

CAMPAIGN FINANCE REPORT				
Name and Address of Filing Candidate or Committee				
<b>Name:</b>		<i>RESTORE PA</i>		
<b>Address:</b>		<i>PO Box 4464</i>		
<b>City, State, Zip:</b>		<i>Allentown PA 18105-4464</i>		
Report Filed By				
<b>Candidate</b>		<b>Committee</b>		
<b>Type of Report</b>		<b>Election Date</b>	<b>Amended</b>	<b>Termination</b>
2015 – 30 Day Post Primary		05/19/2015		
<b>Termination Report?</b>				
<b>Office Sought By Candidate</b>		<b>Party</b>	<b>County</b>	
<i>PAC</i>			<i>Lehigh</i>	
Summary of Receipts & Expenditures				
<b>From:</b>	<i>05/04/2015</i>	<b>To:</b>	<i>06/08/2015</i>	
<b>A. Amount Brought Forward From Last Report</b>			<i>5,822.96</i>	
<b>B. Total Monetary Contributions &amp; Receipts (from Schedule I)</b>			<i>16,416.59</i>	
<b>C. Total Funds Available (Sum of Lines A &amp; B)</b>			<i>22,239.55</i>	
<b>D. Total Expenditures (from Schedule III)</b>			<i>17,806.84</i>	
<b>E. Ending Cash Balance (Subtract Line D from Line C)</b>			<i>4,432.71</i>	
<b>F. Value of In-Kind Contributions Received (from Schedule II)</b>			<i>3.50</i>	
<b>G. Unpaid Debts &amp; Obligations (from Schedule IV)</b>			<i>(12,000.00)</i>	

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

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
Detailed Summary Page

<b>Name of Filing Committee or Candidate</b>  RESTOREPA	<b>Reporting Period</b>  <b>From:</b> 5/5/2015 <b>To:</b> 6/8/2015
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<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>		
	<b>TOTAL for the Reporting Period (1)</b>	\$ 255.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>		
Contributions Received From Political Committees (Part A)	\$	0.00
All Other Contributions (Part B)	\$	950.00
<b>TOTAL for the Reporting Period (2)</b>	<b>\$</b>	<b>950.00</b>

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>		
Contributions Received From Political Committees (Part C)	\$	5,000.00
All Other Contributions (Part D)	\$	3,000.00
<b>TOTAL for the Reporting Period (3)</b>	<b>\$</b>	<b>8,000.00</b>

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)</b>		
	<b>TOTAL for the Reporting Period (4)</b>	\$ 7,211.59

<b>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 Page1, Report Cover Page, Item B.)</b>	\$	16,416.59
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## PART B 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)**

<b>Name of Filing Committee or Candidate</b> RESTOREPA				<b>Reporting Period</b> From: 5/5/2015 To: 6/8/2015			
				<b>DATE</b>		<b>AMOUNT</b>	
<b>Full Name of Contributor</b> Holt, Thomas & Barbara				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b> 2000 N. Mount Mariah Road				5	28	2015	
<b>City</b> Montgomery	<b>State</b> TX	<b>Zip Code (Plus 4)</b> 77356					
<b>Full Name of Contributor</b> Balliet, David				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 150.00
<b>Mailing Address</b> 4984 Mill Road				5	27	2015	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18049					
<b>Full Name of Contributor</b> Holt, Timothy				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 312 N. 37th Court				5	14	2015	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18104					
<b>Full Name of Contributor</b> Gery, Nancy				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 2853 Rolling Green Place				5	8	2015	
<b>City</b> Macungie	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18062					
<b>Full Name of Contributor</b> Scott, C.R. & M.B.				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 6407 Tupelo Road				5	20	2015	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18104					

<b>Full Name of Contributor</b> Iudicello, Sonai			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 3449 Sturbridge Place			5	14	2015	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18104				
<b>Full Name of Contributor</b> Witmer, Scott			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 4270 Ascot Circle			5	14	2015	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18103				
<b>Full Name of Contributor</b> Niedbala, Sam			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 4093 Maulfair Drive			5	15	2015	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18103				

