### **CAMPAIGN FINANCE REPORT** Name and Address of Filing Candidate or Committee Name: County Government that Works Address: 7644 Sweetwood Dr City, State, Zip: Macungie, PA 18062 Report Filed By Candidate Committee X Type of Report **Election Date** Termination Amended 2015 – 30 Day Post Election 11/03/2015 **Termination Report?** Office Sought By Candidate Party County Lehigh County PAC DLehigh Summary of Receipts & Expenditures From: 10/20/2015 To: 11/23/2015 A. Amount Brought Forward From Last Report 3,700.13 B. Total Monetary Contributions & Receipts (from Schedule I) 10,425.00 C. Total Funds Available (Sum of Lines A & B) 14,125.13 D. Total Expenditures (from Schedule III) 13,537.36 E. Ending Cash Balance (Subtract Line D from Line C) 587.77 F. Value of In-Kind Contributions Received (from Schedule II) 0.00 G. Unpaid Debts & Obligations (from Schedule IV) 0.00

<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  CIWITY GAVILLYMMENT THAT WINE From	Peri	2 <u>C</u>	15- 11/23/15		
1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CO	NT	RIBU	TOR		
TOTAL for the Reporting Period	1)	\$	50		
2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)					
Contributions Received from Political Committees (Part A)		\$	100 Ø		
All Other Contributions (Part B)		\$	100		
TOTAL for the Reporting Period	2)	\$	100		
3. CONTRIBUTIONS OVER \$250.00 (FROM PART & AND PART )					
Contributions Received from Political Committees (Part C)		\$	8525		
All Other Contributions (Part D)		\$	1757)		
TOTAL for the Reporting Period	(3)	\$	10,275		
4. OTHER REGEIPTS; - REPUNDS, INTEREST EARNED, RETURNED CHECKS, I	<b>:</b> TC	(FF			
	4)	\$	Ø		

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECK.	s, etc	), <b>(F</b> A	OM: PART E) 🏪 🧼
TOTAL for the Reporting Period	(4)	\$	Ø

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.)	\$ 10,425
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# 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	101	H that W	Report From	ing Period	15 to 11/23/15
			DA'	TE /	AMOUNT
Full Name of Contributer			IAO DA	Y YEAR	\$ 100
Mailing Address	****		140. PA	YEAR	\$
City	State	Zip Code (Plus 4)	MO. DA	YEAG	\$
Full Name of Contributor			MO. DA	Y SYEAR	\$
Mailing Address	·		MO. DA	Y YEAR	\$
City	State	Zip Code (Plus 4)	MQ DA	YEAR	
		***			\$
Full Name of Contributor			MO. DA	YEAR	\$
Mailing Address			MO DA	YEAR	\$
City	State	Zip Code (Plus 4)	MO. DA	Y YEAR	\$
Full Name of Contributor	1		MO. DA	YEAR	\$
Mailing Address		W/A-t-Lagumanadatatatataga	MO. DA	YEAR	\$
City	State	Zip Code (Plus 4)	MO. DA	YEAR	
		<b>4</b> 40.			\$
Full Name of Contributor			Mo. D		\$
Mailing Address			MO: 0/	YEAR	\$
City	State	Zip Code (Plus 4)	MO. DA	YEAR	\$
Full Name of Contributor			МБД	YEAR	S
Mailing Address			T MODELLE OF	VIII YEAR	\$
City	State	Zip Code (Plus 4)	MO. D	Y YEAR	\$
Full Name of Contributor			MO	YEAR	
Mailing Address	······································	·	MO. D	Y YEAR	\$
City	State	Zip Code (Plus 4)	Me)	Y AYEAR	\$
		. Add the second			\$
Full Name of Contributor			M0. 5	YEAR	\$
Mailing Address	<del>/</del>	HILLER THE	MO. 0.	AY YEAR	\$
City	State	Zip Code (Pius 4)	MO. D	AY YEAR	\$
	<u></u>		<u> </u>		PAGE TOTAL
Enter Grand Total of Part B on Sche	dule l	, Detailed Summar	y Page, Sec	tion 2.	\$ 1010

PART C

PAGE 4 OF

### 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 Compittee or Candidate	+4	nat libres	Reporting From	Period	5 to 11/23/15
			DATE	<del></del>	AMOUNT
Full Marge of Contributing Committee	٦ .			YEAR	\$ 1725
Martin Social Colors	Mo	Managarina ang arang	MG GAY	YEAR	\$ 11800
City W. City C.	1999	1 Pip/Code #Jus 4)	MO DAY	YEAR	s Charles
Full Name of Contributing Committee	IWI	1 LNULOX	MO. DAY	YEAR	
Mailing Address		······································			\$
		:	MO: DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MC. DAY	YEAR	\$
Full Name of Contributing Committee	<u></u>	e e e e e e e e e e e e e e e e e e e	MO. DAY	YEAR	\$
Mailing Address	<del>*************************************</del>	THE METERS AND A STATE OF THE S	MO, DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MG. DAY	YEAR	\$
Ful! Name of Contributing Committee			MO. BAY	YEAR	\$
Mailing Address	**************************************	***************************************	MO DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO BAY	YEAR	
		<b>—</b>			\$
Full Name of Contributing Committee			MG. DAY	YEAR	\$
Mailing Address			MO. DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO DAY	YEAR	\$
Full Name of Contributing Committee	•		MO. DAY	YEAR	s
Mailing Address			MO DAY	YEAR	**************************************
City	State	Zip Code (Plus 4)	MO-E ETVAVA	YEAR	\$
Full Name of Contributing Committee			MO. DAY	YEAR	
Mailing Address		nan daga kanan			\$
	·		MO. DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MG, DAY	YEAR	\$
Full Name of Contributing Committee			MO. DAY	YEAR	\$
Meiling Address	***************************************	MY XV-mates commenced and an analysis of the same of t	MG. DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO DAY	YEAR	\$
	4				PAGE TOTAL
Enter Grand Total of Part C on Sched	dule I,	, Detailed Summary	Page, Section	n 3.	\$ 8525

