### CAMPAIGN FINANCE REPORT Name and Address of Filing Candidate or Committee Friends of Mike Schware Name: Address: PO Box 4464 Allentown Pa 18105 City, State, Zip: Report Filed By Candidate Committee X**Type of Report** 2<sup>nd</sup>Friday Pre-Primary **Election Date** Amended Termination 05/21/2013 Office Sought By Candidate County **Party** Lehigh County Commissioner Dist #5 R Lehigh **Summary of Receipts & Expenditures** 01/01/2013 05/06/2013 To: From: A. Amount Brought Forward From Last Report 0.00 B. Total Monetary Contributions & Receipts (from Schedule I) 8,950.01 C. Total Funds Available (Sum of Lines A & B) 8,950.01 D. Total Expenditures (from Schedule III) 5,125.07 E. Ending Cash Balance (Subtract Line D from Line C) 3,824.94 F. Value of In-Kind Contributions Received (from Schedule II) 2,250.00 0.00 G. Unpaid Debts & Obligations (from Schedule IV)

<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	Reporting Period
FRIENDS OF MIKE SCHWARE	From 1/1/13 To 5/6/15

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$80,00 OR LESS PER C	ONT	AIBL	TO Production of the second
TOTAL for the Reporting Period	(1)	\$	150.01

2 CONTRIBUTIONS \$50.01 TO \$250.00 FROM PART A AND PART B	ne comercia	
Contributions Received from Political Committees (Part A)	\$	500.00
All Other Contributions (Part B)	\$	300.00
TOTAL for the Reporting Period	2) \$	800,00

CONTRIBUTIONS TOVER \$250,00 THOM PART CLAND PART D)	1) Marie Mar
Contributions Received from Political Committees (Part C)	\$
All Other Contributions (Part D)	\$ 8,000.00
TOTAL for the Reporting Period (3	\$ 8,000.00

LEON BROSSERS PERMOSENDANIS PARADER VIRGORIAN	. Erc	FOR OUT OF THE PARTY OF
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.)	\$ 8,950.01
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Reporting Period

### PART A

## 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

FRIENDS OF MIKE SCI	NAW	L€		From _	11./12	To 56112
				DATE		AMOUNT
Full Name of Contributing Committee	n	0544		DAY		
CHARLIE DENT FOR (	200	K\$ 77	MO.	30	13 YEAR	\$ 250.00
P.O. BOX 442			MO	and the same same same same same same same sam		\$
ALLENTOWN	PA	21p Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	-
FRIENDS OF CARY D	MY		4	2>	13	\$ 2.50.00
· ·			MO.	DAY	YEAR	\$
City 5934 MEMORIAN RO	State	Zip Code (Plus 4)	MO.	DAY	YEAR	_
Germanwille	PA	18053 -2404	HIU	andreas / A. R. cristical	TEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	*
Mailing Address			Mo.	DAY	YEAR	\$
City						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO	DAY	YEKE	4
Mailing Address						\$
manning 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	I Carre I					\$
ony	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.	ĐAY	YEAR	
5-W M		-				\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO,=	- DAY	YEAR	
City	State	Zip Code (Plus 4)				\$
·	State	- Lib Code (Fids 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			- MOTT		EVE AT THE	_
Mailing Address			<sup>⊥</sup> ∞MO.	DAY	YEAR	\$
City	1 64-2- *					\$
	State	Zip Code (Plus 4)	MO.	DAY		\$
Enter Crand Takel of Day of Care						PAGE TOTAL
Enter Grand Total of Part A on Sched	dule i,	Detailed Summary	Page,	Section	1 2.	\$ 500.00
CED_802 /7-00\						