**PAGE TOTAL**

\$ 950.00

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

**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.

<b>Name of Filing Committee or Candidate</b>  RESTOREPA	<b>Reporting Period</b>  <b>From:</b> <u>5/5/2015</u> <b>To:</b> <u>6/8/2015</u>
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				DATE	AMOUNT		
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 5,000.00
PA FUTURE FUND							
Mailing Address				6	4	2015	
Box 6128							
City	HARRISBURG	State	PA	Zip Code (Plus 4)	171126128		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 5,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  RESTOREPA	<b>Reporting Period</b>  <b>From:</b> 5/5/2015 <b>To:</b> 6/8/2015
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Lovett, John & Sandra							\$ 1,000.00
Mailing Address 2830 W. Liberty Street				5	7	2015	
City Allentown	State PA	Zip Code (Plus 4) 18104					
Employer Name N/A				Occupation Retired			
Employer Mailing Address/Principal Place of Business N/A			City N/A		State PA	Zip Code (Plus 4) 18104	
Full Name of Contributor				MO	DAY	YEAR	
Salvino, Anthony P.							\$ 1,000.00
Mailing Address 2070 Beechwood Street				6	5	2015	
City Orefield	State PA	Zip Code (Plus 4) 18069					
Employer Name White & Williams, LLP				Occupation Attorney			
Employer Mailing Address/Principal Place of Business 3701 Corporate Parkway, Suite 300			City Center Valley		State PA	Zip Code (Plus 4) 18034	
Full Name of Contributor				MO	DAY	YEAR	
Mazziotti, Vic							\$ 500.00
Mailing Address 2430 Washington Street				5	17	2015	
City Allentown	State PA	Zip Code (Plus 4) 18104					
Employer Name GIR, LLC				Occupation Owner			
Employer Mailing Address/Principal Place of Business 1620 W. Hamilton Street			City Allentown		State PA	Zip Code (Plus 4) 18102	

<b>Full Name of Contributor</b> Harris, Gregory			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> 1456 Hampton Road			5	18	2015	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18104				
<b>Employer Name</b> Omega Homes, Inc.			<b>Occupation</b> Manager			
<b>Employer Mailing Address/Principal Place of Business</b> 1150 S. Cedar Crest Boulevard		<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18104		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 3,000.00



## PART E 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.**

<b>Name of Filing Committee or Candidate</b>  RESTOREPA	<b>Reporting Period</b>  From: <u>5/5/2015</u> To: <u>6/8/2015</u>
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				DATE			AMOUNT
Full Name				MO	DAY	YEAR	
Woodman, Wayne							\$ 3,500.00
Mailing Address 751 Benner Road				5	13	2015	
City Allentown	State PA	Zip Code (Plus 4) 18104					
Receipt Description Campaign loan							
Scheller, Lisa J.							\$ 3,500.00
Mailing Address 751 Benner Road				5	13	2015	
City Allentown	State PA	Zip Code (Plus 4) 18104					
Receipt Description Campaign loan							
US Postal Service							\$ 211.59
Mailing Address 17 S. Commerce Way				5	28	2015	
City Bethlehem	State PA	Zip Code (Plus 4) 18017					
Receipt Description Refund overpayment of postage							

**Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.**

<b>PAGE TOTAL</b>
\$ 7,211.59

## 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
RESTOREPA		From: <u>5/5/2015</u> To: <u>6/8/2015</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)			\$ 3.50
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)			\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)			\$ 0.00
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, Reports Cover Page, Item F.)			\$ 3.50

**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>  <b>From:</b> _____ <b>To:</b> _____
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							<b>PAGE TOTAL</b>  \$ 0.00

**SCHEDULE II**  
**PART G**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OVER \$250.00**

<b>Name of Filing Committee or Candidate</b>				<b>Reporting Period</b>  From:                      To:	
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				DATE	AMOUNT
<b>Full Name of Contributor</b>				<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b>					
<b>City</b>	<b>State</b>	<b>Zip Code(Plus 4)</b>			
<b>Employer of Contributor</b>				<b>Occupation</b>	
<b>Employer Mailing Address/Principal Place of Business</b>	<b>City</b>	<b>State</b>	<b>Zip Code(Plus 4)</b>	<b>Description of Contribution</b>	
<b>Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.</b>					<b>PAGE TOTAL</b> 0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
RESTOREPA	From <u>5/5/2015</u> To: <u>6/8/2015</u>

