	CAMPAIGN F	INANCE REP	ORT			
Name an	d Address of Fi	ling Candidate	or Com	mitte	e	
Name: Address: Stephen P. Walters for County Commissioner 1517 Beverly Hills Rd City, State, Zip: Coopersburg PA 18036 Report Filed By						
Candidate		Committee			X	
Type of Report 2 <sup>nd</sup> Frid	day Pre-Primary	Telection Date Amended Telection Date 05/21/2013		Termination		
Office Sought By Candidate Party County						
Lehigh County Commissioner Dist #5		D	Lehigh			
S	ummary of Rec	eipts & Expend	litures			
From: 03/12/20	From: 03/12/2013 To: 05/06/2013					
A. Amount Brought Forward From Last Report				0.00		
B. Total Monetary Contributions & Receipts (from Schedule I)				1,286.38		
C. Total Funds Available (Sum of Lines A & B)				1,286.38		
D. Total Expenditures (from Schedule III)				1,012.61		
E. Ending Cash Balance (Subtract Line D from Line C) (-273.77)				3.77)		
F. Value of In-Kind Contributions Received (from Schedule II)				0.00		
G. Unpaid Debts & Obligations (from Schedule IV)  286.38					38	

<sup>\*</sup>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			eporting Period			
Stephen P. Walters		From 0/	-20/3 TO05-06-20/3			
1. UNITEMIZED CONTRIBUTIONS A	NO RECEIPTS - \$50.00 OR LESS	PER CONT	BIRLITOR			
I. ORTEWIZED CONTRIBOTIONS A	TOTAL for the Reporting Period					
	0.00 (FROM PART A AND PART	R)	n 16 (16, 20) (16 16 46 15 15 16 16 16 16 16 1			
Contributions Received from Politica	l Committees (Part A)		\$			
All Other Contributions (Part B)			\$			
	TOTAL for the Reporting Period	d (2)	\$			
3. CONTRIBUTIONS OVER \$250.00  Contributions Received from Politica  All Other Contributions (Part D)			\$ 1,000 \$ 286.38 \$1,386,38			
	TOTAL for the Reporting Perio	d (3)	\$1,286.38			
4. OTHER RECEIPTS - REFUNDS, I	INTEREST EARNED, RETURNED C	HECKS, ET(	C. (FROM PART E)			
	TOTAL for the Reporting Perio	d (4)	\$			
TOTAL MONETARY CONTRIBUTION THIS REPORTING PERIOD (Add and Boxes 1, 2, 3 and 4; also enter th Cover Page, Item B.)	enter amount totals from		\$			

#### 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.

Name of Filing Committee or Candidate			R	eporting		
Stephen P. Walters				From 🛭	1-01-2	013 1856-2013
				DATE		AMOUNT
Full Name of Contributing Committee	/ .	T. Fun	MO.	JAY	YEAR	\$ /
I.U.O.E. LOCAL 542 Politi	cas a	clion FUND	03 MO.	DAY	2013 YEAR	\$1,000
1375 ViRGinia Dr. Suite 100	,					\$
1375 ViRGinia Dr. suite 100 Fort Washinston	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
	PA	19034 -	MO.	DAY	YEAR	
Full Name of Contributing Committee			IVIO.		I CAN	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	140	DAY	VEAD	
City	3.0.0		MO.	DAY	YEAR	\$
Full Name of Contributing Committee	<u> </u>		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			<del>                                     </del>	DAY	VEAR	<b>.</b>
Marring Accress			MO.	DAT	YEAR	\$
City	State	Žip Code (Plus 4)	MO.	DAY	YEAR	<u>.</u>
		-				\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	*
	T 6					\$
City	State	Zip Code (Plus 4) —	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	<u> </u>		MO.	DAY	YEAR	
·						<b>\$</b>
Mailing Address			MO.	DAY	YEAR	s
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		-				<b>1</b> \$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			1	DAY	VEAD	3
Walling 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)	MO.	DAY	YEAR	\$
	<u> </u>	-		<u> </u>		PAGE TOTAL
Finan Count Tatal of D. ( O as O )	.dl = -	Datation of Control	D	0	<b>^</b>	
Enter Grand Total of Part C on Schee	aule I,	, Detailed Summar	y Page,	Sectio	n 3.	\$1,000