## 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			R	eporting	Period	
FRIENDS OF MIKE	SCHL	ara A ara				то <u>5/4/13</u>
Full Name of Contributor				DATE		AMOUNT
GAEL P. COFFIN	***************************************		3	13	13	\$ 100.00
8778 Humminesica	Ros	<b>A</b> D	No.	DAY	YEAR	\$
Kempma	State	Zip Code (Plus 4) 19529 -	MO.	DAY	YEAR	\$
Full Name of Contributor RONALS + 15886 Lon	٠,		- MO. ∷ el	B	-YEAR	\$ 100.00
Mailing Address 425 Robin Road			MO.	DAY:		\$
ALLENTOWN	State	Zip Code (Plus 4)	NO.	DAY	YEAR	s
Full Name of Contributor			-MO.	- DAY	YEAR	
VICTOR & JOSEPHINE A	<b>JU P.</b>	616771	5	3	13	\$ 100,00
2430 W. WASHINGTON	ه عی ا	LEET	мо,		YEAR	\$
AUGHTOWN	PA	Zip Code (Plus 4) 19144 —			YEAR	\$
Full Name of Contributor			-MO.	TOAY	"YEAR"	\$
Mailing Address			MO	- CXV	YEAR	\$
City	State	Zip Code (Plus 4)	Mo.	DAY	YEAR	\$
Full Name of Contributor			Mo	E DAY	YEAR	
Mailing Address						\$
City	10		- Me		YEAR	\$
ON	State	Zip Code (Plus 4) 	MO.	DAY	YEAR	\$
Full Name of Contributor			2 (0)	5AY	YEAR	\$
Mailing Address			MO:	DAY	EYEAR :	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	æ
Full Name of Contributor						*
Mailing Address			<b>EMP</b>	DAY	-YEAR-	\$
City	State	Zip Code (Plus 4)	LIO)	DAX	YEAR	\$
Full Name of Contributor		-		DAY		\$
Mailing Address						\$
City			MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4) 	MO.	DAY	YEAR	\$
						PAGE TOTAL
Enter Grand Total of Part B on Sche	dule I,	Detailed Summar	y Page,	Section	2.	\$ 300,00

## ALL OTHER CONTRIBUTIONS

PAGE 3 OF 8

\$ 8,000.00

Reporting Period

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

DSEB-502 (7-99)

tisismos of wike s	SCHY	JARE		From	1/11/3	To <u>S16113</u>
				DATE		AMOUNT
Full Name of Contributor				DAY	YEAR	\$ -
LISA J. SCHELER			3	<u> </u>	13	\$ 2,500.00
	£			DAY	YEAR	\$ 2,500.00
City 751 BENNER AVENU	State	Zip Code (Plus 4)	5	3	13	÷ 2,306.00
A-WENTOWA	PA	*	- MG	DAY	YEAR	\$
Employer Name	144	18104 -	Occupati	<u> </u>	L	<b></b>
SILBERLINE MANUFACE	N 246	U Ca Lac	1 '			
Employer Mailing Address/Principal Place of Business		, 71.7-0.	Cé	. 0		
130 LINCOLH DRIVE T	<b>~</b>	187 PA 187	SZ			
Full Name of Contributor	-,,,,	1404,	- мо.	DAY	YEAR -	
JOHN R. LAVETT			3	13	13	\$ 500.00
Mailing Address			MO.	DAY	YEAR	\$
2830 W. L. BERTY ST	reer					<b>3</b>
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	_
Awennus	PA	18104-4748		<u> </u>		\$
Employer Name			Occupati			
Employer Mailing Address/Principal Place of Business			KE	T1 Q6	4	
employer warning Address/Principal Place of Business						
Pull Name of Greathers			I and a second	160007 77 77 75		
Full Name of Contributor  Stuget + Brooke &	~ \		MQ.	DAY	YEAR	\$ 3 500 00
Mailing Address	<u> </u>		5	DAY	13 YEAR	\$ 2,500.00
2520 RIVERBENA R				2 4 3 4 4 4		\$
City City	State	Zip Code (Plus 4)	- 20	DAY	YEAR	
PWENTOWN	PA	(8102 -				\$
Employer Name	1 . 44	.01-0	Occupati	on .	1	
SGR PROPERTIES			0	~ mer		
Employer Mailing Address/Principal Place of Business		***************************************				
1005 BROOKSIDE ROME	<u>, Su,</u>	TE 200, AMEN	<b>イヘレー</b>	, PA	18106	
Full Name of Contributor			MO.	DAY	YEAR	<b>.</b>
			<u> </u>			\$
Mailing Address			MO.	DAY	YEAR	\$
City	10		IN NOTE STREET SPECIFIC	Managar Barret (g)	Altical Commission	_
City	State	Zip Code (Plus 4)	Table Control	DAY	YEAR	\$
Employer Name				<u> </u>	<u> </u>	_
Employer Name			Occupati	on		
Employer Mailing Address/Principal Place of Business			<u> </u>			
Full Name of Contributor			55557 Y 1986			
run Name of Contributor					YEAR-	\$
Mailing Address			MO:	DAY	YEAR	_
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		-				\$
Employer Name			Occupati	on	***************************************	
Employer Mailing Address/Principal Place of Business						
Enter Grand Total of Part D on Sche	dule !	Detailed Summan	Desc	Saction	n 2	PAGE TOTAL
Communication of Fair Communication	-u.c i,		rays,	350110	71 J.	I . ^ .