# ALL OTHER CONTRIBUTIONS

PAGE OF

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	rant that W	Reporting Period From D20	15 10 11/23/15
		DATE	AMOUNT
Full Name of Contributor	4	10 20 5	\$ 500
210  N $270  ST$	•		\$
"Allentown	PA SUPIus 4)	MO. DAY YEAR	\$
Employer Name	,	Attorner	
Employer Meiling datess/Principal Place of Business	Stuff 300	Allentour	
Full Name of Contributes	army	10 20 15	\$ 1250
Mailing Apriliags 7		STATE	\$
CHY ALLON TOWN	DA 1810 Ode No jus 41	MO. GAY YEAR	\$
Employer Name		Description Tirec	7
Employer Mailing Address/Principal Place of Business			
Full Name of Contributor		MO: DAY YEAR	\$
Mailing Address		MO DAY YEAR	\$
City	State Zip Code (Pius 4)	MO. DAY YEAR	\$
Employer Name	<u></u>	Occupation	
Employer Mailing Address/Principal Place of Business		1	A CONTRACTOR OF THE PROPERTY O
Full Name of Contributor		MOON DOXY NEW YEAR	\$
Mailing Address		OMO DE CAPAYON AYEAR	\$
City	State Zip Code (Plus 4)	MO. DAY YEAR	\$
Employer Name		Occupation	
Employer Mailing Address/Principal Place of Business		1	
Full Name of Contributor		MONE STONE MY AND	\$
Mailing Address		SENORE ENOUGH SY/ARE	\$
City	State Zip Code (Plus 4)	MOSS MIDAYS ASYEARS	\$
Employer Name		Decupation	
Employer Mailing Address/Principal Place of Business			
Employer Marring			
Enter Grand Total of Part D on Sched	dule I, Detailed Summar	y Page, Section 3.	PAGE TOTAL

OSEB-502 (7-99)

### 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** 

1 ( min )	orting Peri	20/15To_	11/23/15
J			
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.  TOTAL for the Reporting Period	00 OK E	\$ O	TRIBUTOR
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.0	0*(17*(0 <b>)</b>	LPART F	
TOTAL for the Reporting Period	(2)	s Ø	
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM	PART G		
TOTAL for the Reporting Period	(3)	\$ 0	
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 Coven Page 1 to E)		<b>s</b> Ø	

#### SCHEDULE III

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
County Government that Wor	/KC From 10/20/15 To 11/23/15
0	
To Whom Paid Advantage Pep LLC	10 24 15 \$ 876.78
2285 Schuenersville Rd STE 205	Description of Expenditure RUM BUSEMENT RV
Bethlehem PA 18077	
To Whom Paid Joanne Jackson	MO. DAY YEAR Andount 85, Led
Mailing Address Hotels Dr.	Description of Expenditure
Center Valley State Zip Gode Pills 4	
To Whom Paid LV Print Center  Mailing Address, O () ( ) ( ) ( )	10 26 15 \$ 11811.20
Mailing Address Broadhead Ave. Reav City D. 10 10 10 10 10 10 10 10 10 10 10 10 10	mail Postards
Bethlehem DA 180/5	
To Whom Pald Joanne Jackson	MO. DAY YEAR Amount 50
Mailing Address 4195 Estates Dr.	Description of Expenditure  Dembursement for
City Center Valley PA 18034	Ceurt.
To Whom Paid LV Print Center.	MG. DAY YEAR Amount 470.30
Mailing Address 306 Broughoud Ave. Dear	Description of Expanditure OS/reprint
Bethlehem PA 18075	of palm Cards.
To Whom Paid WWW. Day1+2. Com	MO. DAY YEAR Amount 10.72
Mailing Address	Description of Expenditure Conation
City State Zip Code (Plus 4)	fees
To Whom Paid Adventage Rep U.C.	11 73 15 \$ 202.47
Mailing Address Shuenewsville Rd. STE 205	Description of Expenditure  VIINVINSMUNT  DY
City Beth Mem PA 1801-	1000 calls
To Whom Paid Face by NK	10 31 15 <b>\$</b> 30.29
Mailing Address	Description of Expanditure
City State Zip Code (Plus 4)	J. J
	PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover	in Can 21