

CAMPAIGN FINANCE REPORT				
Name and Address of Filing Candidate or Committee				
Name:	<i>Supporters for Thomas Slonaker</i>			
Address:	<i>7090 Saw Mill Rd</i>			
City, State, Zip:	<i>Germansville PA 18053</i>			
Report Filed By				
Candidate		Committee	<i>X</i>	
Type of Report	Election Date	Amended	Termination	
2015 – Annual Report				
Termination Report?				
Office Sought By Candidate	Party	County		
<i>Lehigh County Controller</i>	<i>D</i>	<i>Lehigh</i>		
Summary of Receipts & Expenditures				
From:	<i>11/24/2015</i>	To:	<i>12/31/2015</i>	
A. Amount Brought Forward From Last Report			<i>6,597.69</i>	
B. Total Monetary Contributions & Receipts (from Schedule I)			<i>90,203.49</i>	
C. Total Funds Available (Sum of Lines A & B)			<i>96,801.18</i>	
D. Total Expenditures (from Schedule III)			<i>96,801.18</i>	
E. Ending Cash Balance (Subtract Line D from Line C)			<i>0.00</i>	
F. Value of In-Kind Contributions Received (from Schedule II)			<i>0.00</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 <i>Supporters For Thomas Slowaker</i>	Reporting Period From <i>11/03/2015</i> to <i>12/31/2015</i>
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1. UNLIMITED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the Reporting Period	(1)	\$

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)		
Contributions Received from Political Committees (Part A)		\$
All Other Contributions (Part B)		\$
TOTAL for the Reporting Period	(2)	\$

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		
Contributions Received from Political Committees (Part C)		\$
All Other Contributions (Part D)		\$ <i>90203.49</i>
TOTAL for the Reporting Period	(3)	\$ <i>90203.49</i>

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.)	\$ <i>90203.49</i>
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**PART D
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 <i>Supporters For Thomas Slowaker</i>	Reporting Period From <i>11/24/2015</i> To <i>12/31/2015</i>
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				DATE	AMOUNT
Full Name of Contributor	MO.	DAY	YEAR		
<i>Thomas Slowaker</i>	<i>12</i>	<i>30</i>	<i>2015</i>	\$	<i>90203.49</i>
Mailing Address <i>4110 Scheidys Rd</i>	MO.	DAY	YEAR	\$	<i>prior loans</i>
City <i>Whitehall</i>	MO.	DAY	YEAR	\$	
State <i>PA</i>					
Zip Code (Plus 4) <i>18052</i>					
Employer Name <i>Self</i>				\$	
Occupation <i>Tax Preparer</i>					
Employer Mailing Address/Principal Place of Business <i>Same</i>					
Full Name of Contributor	MO.	DAY	YEAR	\$	
Mailing Address	MO.	DAY	YEAR	\$	
City	MO.	DAY	YEAR	\$	
State					
Zip Code (Plus 4) -					
Employer Name				\$	
Occupation					
Employer Mailing Address/Principal Place of Business					
Full Name of Contributor	MO.	DAY	YEAR	\$	
Mailing Address	MO.	DAY	YEAR	\$	
City	MO.	DAY	YEAR	\$	
State					
Zip Code (Plus 4) -					
Employer Name				\$	
Occupation					
Employer Mailing Address/Principal Place of Business					
Full Name of Contributor	MO.	DAY	YEAR	\$	
Mailing Address	MO.	DAY	YEAR	\$	
City	MO.	DAY	YEAR	\$	
State					
Zip Code (Plus 4) -					
Employer Name				\$	
Occupation					
Employer Mailing Address/Principal Place of Business					
Full Name of Contributor	MO.	DAY	YEAR	\$	
Mailing Address	MO.	DAY	YEAR	\$	
City	MO.	DAY	YEAR	\$	
State					
Zip Code (Plus 4) -					
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
\$ 90203.49

SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Supporters For Thomas Slovaker	Reporting Period From 11/25/2015 to 12/31/2015
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To Whom Paid	NO.	DAY	YEAR	Amount
Noreen Schneck	12	30	2015	\$ 4601.18
Mailing Address 4110 Scheidys Rd		Description of Expenditure Loan Repayment		
City Whitehall	State PA	Zip Code (Plus 4) 18052-		
Thomas Slovaker	12	30	2015	\$ 1996.51
Mailing Address 4110 Scheidys Rd		Description of Expenditure Loan Repayment		
City Whitehall	State PA	Zip Code (Plus 4) 18052-		
Thomas Slovaker	12	30	2015	\$ 90203.49
Mailing Address 4110 Scheidys Rd		Description of Expenditure Loan forgiveness		
City Whitehall	State PA	Zip Code (Plus 4) 18052-		
				\$

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

PAGE TOTAL
\$ 96801.18

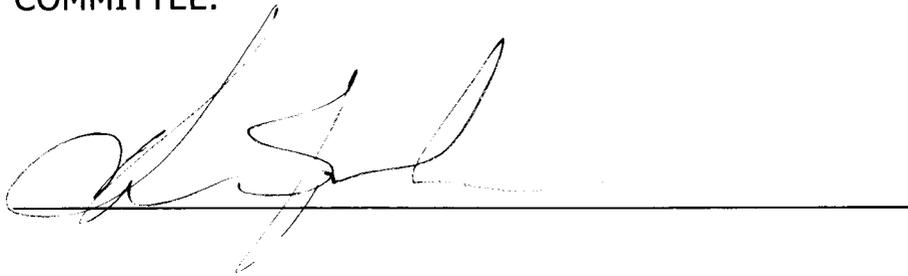
DECEMBER 28, 2015

TO WHOM IT MAY CONCERN:

I THOMAS SLONAKER, DO AS OF THIS DATE, FORGIVE THOSE
MONIES

LOANED TO THE "SUPPORTERS FOR THOMAS SLONAKER"

COMMITTEE.

A handwritten signature in black ink, appearing to read 'T. Slonaker', is written over a solid horizontal line. The signature is cursive and somewhat stylized.