### SCHEDULE II

PAGE 6 OF 8

## 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	Reporting Per		
FRIEMSS OF MIKE SCHWARE	From <u>1/1</u>	113	To 5/6/13
UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE O			
TOTAL for the Reporting Pe	riod (1)	\$	
		***	
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$80.01-TO	\$290000£(E)(0).	I PART F	
TOTAL for the Reporting Per	riod (2)	\$	on or a second s
	(2)	*	
3. IN KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 F	ROM PARTES		
	And the change of the control of the	Mary State of the Assessment	(Fig. 1)
TOTAL for the Reporting Per	riod (3)	\$ 2,	250.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS			
REPURITING PERIOD (Add and enter amount totals from Boxes 1 2		¢	
and 3; also enter on Page 1, Report Cover Page, Item F.)	•	<b>7 2,</b> 1	L 50 , 90

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Traine or Tilling Committee or Candidate			1	Reporting	_	
FRIENDS OF MIKE SO	54~B	ne		From	تبليلت	3 To <u>\$16 13</u>
				DATE	<u> </u>	AMOUNT
Full Name of Contributor			MC		- YEAR	2
Mailing Address	***************************************		5	6	12	\$ 2,250.00
Mailing Address	<del>-</del>		MO.	DAY.	YEAR	
P.O. Box 3012					<u> </u>	
-	State		MO.	DAY	YEAR	\$
Employer of Contributor	PA	18106 -		<u> </u>		•
Employer of Contributor	_	1375 e 4#	Occupa	ation		
Address (Painting) Place of Business						
Employer Mailing Address/Principal Place of Busines	.5			iption of Co		
						S-KIAL VIDIC
Full Name of Contributor			MO	- OAY-	YEAR	å
Mailing Address			To an All Printer and All Printers		L	\$
Matting Address			MO.	DAY	YEAR	\$
City	1 21218	(100,000		1		<b>3</b>
City	State	Zip Code (Plus 4)	MO	DAY	YEAR	\$
Employer of Contributor	Щ_		120010/	<u></u>	<u></u> ,	3
Chiproyer of Contractor			Occupat	tion		
Employer Mailing Address/Principal Place of Busines			- Dasgri	C(	The section	
Employer manning	.5		Desu .p	ption of Co	ntribution	
				-1475		
Full Name of Contributor		_	MO.	DAY	YEAR-	\$
Mailing Address						•
maning Address			MO.	DAY	YBAR	s
City	Franta	- 4 - Int. A				•
City	State	Zip Code (Plus 4)	MO:	DAY	YEAR	\$
Employer of Contributor		_			l	•
Employer of Contributor			Occupat	tion		
Employer Mailing Address/Principal Place of Busines:						
Employer mailing Addressift incipal rises of Cosmes.	\$		Descrip	ption of Cor	ntribution	
Full Name of Contributor	<u> </u>		MO.	DAY	YEAR	
Mailing Address						\$
Mailing Address			MO.	DAY	YEAR	
City	Ceate	To the Marie Al				\$
l	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer of Contributor						3
			Occupat	tion		
Employer Mailing Address/Principal Place of Business						
Employer maining Address: History France of Section	*		Descrip	ption of Con	ntribution	
Full Name of Contributor			Edit Kora	TRAT	TYEAR	
Mailing Address						<b>5</b>
Mailing Address		-	MO.	and the second of the second	SANA	
City				<u> </u>	11	\$
City	State	Zip Code (Plus 4)	MO: MO:	DAY	YEAR	\$
Employer of Contributor						3
			Occupat	ion		
Employer Mailing Address/Principal Place of Business			- Casaria			
	,		Descript	tion of Con	stribution	
Enter Grand Total of Part G on Sche	الماسات	In-Kind Contrib				PAGE TOTAL
Summary Page, Section 3.	Addie	, INTRING CONTING	dtions	/etalleu	,	\$ 2,250
					-	4 T W. C 3 T