PAGE	OI	F

#### SCHEDULE III

# STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			R	Reporting		
STephen P. Walte	715			From <u>Ø</u> /	1-01-20	0/3 To 05-06-20/3
To Whom Paid			MO.	DAY		Amount \$900.00
JUDE Denis Mailing Address			O3 Description	on of Evn	nondituro	\$900.00
40 witman Dr			PANN	ient f	ST CM	mpaign manager
	State	Zip Code (Plus 4)	11.	<u> </u>	<u></u>	Start
Breiniasville	PA	18031-				
To Whom Paid			MO.	DAY	YEAR	Amount
Wad-marT Mailing Address			Descripti	26 ion of Exp	20/5	\$/2.4/
195 N. West end BLUD.						cicoTBOOK,
0,11,	State	Zip Code (Plus 4)		•	•	ich book
QuackerTown	PA	18951 -	INDE	ex car		
lo Whom Paid			MO.	DAY	YEAR	Amount
County of Lehigh Mailing Address 17 5. 7 Th City			03 Description	12 ion of Exp	2015	\$/00.00
17 5.77				•-	·_	in fee
•	State	Zip Code (Plus 4)	+	9-	illu-	7.00
allentown	PA					
To Whom Paid			MO.	DAY	YEAR	Amount
Mailing Address		****	Doscripti	ion of Expe	-ditura	\$
Menning Address			Descripe	ON OI EAF.	endituie	
City	State	Zip Code (Plus 4)	+		-	
To Whom Paid			MO.	DAY	YEAR	Amount
Mailing Address			<u></u>	( 500		\$
Mailing Address			Description	on of Expe	enditure	
City	State	Zip Code (Plus 4)	+		-	
To Whom Paid			MO.	DAY	YEAR	Amount
Mailing Address		-				\$
Mailing Address		•	Description	on of Expe	enditure	
City	State	Zip Code (Plus 4)	+			
To Whom Paid			MO.	DAY	YEAR	Amount
						\$
Mailing Address		<del></del>	Description	on of Expe	enditure	
City	State	Zip Code (Plus 4)	+			
To Whom Paid			MO.	DAY	YE AR	Amount
						\$
Mailing Address			Descriptio	on of Expe	enditure	
City	State	Zip Code (Plus 4)	<b></b>			
					<del></del>	PAGE TOTAL
Enter Grand Total of Expenditu	uras on Page 1. F	Penart Cover P	'ana Ite	n	7	
willow of the contraction of the	Ales on rege ., .,	eboir coser is	age, ite	M D.	7	\$/1/2.6/

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# 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	
Stephen P. Wasters					2013 To 05-06-2013
Name of Creditor					Outstanding Balance of Debt
STroken P. Walters Mailing Address					\$25 00 Salance of Debt
	DATE DEBT	MO.	DAY	YEAR	
1517 Beverly Lills RD	INCURRED	State	Zip Code	(Plus 4)	
Confers Burle		PA	18036	_	
bescription of best	Sa cainita sac				Dist. 5
Ofening a checking account 1	TOP CANNIFIE FOI	LCN. 9	1 COUL	1/4 C	Omm.'Ss.'onr  Outstanding Balance of Debt
STophen P. Walters Mailing Address		·			\$5.00
	DATE DEBT	MO. Oス	DAY	YEAR	
ISIT Beverly hills RD	INCURRED	State	Zip Code		
Coopers Burb PA		PA	18036	-	
Name of Creditor  Stephen P. Walters  Mailing Address					
Name of Creditor					Outstanding Balance of Debt
STYPHEN . Waltris	LDATE	T 10.23		-	\$ <i>256.38</i>
Walling Addicas	DATE DEBT INCURRED	MO. <b></b>	DAY 25	20/3	
City	INCORNED	State	Zip Code		
Description of Debt			-	•	
Evel, Fool, copies					
Name of Creditor					Outstanding Balance of Debt
Mailing Address					\$
Mailing Address	DATE DEBT	MO.	DAY	YEAR	
City	INCURRED	State	Zip Code	(Plus 4)	
Description of Debt			-		
Description of Dept					
Name of Creditor					Outstanding Balance of Debt
Mailing Address		·			\$
Matting Address	DATE DEBT	MO.	DAY	YEAR	
City	INCURRED	State	Zip Code	(Plus 4)	
			_		
Description of Debt					
Name of Creditor					Outstanding Balance of Debt
Mailing Address					\$
Mailing Address	DATE DEBT	MO.	DAY	YEAR	
City	INCURRED	State	Zip Code	(Plus 4)	: 119 (1) : 12 (1) :
Description of Data					
Description of Debt					
					DAOC WOWAL
Enter Grand Total of Unpaid Debts on	n Page 1 Report Cover P	ene It	em G		PAGE TOTAL
	I lage i, hepott cover i	age, it	em G.		\$

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