED \$ [MM/DD/YYYY]
City Description of Debt	State Zipm Code
Name of Creditor	Outstanding Balance of Debt
House # Stree	Address DATE DEBT INCURRED \$ [MM/DD/YYYY] State Zip
Description of Debt	Code Outstanding Balance of Debt
	t Address DATE DEBT, INCURRED \$ [MM/DD/YYYY]
City Description of Debt	State Zip Code
	Address DATE DEBT INCURRED [MM/DD/YYYY]
City Description of Debt	State Zip Code
	Address DATE DEBT INCURRED [MM/DD/YYYY] \$
City Description of Debt	State Zip Code