	CA	MPAIGN F	INANCE REP	ORT		
Name:		RestorePA				
Address:		Po Box 4464	4			
City, State, Zi	p:	Allentown P	A 18105			
Candidate			Committee			
Type of Repo	ort	I	<b>Election Date</b>	Amend	ed	Termination
2 <sup>nd</sup> Friday Pre	-Primary		05/18/2018			
Termination	Report?					
Office Sough	t By Candidate	e	Party	County		
Lehigh Coun	ty PAC	· ·		Lehigh		
	Sumr	nary of Rec	eipts & Expend	litures		
From:	01/01/2018		To:	04/30/2	018	
A. Amount B	rought Forwa	rd From Las	t Report	<u> </u>	1,97	9.92
B. Total Mon	etary Contrib	utions & Rec	eipts (from Sche	edule I)	11,3.	50.00
C. Total Fun	ds Available (S	um of Lines	A & B)		13,3.	29.92
D. Total Exp	enditures (fron	n Schedule II	II)		5,50	7.19
E. Ending Ca	sh Balance (Si	ıbtract Line	D from Line C)		7,8	<i>3</i> a .73
F. Value of In	n-Kind Contril	outions Recei	ived (from Sche	dule II)	0.00	
G. Unpaid Do	ebts & Obligat	ions (from So	chedule IV)		(-12,	000.00)

<sup>\*</sup>Complete reports including signatures are on file in the Office of Voter Registration.

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
RESTOREPA	From:	1/1/2	2 <u>018</u> To:	4/30/2018
Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	0.00
Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)		1.08		
Contributions Received From Political Committees (Part A)			\$	350.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reportin	g Period	(2)	\$	350.00
Contributions Received From Political Committees (Part C)			\$	5,000.00
All Other Contributions (Part D)			\$	5,000.00
TOTAL for the Reportin	g Period	(3)	\$	11,000.00
Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E				
TOTAL for the Reportin	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add a	nd enter am	nount	\$	11,350.00

#### 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	e		Repo	orting F	Period			
RESTOREPA			From	n:	1/1/20	) <u>18</u> To	1	4/30/2018
					DATE			AMOUNT
Full Name of Contributing Committee PMA PAC(PA MANUFACTURERS ASSN)				мо	DAY	YEAR		
Mailing Address 225 STATE ST						2016	\$	250.00
City HARRISBURG	<b>State</b> PA	Zip Code (Plus 4 171010000	\$)	1	19	2018		
Full Name of Contributing Committee Committee to Elect Peg Ferrarro				мо	DAY	YEAR		
Mailing Address 339 Schoeneck Av	/enue				10	2010	\$	100.00
City Nazareth	<b>State</b> PA	Zip Code (Plus 4	4)	1	10	2018		

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

PAGE TOTAL 350.00

## ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Name of Filing Committ	tee or Candidate		Rep	oorting F	Period			
			Fro	m:		Т	o:	
					DATE		A	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.0
City	State	Zip Code (Plus 4)	)					

#### 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 from Over \$250.00 in the reporting period.

Name of Filing Committee or Candida	te		Reporting	g Period				
RESTOREPA			From:	1/	1/2018	То:	4.	/30/2018
	*			DA	TE		Al	MOUNT
Full Name of Contributing Committee GT COMMONWEALTH PAC				МО	DAY	YEAR		
Mailing Address PO BOX 73							\$	1,500.00
City SPRING CREEK	State PA	<b>Zip Code</b> 16436-0	( <b>Plus 4)</b> 0073	1	10	2018		
Full Name of Contributing Committee	•			мо	DAY	YEAR		
Mailing Address PO BOX 6128  City HARRISBURG	State	Zip Code	(Plus 4)	2	1	2018	\$	1,000.00
	PA	17112-6	5128	<u> </u>	i .			
Full Name of Contributing Committee PA FUTURE FUND	•			МО	DAY	YEAR		
Mailing Address PO BOX 6128							\$	2,500.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code</b> 17112-6	(Plus 4) 5128	4	2	2018		
Full Name of Contributing Committee EXCELLENT SCHOOLS PA				МО	DAY	YEAR		
Mailing Address 1430 Walnut Stre	eet, #200				j		\$	1,000.00
City Philadelphia	<b>State</b> PA	<b>Zip Code</b> 19102	e (Plus 4)	2	26	2018		
								PAGE TOTAL
Enter Grand Total of Part C on So	hedule I, Detai	iled Summary Pa	age, Secti	on 3.			\$	6,000.00

### ALL OTHER CONTRIBUTIONS

**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			Reporting Period					
RESTOREPA			Fron	n:	1/1/2	018 To	<b>)</b> :	4/30/2018
				DA	\TE		АМ	OUNT
Full Name of Contributor Wayne Woodman				МО	DAY	YEAR		
Mailing 751 Benner Road Address							\$	2,500.00
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus</b> 18104-3300	; 4)	2	26	2018		
Employer Name Investment House, Li	.C	<b></b>		Occupat	ion	r. Vice	President	
Employer Mailing Address/Principal Plac Business	e of	City		A	State		Zip Code	(Plus 4)
11150 Santa Monica Boulevard		Los Ange	les		CA		90025	
Full Name of Contributor Lisa Scheller				МО	DAY	YEAR	A	
Mailing 751 Benner Road Address							\$	2,500.00
<b>City</b> Allentown	<b>State</b> PA	Zip Code (Plus	(4)	2	26	2018		
Employer Name Silberline Manufactur	ing Co, Inc.			Occupat	ion (	EO	•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)
130 Lincoln Drive		Tamaqua	1		PA		18252	
Enter Grand Total of Part C on Sche	dule I, Detailed \$	Summary Page,	Section	on 3.			P.#	5,000.00
						L	,	

