CAMPAIGN FINANCE REPORT Name and Address of Filing Candidate or Committee Name: Hillary for Lehigh County Address: 7644 Sweetwood Dr Macungie, PA 18062 City, State, Zip: Report Filed By X Candidate Committee **Termination Election Date** Amended Type of Report 2015 – 30 Day Post Election 11/03/2015 **Termination Report?** County Office Sought By Candidate **Party** \overline{D} Lehigh Lehigh County Commissioner At-Large Summary of Receipts & Expenditures 11/23/2015 10/20/2015 To: From: 1,040.58 A. Amount Brought Forward From Last Report B. Total Monetary Contributions & Receipts (from Schedule I) 0.00 1,040.58 C. Total Funds Available (Sum of Lines A & B) D. Total Expenditures (from Schedule III) 1,160.17 E. Ending Cash Balance (Subtract Line D from Line C) (119.59)F. Value of In-Kind Contributions Received (from Schedule II) 176.00 0.00 G. Unpaid Debts & Obligations (from Schedule IV)

^{*}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	1- 11/2/17
HILAVU FOR PhIAN (DIMT) From [)/()	150 11/2011
	•	,
1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CO	NTRIBL	TOR
TOTAL for the Reporting Period (1) \$	$\langle \rangle$
2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART & AND PART B)		
Contributions Received from Political Committees (Part A)	\$	\varnothing
All Other Contributions (Part B)	\$	
TOTAL for the Reporting Period	2) \$	B
3. GONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		and the summer of
Contributions Received from Political Committees (Part C)	\$	$\langle 2 \rangle$
All Other Contributions (Part D)	\$	Ø
TOTAL for the Reporting Period	3) \$	(X)
4. OTHER REGEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, E	TC. (F	ROM 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.)	5	\varnothing

SCHEDULE II

PAGE 3 OF 5

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 on Candidate TILLAND FOR LENIAH CAUITU From 10	20/15 to 11/23/15
J J	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR	LESS PER CONTRIBUTOR
TOTAL for the Reporting Period (1)	s Ø
2 IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM	
TOTAL for the Reporting Period (2)	
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART C	
TOTAL for the Reporting Period (3)	\$ (7)
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.)	\$ 176.00

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SCHEDULE II PART F

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	h/	nuntu	Reporting From /	Period /	5 to 11/23/15
Tima gill girlly		10119	DATE	1-1	AMOUNT
Full Name of Contributor				YEAR	\$1710.00
Mailing Wyless VIII O +1	100	d Ar	MO. DAY	YEAR	\$
CHY MAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	Tim	Code (Plus 4)	MO DAY	YEAR	\$
Description of Contribution	$\perp PH$	18065			
Full Name of Contributor					
	······································		MO. DAY	YEAR	\$
Mailing Address			MQ DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO. DAY	YEAR	\$
Description of Contribution:	Д	<u></u>		<u> </u>	
Full Name of Contributor			MO. SAY	YEAR	
Mailing Address		***************************************			\$
	***		MG DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO. DAY	VEAR	\$
Description of Contribution:		<u> </u>			
Full Name of Contributor			- 100 - 0AY	YEAR	\$
Mailing Address			MO: DAY	YEAR	
City	State	Zip Code (Plus 4)			\$
	3.0.0		MO DAY	YEAR	\$
Description of Contribution:					
Full Name of Contributor			in the state of th	YEAR	\$
Mailing Address			MO. DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO. DAY	YEAR	
Description of Contribution:		***			\$
Full Name of Contributor					
run Name of Contributor			MG DAY	YEAR	\$
Mailing Address	***************************************		III MO. DAY	YEAR	\$
City	State	Zip Code (Pius 4)	MO. DAY	YEAR	\$
Description of Contribution:			<u></u>	1	
Enter Grand Total of Part F on Schadule II Inskind Contributions Detailed PAGE TOTAL /V					
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2. PAGE TOTAL \$ 1710					

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SCHEDULE III

STATEMENT OF EXPENDITURES

Number Cities Committed or Condition	Reporting Period / / /
Name for Filling Committee or Candidate: HIWY FOR UNION MMTY	From/1/30//5 To ///23//5
To whom Phyan Democratic Commis	HO 11 3 15 Amount 100
Mailing Address BOX 3142	Description of Expenditure
CITY WPSCOSUILU PH 18101	9-
To Whom Havantuge PEP	MID DAY YEAR Amount \$
Mailing Address S Shornersul Lot #2	205 CONSULTING +CLS
METILLIUM PAIN) NO DAY YEAR Amount
Mailing Agress	Use Cription of Expenditure
City COO (AL) Thut I spend Zin Code	Place 4) CAS
To Wilder Paid In 19 19 19 19 19 19 19 19 19 19 19 19 19	MO. DAY YEAR Amount
Marting Address	Description of Expenditure
City BOHAL A OLD MAR KADO	(Plus 4)
To Whom Paid V) P() 1) 1 Ti(C+ (100) T+1	Mo DAY YEAR Amount
Mailing Address	Description of Expenditure A PAC Y OF THE PORT OF THE
GIVATION TO THE SIN	(P(us 4)
To Whom Paid	MO DAY YEAR Amount
Mailing Address	Description of Expenditure
City State Zip Code	s (Plus 4) —
To Whom Paid	MO DAY YEAR Amount \$
Mailing Address	Description of Expenditure
	e (Plus 4)
To Whom Paid Malling Address	Mo DAY VISE Amount S Description of Expenditure
	p (Plus 4)
	PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report	Cover Page, Item D. PAGE TOTAL \$ 11.60 . 17