	CA	MPAIGN F	INANCE REP	ORT		
Name:		Committee	to Elect Percy Do	ugherty		
Address:		5726 Sandt	-			
City, State, Zi	p:	Allentown I	own PA 18106			
Candidate			Committee			X
Type of Repo	ort	<u> </u>	Election Date	Amended		Termination
2017 – ANNU	JAL REPORT			:		
Termination	Report?					
Office Sough	t By Candidate	e	Party	County		
Lehigh County Commissioner Dist #2		er Dist #2	R	Lehigh	<u>. </u>	
-	Sumr	nary of Rec	eipts & Expend	litures	- · · · · ·	
From:	12/07/2017		To:	12/31/2017		
				X		
A. Amount B	rought Forwa	rd From Las	st Report		4,89	<i>3.88</i>
B. Total Monetary Contributions & Receipts (from Schedule I)					0.11	
C. Total Funds Available (Sum of Lines A & B)					4,893.99	
D. Total Expenditures (from Schedule III)				3,026.02		
E. Ending Cash Balance (Subtract Line D from Line C)				1,864.97		
F. Value of In-Kind Contributions Received (from Schedule II)				0.00		
G. Unpaid Debts & Obligations (from Schedule IV)					(-3,400.00)	

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

SCHEDULE I

PAGE 2 OF

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Peri	/1/17 to 1/31/18
	e para de la composición dela composición de la composición dela composición del composición de la composición de la composición del composición de la composición de la composición del composición d	
TOTAL for the Reporting Period	d (1)	\$
Contributions Received from Political Committees (Part A)		\$
All Other Contributions (Part B)		s
TOTAL for the Reporting Period	d (2)	\$
Contributions Received from Political Committees (Part C)		\$
All Other Contributions (Part D)		S
TOTAL for the Reporting Period	d (3)	\$
TOTAL for the Reporting Period	d (4)	\$ 0-11
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 8.)		\$ 0.11

PAGE	(OF

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				From 12/07	1/17 to 1/31/18
Puray DAUGHERTY				Prom <u>- 70 1</u>	
					Amount
To Whom Paid (KOO! DALLOW KOTY			F	12 30 17 Description of Expenditure	\$1529.02
Mailing Address 5726 Soundtrag bow	-			Description of Expanditure OFFICE Mottu	al Postage Mouling
allestown	State AX)	Zip Code P	us 4)		•
		1 0 1 2		语 10	Amount 00
To Whom Paid ASAPMAILING Mailing Address O				Description of Expenditure	SISOD OO EXPENSE
6473 KUCH KOAD	State	Zip Code (P	1us 4)	MAILING	e office
Mailing Address G473 RUCH FOAD City BRTHLEHEM	PA	1804			Amount
To Whom Peld					\$
Mailing Address				Description of Expenditure	
City	State	Zip Code (F	(iue 4)		
To Whom Paid				The same of the sa	Amount
Mailing Address	<u></u>	<u>, , , , , , , , , , , , , , , , , , , </u>		Description of Expanditur	
	1.6	Zip Code (F	11: A1		
City	State	219 0000 0	-		
To Whom Paid					Amount
Mailing Address				Description of Expenditur	· .
City	State	Zip Code (Plus 44		
To Whom Peld					Amount
Malling Address				Description of Expenditur	
city	State	Zip Code 8	Plus 4)		
To Whom Paid		<u> </u>		<u> </u>	Amount
Mailing Address				Description of Expenditur	. 15
•					
CITY	State	Zip Code (Plus 4)		
To Whom Feld					Amount \$
Mailing Address				Description of Expenditu	70
City	State	Zip Code	Plus 4		
		Dancer C		ace Item D	* 3029.02
Enter Grand Total of Expenditures on	rage 1,	Report Co	over P	aga, Itam D.	30000

PAGE	OF _	

Charles a Carlo Con Charles and Charles an

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		P	eporting 1	erioa 2/07/	2017 to 1/31/2018
Lucy of Daugherty			From		721/00
					Outstanding Balance of Debt
Merrie of Creditor Purpy Doughuty Melling Address 572C Sandtrap dune City Western of Dahi Description of Dahi Company of Dahi City City					\$ 2000.00
Melling Address	DATE DEBT	36.34			
5726 Sandtrag All	INCURRED	State	Zip Code		
Musiosville		PA	18/0	<u></u>	
NEBCLIDITOR AL ALLA.					
LOAN Name of Creditor					Outstanding Belance of Debt \$ 1400.00
Puray lougner	DATE			ويوارون والمالية	
Walling Address 52 Sand trap bour	DEBT	2.00		2009	
Tity Start S		State	Zip Code	Plus 4)	
Healing Address Sandthap Son Sty Aus rosulle		PH	101	uo_	
Description of Debt					Outstanding Balance of Debi
Name of Creditor					S
Mailing Address	DATE	2003			
	INCURRED	State	Zip Code	(Plus 4)	
City			_		
Description of Debt					
Name of Creditor					Outstanding Balance of Deb
				and the second	\$
Mailing Address	DATE DEBT INCURRED	200			
Sity		State	Zip Code	(Plus 4)	
Description of Debt					1. And the second second second second
Name of Creditor					Outstanding Balance of Deb \$
Meiling Address	DATE	53.57			
	INCURRED	State	Zip Code	(Plus 4)	
City					
Description of Debt					
Name of Creditor					Outstanding Balance of Deb
		An Andrew		rarara kind	\$
Mailing Address	DATE DEBT INCURRED	22.00	00.9460		
City	INCORRED	State	Zip Code	(Plus 4)	
Description of Debt					
Pessellhini at sest					
					\$ 3400.00
Enter Grand Total of Unpaid Debts on Page 1, I	Report Cove	r Page,	item G.		340.5