

CAMPAIGN FINANCE REPORT				
Name and Address of Filing Candidate or Committee				
Name:		<i>Choose Scott Aquila</i>		
Address:		<i>6707 Mink Rd</i>		
City, State, Zip:		<i>Macungie PA 18062</i>		
Report Filed By				
Candidate		Committee	<i>X</i>	
Type of Report <i>2nd Friday Pre-Primary</i>		Election Date	Amended	Termination
		<i>05/21/2013</i>		
Office Sought By Candidate		Party	County	
<i>Lehigh County Commissioner Dist #2</i>		<i>R</i>	<i>Lehigh</i>	
Summary of Receipts & Expenditures				
From:	<i>02/19/2013</i>	To:	<i>05/06/2013</i>	
A. Amount Brought Forward From Last Report			<i>0.00</i>	
B. Total Monetary Contributions & Receipts (from Schedule I)			<i>5,985.00</i>	
C. Total Funds Available (Sum of Lines A & B)			<i>5,985.00</i>	
D. Total Expenditures (from Schedule III)			<i>5,556.39</i>	
E. Ending Cash Balance (Subtract Line D from Line C)			<i>428.61</i>	
F. Value of In-Kind Contributions Received (from Schedule II)			<i>2,250.00</i>	
G. Unpaid Debts & Obligations (from Schedule IV)			<i>0.00</i>	

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

CONTRIBUTIONS AND RECEIPTS**Detailed Summary Page**

Name of Filing Committee or Candidate CHOOSE SCOTT AQUILA	Reporting Period From 02/19/2013 To 05/06/2013
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the Reporting Period		(1) \$ 235.00

2. CONTRIBUTIONS \$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)		\$ 250.00
TOTAL for the Reporting Period		(2) \$ 250.00

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)		\$ 5,500.00
TOTAL for the Reporting Period		(3) \$ 5,500.00

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)		
TOTAL for the Reporting Period		(4) \$ -

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.)	\$ 5,985.00
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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 CHOOSE SCOTT AQUILA	Reporting Period From 02/19/2013 To 05/06/2013
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				DATE			AMOUNT
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)		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)		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)		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)		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	\$
		-					

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL

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PART B
ALL OTHER CONTRIBUTIONS

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\$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 <u>CHOOSE SCOTT AQUILA</u>	Reporting Period From <u>02/19/2013</u> To <u>08/06/2013</u>
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				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributor <u>SCOTT AQUILA</u>				<u>02</u>	<u>19</u>	<u>2013</u>	<u>\$ 250.00</u>
Mailing Address <u>6707 MINK ROAD</u>				MO.	DAY	YEAR	\$
City <u>MACUNGIE</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18062-9495</u>		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	\$
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	\$

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL
\$ 250.00

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.

Name of Filing Committee or Candidate <u>CHOOSE SCOTT AQUILA</u>	Reporting Period From <u>02/19/2013</u> To <u>09/06/2013</u>
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				DATE			AMOUNT
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)	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)	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)	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)	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	\$
							\$

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$

PART D
ALL OTHER CONTRIBUTIONS

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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 <u>CHOOSE SCOTT AQUILA</u>	Reporting Period From <u>02/19/2013</u> To <u>05/06/2013</u>
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			DATE			AMOUNT
MO.	DAY	YEAR				
Full Name of Contributor <u>SCOTT AQUILA</u>			<u>04</u>	<u>26</u>	<u>2013</u>	\$ <u>500.00</u>
Mailing Address <u>6707 MINK ROAD</u>			MO.	DAY	YEAR	\$
City <u>MACUNGIE</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18062-9495</u>	MO.	DAY	YEAR	\$
Employer Name <u>LEHIGH CARBON COMMUNITY COLLEGE</u>			Occupation <u>DEAN</u>			
Employer Mailing Address/Principal Place of Business <u>4525 EDUCATION PARK DR, SCHNECKSVILLE, PA 18078</u>						

Full Name of Contributor <u>LISA J. SCHELLER</u>			<u>03</u>	<u>01</u>	<u>2013</u>	\$ <u>2,500.00</u>
Mailing Address <u>751 BENNER ROAD</u>			MO.	DAY	YEAR	\$
City <u>ALLENTOWN</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18104 -</u>	MO.	DAY	YEAR	\$
Employer Name <u>SILBERLINE MANUFACTURING CO.</u>			Occupation <u>CEO</u>			
Employer Mailing Address/Principal Place of Business <u>130 LINCOLN DRIVE, TAMAQUA, PA 18252</u>						

Full Name of Contributor <u>ELMER W. HEINEL</u>			<u>03</u>	<u>15</u>	<u>2013</u>	\$ <u>2,500.00</u>
Mailing Address <u>9 PROSPECT HILL AVE</u>			MO.	DAY	YEAR	\$
City <u>SUMMIT</u>	State <u>NJ</u>	Zip Code (Plus 4) <u>07901 -</u>	MO.	DAY	YEAR	\$
Employer Name <u>SELF-EMPLOYED</u>			Occupation <u>SELF-EMPLOYED</u>			
Employer Mailing Address/Principal Place of Business <u>9 PROSPECT HILL AVE, SUMMIT, NJ 07901</u>						

Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business						

Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business						

Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL

\$ 5,500.00

**PART E
OTHER RECEIPTS**

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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.

