CAMPAIGN FINANCE REPORT								
	Name and Ac	ldress of Fi	ling Candidate	or Com	mitte	e		
Name: Address: City, State, Zip: Joanne Jackson for a Better Lehigh County 4195 Estates Dr Center Valley PA 18034 Report Filed By								
Candidate			Committee			X		
Type of Repo	ort		Election Date Amend			Termination		
2015 – 30 Day Post Election			11/03/2015			YES		
Termination	Report?							
Office Sough	t By Candidate	Party	County	ty				
Lehigh County Commissioner At-Large			D	Lehigh				
	Sumn	nary of Rec	eipts & Expend	litures				
From: 10/20/2015 To: 11/23/				11/23/2	2015			
A. Amount B		1,551.60						
B. Total Mon	dule I)	810.00						
C. Total Funds Available (Sum of Lines A & B)						2,362.20		
D. Total Expenditures (from Schedule III)						2,288.60		
E. Ending Cash Balance (Subtract Line D from Line C)						72.60		
F. Value of In-Kind Contributions Received (from Schedule II)						0.00		
G. Unpaid Debts & Obligations (from Schedule IV)						0.00		

^{*}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	
JOANNE TUCKSON FIN a BISHEN Chigh From 10	11170167
lormy	, , ,
1 UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50,00 OR LESS PER CONT	ALBEATON ELECTRONICATION OF THE
TOTAL for the Reporting Period (1)	s 75
2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ 85/00
All Other Contributions (Part B)	\$ 75
TOTAL for the Reporting Period (2)	\$ 1100 100
3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ 7
All Other Contributions (Part D)	\$ (2)
TOTAL for the Reporting Period (3)	\$ 500
4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC.	L (FROM PART) E
TOTAL for the Reporting Period (4)	\$ 0
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 8.)	* 810.60

PART A

PAGE 3 OF 10 7

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	n	ellow !	Plans	1	Reporting	Period	15- 11/2/15
Joanne Jackson for a		UHU I	1/09	_/)	From _	U U	11) to 11(2)()
Full Name of Court puting 90mmittee A		Ma - I			DATE	YEAR	AMOUNT
Melika advess TU GOVENNM	LYH	TVVI	LYNC	\$10	129	15	1 s 85/00
TOUL SWEDTUY	M	Gr		MQ.	DAY	YEAR	\$
CHY WALAMAIL	VA	1800	(Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	I P	LCXAU	//1	MO.	DAY	YEAR	<u></u>
Mailing Address							\$
_				MO.	DAY	YEAR	\$
City	State	Zip Code	(Pius 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	4			MO.	DAY	YEAR	
Mailing Address		·		MO.	DAY	YEAR	8
							\$
City	State	Zip Code	(Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	4			MÖ.	DAY	YEAR	
Mailing Address			normanianiania de esta esta esta esta esta esta esta est	MO.	DAY	YEAR	
City	Stole	Zip Code	Plus di				\$
			the second	MO.	DAT	YEAR	\$
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	
City	State	Zip Code	(Plus 4)	MO.	GAY	YEAR	\$
		•				TEAN	\$
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Marling Address	*************************************	***************************************	***************************************	MO.	DAY	YEAR	\$
Сііу	State	Zip Code	(Plus 4)	MO.	DAY	YEAR	
			444				\$
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	\$
					<u> </u>		PAGE TOTAL
Enter Grand Total of Part A on Sched	lule I,	Detailed	Summary	Page	, Section	n 2.	\$ 85 (01)
MANUAL WALLS (W. A.S.)							