DSEB-502 (7-99)

#### SCHEDULE III

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Reporting Period			
			From 1/1/13 To 5/6/15
PRIEMDS OF THE SCHO	FRIENDS OF MIKE SCHWARE		
To Whom Paid			Amount
Communication Concepts  Mailing Address			U U U IS 887.22
2906 WILLIAM PERZ HIMY, SUITE HOI		PALM CARAST STREET LISTS	
,	State	Zip Code (Plus 4)	
ENTURA	PA	18045 -	
To Whom Paid		Mo. DAY AYEAL Amount	
Mailing Address		4 7 13 \$ 965.66	
P.O. Box 231			Vaca Jumb
City	State	Zip Code (Plus 4)	11762
Grensibe	PA	19638-	1
To Whom Paid			MO VEAR Amount
Communication Con	CEPT	r <b>4</b> '	4 18 13 \$ 1,050.00
Mailing Address			Description of Expenditure
2906 WILLIAM TENA HWY			VOTER CALL
EUTUT	State	Zip Code (Plus 4)	
	PA	18045-	
To Whom Paid	_		Mo
FRIEMAS OF JUSTIS	<u>5, m</u>	140mi	4 22 13 \$ 60.00
	- 11	- 4 2-2	Description of Expenditure
7001 N. ROUTE 209, SU. 7	State	Zip Code (Plus 4)	CAMPAILM EVENT
Coopeaser		1 ' ' 1	
To Whom Paid	Ten	18036-	
			Mo DAY YEAR Amount
Communicated Communicated	CEPT	<u></u>	S ) (S \$ 2.062.19
2906 WILLIAM PENA HU	~ <b>4</b> (	· - uai	
City	State		אחינונת לתסטיביים אי לתוחר ד
Emsn	1	18045-	POSTALE
To Whom Paid		100-1-	MO DAY Amount
Communication Cons	69 PJ		5 3 13 \$ 100,00
Mailing Address	5		Description of Expenditure
2906 WILLIAM PENN HAY, SUITE 401		wite Up)	VOTER CALLS
City	State	Zip Code (Plus 4)	
Ensage	PA	18045 -	
To Whom Paid			Amount
			\$
Mailing Address			Description of Expenditure
City	State	Zip Code (Plus 4)	
To Whom Paid			Mo SAY SYEGE Amount
			\$
Mailing Address		1	Description of Expenditure
City	State	Zip Code (Plus 4)	
!	1 1	1 - 1	1
		<u></u>	
			BACE TOTAL
Enter Grand Total of Expenditures on Pag			PAGE TOTAL age, Item D.