DATE				AMOUNT
<b>To Whom Paid</b> Campaign Pilots	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 26 W. Broad Street	6	8	2015	\$ 1,216.00
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18018	<b>Description of Expenditure</b> Robo Calls	
<b>To Whom Paid</b> Campaign Pilots	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 26 W. Broad Street	5	18	2015	\$ 6,000.00
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18018	<b>Description of Expenditure</b> Campaign services	
<b>To Whom Paid</b> Campaign Pilots	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 26 W. Broad Street	6	1	2015	\$ 2,000.00
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18018	<b>Description of Expenditure</b> Campaign Services	
<b>To Whom Paid</b> Campaign Pilots	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 26 W. Broad Street	6	8	2015	\$ 750.00
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18018	<b>Description of Expenditure</b> Campaign services	
<b>To Whom Paid</b> Lisa Scheller	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 751 Benner Road	5	20	2015	\$ 1,271.99
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18104	<b>Description of Expenditure</b> Reimburse primary night victory party	

To Whom Paid Piryx, Inc.			MO	DAY	YEAR	\$ 3.46
Mailing Address 144 Second Street			5	7	2015	
City San Francisco	State CA	Zip Code (Plus 4) 94105	Description of Expenditure Credit card fees			

To Whom Paid Piryx, Inc.			MO	DAY	YEAR	\$ 8.20
Mailing Address 144 Second Street			5	14	2015	
City San Francisco	State CA	Zip Code (Plus 4) 94105	Description of Expenditure Credit card fees			

To Whom Paid Piryx, Inc.			MO	DAY	YEAR	\$ 8.20
Mailing Address 144 Second Street			5	14	2015	
City San Francisco	State CA	Zip Code (Plus 4) 94105	Description of Expenditure Credit card fees			

To Whom Paid Piryx, Inc.			MO	DAY	YEAR	\$ 8.20
Mailing Address 144 Second Street			5	15	2015	
City San Francisco	State CA	Zip Code (Plus 4) 94105	Description of Expenditure Credit card fees			

To Whom Paid US Postal Service			MO	DAY	YEAR	\$ 2,180.79
Mailing Address 17 S. Commerce Way			5	12	2015	
City Bethlehem	State PA	Zip Code (Plus 4) 18017	Description of Expenditure Postage for mailer			

To Whom Paid US Postal Service			MO	DAY	YEAR	\$ 2,180.00
Mailing Address 17 S. Commerce Way			5	14	2015	
City Bethlehem	State PA	Zip Code (Plus 4) 18017	Description of Expenditure Postage for mailers			

<b>To Whom Paid</b> US Postal Service			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,180.00
<b>Mailing Address</b> 17 S. Commerce Way			5	14	2015	
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18017	<b>Description of Expenditure</b> Postage for mailer			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 17,806.84

# SCHEDULE IV

## STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations  
which are outstanding at the end of the reporting period

<b>Name of Filing Committee or Candidate</b> RESTOREPA				<b>Reporting Period</b> From: 5/5/2015 To: 6/8/2015			
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DATE				Outstanding Balance of Debt		
<b>Name of Creditor</b> Woodman, Wayne			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,500.00
<b>Mailing Address</b> 751 Benner Road			3	23	2015	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18104	<b>Description of Debt</b> Campaign loan			
DATE				Outstanding Balance of Debt		
<b>Name of Creditor</b> Scheller, Lisa J.			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,500.00
<b>Mailing Address</b> 751 Benner Road			3	23	2015	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18102	<b>Description of Debt</b> Campaign loan			
DATE				Outstanding Balance of Debt		
<b>Name of Creditor</b> Woodman, Wayne			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 3,500.00
<b>Mailing Address</b> 751 Benner Road			5	13	2015	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18104	<b>Description of Debt</b> Campaign loan			
DATE				Outstanding Balance of Debt		
<b>Name of Creditor</b> Scheller, Lisa J.			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 3,500.00
<b>Mailing Address</b> 751 Benner Road			5	13	2015	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18104	<b>Description of Debt</b> Campaign loan			

  

<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>	<b>PAGE TOTAL</b> \$ 12,000.00
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