PAGE OF SO

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 OUNTLE TRUESON FW	Λ	Beller	Tehi	ah	From 1	1110.	/15 to 11/23/15
			MIN	HI	DATE		AMOUNT
Full Name of Cantributor		101) Mo.		YEAR 15 YEAR	
23 S St GEU	Y LY	L JT	lus 4)	MO.	DAY	YEAR	
Full Name of Contributor	МΠ	HAIM					\$
				MO.	DAY	YEAR	\$
Meiling Address City				MO.	DAY		\$
	State	Zip Code (Pi	us 4)	MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YUAR	\$
Mailing Address City			A	HÇ.	DAY	YEAR	\$
City	State	Zip Code (PI	US 4)	MO.	DAY	YEAR	s
Full Name of Contributor				MO.	CAY	YEAR	
Mailing Address	***************************************			MO.	DAY	*YEAR	\$
City	State	Zip Code (Pla	us 4)	MO.	DAY	YEAR	
Fulf Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address	***************************************	***************************************			e vozava s		\$
A-1						/ean	\$
	State	Zip Code (Plu	JS 4)	MO.	DAY	YEAR	\$
Full Name of Contributor				Mis	DAY	YEAR	\$
Mailing Address	 	Western Western Committee of the Committ		МО	DKĀ	MYPA, W	\$
City	State	Zip Code (Plu	15 4)	MQ.	DAY	YEAR	\$
Full Name of Contributor			ı	MO.	DAY	YEAR	\$
Mailing Address	***************************************			MO.	DAY	YEAR	\$
City	Stete	Zip Code (Piu	5 4)	MO.	DAY	YEAR	
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address	Port and Administra	***************************************		MO.	DAY	YEAR	\$
City	State	Zip Code (Plu	5 4)	MO.			\$
					V-3.	YEAR	\$
Enter Grand Total of Part B on Schedul	le I,	Detailed Sur	nmary	Page, S	ection	2.	\$

PART C

PAGE 5 OF SO

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	YD	Better Let	Prom	10/20	15 11/23/15
V			DATE		AMOUNT
Full Name of Contributing Completes	\mathcal{D}	M 470		15	\$ 500
Meiling Address 45 Fairville	()	St	MG. DAY	YEAR	\$
CHYROLONG	VA	Gip Cond (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. BAY	YEAR	\$
Full Name of Contributing Committee	<u>.</u>	•	MG DAY	YEAR	\$
Mailing Address	***************************************	an and an	MO. BAV	YEAR	\$
City	State	Zip Code (Plus 4)	MG. DAY	YEAR	\$
Full Name of Contributing Committee	1		MO. SEDAY	YEAR	\$
Mailing Address		To the state of th	MQ DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MG BAY	YEAR	\$
Full Name of Contributing Committee			MO: DAY	YEAR	\$
Mailing Address			MO. DAY	YEAR	\$
City	State	Zip Code (Plus 4)	Mg. 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			200 (OSS 200) N	YEAR	\$
Mailing Address	***************************************		E. NOTE STONY	YEAR	\$
City	State	Zip Code (Plus 4)	MG DAY	YEAR	\$
Full Name of Contributing Committee	(10/A)	A PART	\$		
Mailing Address			MG DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO. DAY	увая	\$
Enter Grand Total of Part C on School	dule 1	, Detailed Summary	Page, Secti	on 3.	\$ 500

SCHEDULE II

PAGE OF

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 JOONNE TUCKSON FOR A BEHEV LINGH From LO	710d 20	115To 11	23	15
Conty		Į.		
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR	LESS	PER CONT	HBUTC)H
TOTAL for the Reporting Period (1)	\$	\Diamond		
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FRO	u Pi	(ATF)		
TOTAL for the Reporting Period (2)	\$	Ø		-
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250,00 (FROM PART)	3)			
TOTAL for the Reporting Period (3)	\$	Ø		
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 I tom E)	\$	Ø		

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Siles Committee of Condidate	
Name of Filing Committee or Candidate JOANNE JUSSON FOR N. BOHLE P.N.	Reporting Period From 10 20 15 To 11/23/15
To Wham Paid Mailing Address Mailing Address	NO DAY YEAR Amount \$
City 20 fo A to A to C SMM 749, Fode (Pius 4)	Vermous amount of
To When Paid	MO. DAY YEAR Amount
Mailing Address	Description of Expenditure
City	- LONGTOY)
To Whom Paid Mailing Address Mailing A	MO. DAY YEAR Amount 5
City ON IV ON IV ON IT TO CODE Plus 4)	Description of Expenditure PLYMOUS SIMONT TAY OUR ORLY OF
To Whom Paid () DOLLY	Mo. Day visat Amount
City City Fin Sode (Plup 4)	Description of Expenditure VEL MIN SWENCH
To Whom Pajd	Angle-option continues and a second
Mailing Addrags	Description of Expenditure
City All Soles Succode (Plus 4)	campaign mover
To Whom Paid Mailing Address	MO DAY YEAR Amount
**************************************	Description of Expenditure
To Whom Paid	
Mailing Address	MO DAY YEAR Amount
City State Zip Code (Pius 4)	Description of Expenditure
To Whom Paid	MO: DAY VI Amount
Mailing Address	Description of Expenditure
City State Zip Code (Plus 4)	
Enter Grand Total of Expenditures on Page 1, Report Cover Pr	age, Item D. PAGE TOTAL \$ 2288.10