Name of Filing Committee or Candidate <u>CHOOSE SCOTT AQUILA</u>	Reporting Period From <u>02/19/2013</u> To <u>05/06/2013</u>
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Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
<u>N/A</u>		-				\$
Receipt Description						
Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						
Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						
Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						
Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						
Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.	PAGE TOTAL
	\$

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

Name of Filing Committee or Candidate <u>CHOOSE SCOTT AQUILA</u>	Reporting Period From <u>02/19/2013</u> To <u>05/06/2013</u>
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ <u> </u>

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ <u> </u>

3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$ <u>2,250.00</u>

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)	\$ <u>2,250.00</u>
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**SCHEDULE II
PART F**

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IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate <u>CHOOSE SCOTT AQUILA</u>	Reporting Period From <u>02/19/2013</u> To <u>05/06/2013</u>
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				DATE			AMOUNT
				MO.	DAY	YEAR	\$
Full Name of Contributor							\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL
\$

PART G

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate CHOOSE SCOTT AQUILA	Reporting Period From 02/19/2013 To 05/06/2013
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				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributor VOTE SCOTT OTT				04	01	2013	\$ 2,250.00
Mailing Address 1230 MAHOOD ROAD				05	21	2013	\$ COVERS PERIOD BETWEEN DATES
City WEST SUNBURY	State PA	Zip Code (Plus 4) 16061 -					\$
Employer of Contributor SELF EMPLOYED				Occupation CONSULTING			
Employer Mailing Address/Principal Place of Business 1230 MAHOOD ROAD; WEST SUNBURY, PA 16061				Description of Contribution CONSULTING SERVICES OF KIAL VIKK			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

PAGE TOTAL

\$ 2,250.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <u>CHOOSE SCOTT AQUILA</u>	Reporting Period From <u>02/19/2013</u> To <u>05/06/2013</u>
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To Whom Paid <u>COMMUNICATION CONCEPTS</u>	MO. <u>03</u>	DAY <u>26</u>	YEAR <u>2013</u>	Amount \$ <u>781.22</u>
Mailing Address <u>2906 WILLIAM PENN HWY</u>		Description of Expenditure <u>PALM CARDS</u>		
City <u>EASTON</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18045-</u>		
<hr/>				
To Whom Paid <u>COMMUNICATION CONCEPTS</u>	MO. <u>04</u>	DAY <u>05</u>	YEAR <u>2013</u>	Amount \$ <u>1,200.00</u>
Mailing Address <u>2906 WILLIAM PENN HWY</u>		Description of Expenditure <u>ID CALLS</u>		
City <u>EASTON</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18045-</u>		
<hr/>				
To Whom Paid <u>CAPITOL PROMOTIONS</u>	MO. <u>04</u>	DAY <u>05</u>	YEAR <u>2013</u>	Amount \$ <u>1,090.74</u>
Mailing Address <u>PO BOX 231</u>		Description of Expenditure <u>YARD SIGNS</u>		
City <u>GLENSIDE</u>	State <u>PA</u>	Zip Code (Plus 4) <u>19038-</u>		
<hr/>				
To Whom Paid <u>COMMUNICATION CONCEPTS</u>	MO. <u>04</u>	DAY <u>23</u>	YEAR <u>2013</u>	Amount \$ <u>2,304.60</u>
Mailing Address <u>2906 WILLIAM PENN HWY</u>		Description of Expenditure <u>CARD MAILING</u>		
City <u>EASTON</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18045-</u>		
<hr/>				
To Whom Paid <u>COMMUNICATION CONCEPTS</u>	MO. <u>04</u>	DAY <u>23</u>	YEAR <u>2013</u>	Amount \$ <u>179.83</u>
Mailing Address <u>2906 WILLIAM PENN HWY</u>		Description of Expenditure <u>AUTOMATED CALL</u>		
City <u>EASTON</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18045-</u>		
<hr/>				
To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
<hr/>				
To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
<hr/>				
To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
<hr/>				

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$ 5,556.39

SCHEDULE IV
STATEMENT OF UNPAID DEBTS

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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 <u>CHOOSE SCOTT AQUILA</u>	Reporting Period From <u>02/19/2013</u> To <u>05/06/2013</u>
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Name of Creditor					Outstanding Balance of Debt \$	
Mailing Address			DATE DEBT INCURRED	MO.	DAY	YEAR
City			State	Zip Code (Plus 4)		
Description of Debt						
Name of Creditor					Outstanding Balance of Debt \$	
Mailing Address			DATE DEBT INCURRED	MO.	DAY	YEAR
City			State	Zip Code (Plus 4)		
Description of Debt						
Name of Creditor					Outstanding Balance of Debt \$	
Mailing Address			DATE DEBT INCURRED	MO.	DAY	YEAR
City			State	Zip Code (Plus 4)		
Description of Debt						
Name of Creditor					Outstanding Balance of Debt \$	
Mailing Address			DATE DEBT INCURRED	MO.	DAY	YEAR
City			State	Zip Code (Plus 4)		
Description of Debt						
Name of Creditor					Outstanding Balance of Debt \$	
Mailing Address			DATE DEBT INCURRED	MO.	DAY	YEAR
City			State	Zip Code (Plus 4)		
Description of Debt						
Name of Creditor					Outstanding Balance of Debt \$	
Mailing Address			DATE DEBT INCURRED	MO.	DAY	YEAR
City			State	Zip Code (Plus 4)		
Description of Debt						

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

PAGE TOTAL
\$