### OTHER RECEIPTS

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	Re	porting Perio	od			
		Fre	om:		To:		
			D	ATE		АМО	UNT
Full Name			МО	DAY	YEAR	:	
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4	·)				
Receipt Description	<b>_</b>					<u> </u>	
			· 4		ſ	PAGE	TOTAL
inter Grand Total of Part E o	on Schedule I, Detaile	d Summary Page, Sect	ion 4.			\$	0.00

#### SCHEDULE II

#### 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	Reporti	ing Period		
RESTOREPA	From:		1/1/2018 To:	4/30/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50,00 OR LESS P	ER CONTR	IBUTOR		
TOTAL for the Reporting Pe	eriod	(1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)			
TOTAL for the Reporting Po	eriod	(2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)				
TOTAL for the Reporting Po	eriod	(3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,	(Add and e Item F.)	enter	\$	0.00

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidate			Reportin	g Period			
			From:			То:	
				DATE		A	MOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:			•		•		
Enter Grand Total of Part F on Scheo	lule II, In-Kin	nd Contributions Detai	iled Sum	nmary Pa	ge,	PA	GE TOTAL
Section 2.						<b>\$</b> .	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate					Re	porting P	eriod			
					Fro	om:		То:		
		_		<u>-</u>			DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(	Plus 4)	•					
Employer of Contributor	<u> </u>					Occupat	tion	<b>I</b>	<u></u>	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II,	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Car	ndidate		Reporti	ng Period				
RESTOREPA			From	1/	1/2018	То:	4/30/2018	
**************************************				DATE			AMOUNT	
<b>To Whom Paid</b> Hershey Lodge			мо	DAY	YEAR			
Mailing Address 325 Universit	ty Drive		1	19	2018	<b>\$</b>	750.00	
<b>City</b> Hershey	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure	<u> </u>		
Hersitey	PA	17033	1	expense -				
<b>To Whom Paid</b> Hershey Lodge			мо	DAY	YEAR			
Mailing Address 325 University	ty Drive		1	31	2018	\$	1,050.00	
City Hershey	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure	<u></u>		
PA 17033				expense -				
To Whom Paid	-		MÓ	DAY	YEAR			
Hershey Lodge								
Mailing Address 325 University	ty Drive		2	12	2018	\$	177.46	
City Hershey	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	17033	Event	expense -	Venue &	food		
To Whom Paid			мо	DAY	YEAR			
Republican Party of Pennsylvani	a 		3. 387 n. s.					
Mailing Address 112 State St	reet		2	6	2018	\$	350.00	
City Harrisburg	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure	e e		
	PA	17101	Attend	lance fee -	Winter D	Dinner		
<b>To Whom Paid</b> Bethlehem Business Forms			МО	DAY	YEAR			
Mailing Address P.O. Box 425	50		2	22	2018	\$	119.73	
City Bethlehem	State	Zip Code (Plus 4)	Descri	ption of Ex	penditur			
bediichem	PA	18018		g for event	-	-		

<b>To Whom Paid</b> Allentown Rescue Mission			MO DAY YEAR				
Mailing Address 355 W. Ham	ilton Street		3	9	2018	\$	435.00
City Allentown	Description of Expenditure Charitable contribution						
To Whom Paid Express Business Center			МО	DAY	YEAR		
Mailing Address 6900 Hamilt	on Boulevard, Unit 285	5	3	29	2018	\$	125.00
City Trexlertown	State PA	<b>Zip Code (Plus 4)</b> 18087	1	ption of Exp			
To Whom Paid Bev For PA			МО	DAY	YEAR		
Mailing Address 2595 Wasse	r Road		4	5	2018	\$	2,500.00
City East Greenville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18041		ption of Ex al contribut	=		
Enter Grand Total of Expend	itures on Page 1, Re	port Cover Page, Item D	).			\$	<b>PAGE TOTAL</b> 5,507.19
							0,007.125

### 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  RESTOREPA  From:						ing Period				
							1/1/2018	то:		4/30/2018
							DATE			Outstanding Balance of Debt
Name of Creditor Wayne Woodman						мо	DAY	YEAR		
Mailing Address 751 Benner Road						3	23	2017	\$	2,500.00
City	Allentown		<b>State</b> PA	Zip Code (Pl	us 4)		otion of Del ign Loan	ot	<u> </u>	
	-						DATE			Outstanding Balance of Debt
Name of Creditor Lisa Scheller						мо	DAY	YEAR		
Mailing	Address	751 Benner Road				3	23	2017	\$	2,500.00
City	Allentown		<b>State</b> PA	Zip Code (Pi 18104	us 4)		ption of Del	ot	1	, <del>'=</del> - */-
				<del></del>		<u> </u>	DATE			Outstanding Balance of Debt
Name of Creditor Wayne Woodman						МО	DAY	YEAR		
Mailing	751 Benner Road					5	13	2017	\$	3,500.00
City	Allentown		<b>State</b> PA	Zip Code (Pl 18104	us 4)	1	ption of Del ign Loan	ot		
	•		<b>!</b>	·			DATE			Outstanding Balance of Debt
Name of Creditor Lisa Scheller						мо	DAY	YEAR		
Mailing Address 751 Benner Road						5	13	2017	\$	3,500.00
City	Allentown		State PA	Zip Code (Pl	us 4)	1	ption of Del	bt	-1	
_										PAGE TOTAL
Ent	er Grand T	otal of Unpaid Del	ots on Page :	1, Report Cover Pa	ige, Iten	ı G.			\$	12,000.00
								<del></del>		