	CAN	MPAIGN F	INANCE REP	ORT		
	Name and Ad	ldress of Fi	ing Candidate	or Com	mitte	e
Name:  Address: City, State, Zip:  Committee to Elect Ed Zucal 650 North 16 <sup>th</sup> St Allentown PA 18102  Report Filed By						
		Kepoi				
Candidate			Committee			X
Type of Rep	ort		Election Date	Amend	ed	Termination
2015 – 30 Day Post Primary			05/19/2015			
Termination	Report?					
Office Sough	nt By Candidate	<del>)</del>	Party	County		
Lehigh Coun	Lehigh County Sheriff			Lehigh		
	Sumn	nary of Rec	eipts & Expend	litures		
From:	From: 05/04/2015 To: 06/08/2015					
A. Amount Brought Forward From Last Report					5,450.57	
B. Total Monetary Contributions & Receipts (from Schedule I)					2,600.00	
C. Total Funds Available (Sum of Lines A & B)					8,050.57	
D. Total Expenditures (from Schedule III)					2,484.04	
E. Ending Cash Balance (Subtract Line D from Line C)					5,566.53	
F. Value of In-Kind Contributions Received (from Schedule II)				0.00		
G. Unpaid Debts & Obligations (from Schedule IV)  0.00						
*Complete re	ports including	signatures are	on file in the Of	fice of Vo	oter Re	egistration.

#### **SCHEDULE I**

## **Contributions and Receipts**

**Detailed Summary Page** 

Filer Identification Number			
		_	
1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor			
Total for the reporting period	(1)	\$	0
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)			
Contributions Received from Political Committees (Part A)		\$	0
All Other Contributions (Part B)		\$	800
Total for the reporting period	(2)	\$	800
3. Contributions Over \$250.00 (From Part C and Part D)			And the second of the second o
Contributions Received from Political Committees (Part C)		\$	0
All Other Contributions (Part D)		\$	1,800
Total for the reporting period	(3)	\$	1,800
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)			
Total for the reporting period	(4)	\$	ó

2,600

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)

#### PART B

### **All Other Contributions**

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Call Name of Contributor	Date MIN/QD/MAN/AS/

			PROTOR (PARA)	5	
Rick	ck Mongalitz		6/1/2015		100
	Manahasta Rd		Date (MIN/DD/YYYY)	\$	
	Manchester Rd.		un wurtung "Trong Trong Tr		
Allentown	State PA	<b>Zip Code</b> 18104	Wester (AMY/20)/(CO)	\$	
Fig Number Considered	中東門 ( - 東東)	<b>国教</b> 和《學科》(1000年)		5	
	ic Dowdle		6/2/15		250
	g a Tables All allosettes		CACCIMINADAVIA	5	
29	South Law Street				
Allentown	State PA	Zip.Code 18101	Date MM/DD/MM/	5	
			PRINTER (MANAGEMENT)	5	
	nthony Stellar		5/9/15		250
CONTRACTOR	Address		THE MATERIAL	3	
5190	Memorial Road				
Schnecksville	State PA	<b>18078</b>		8	
		を開きてお客様と発展する。 ・ 他に、 4年間に 発展する。			
Ay	vasofia Top Diner		5/16/15	3	200
	National .		One Day (DAY)	5	
1019	Union Blvd.				The second secon
<b>6</b> 7 N	State	Zp code	PER WINDERFOR	\$	
Allentown	PA	18109			
			Martine and Committee of the State of the	5	
	NATION OF MARKET		Date (MM/DP/AVAY)	\$	
			The school sector detail delicie dit		
PERSONAL PROPERTY OF THE PROPE	Size	<b>21.636</b>	Date: DAIN/DD/AYON	S	
			Andread and Assessment	5	
			DESCRIPTION OF THE PROPERTY OF	S	
Selection	. Address		Section of courses, but in deficition in		
	Sace	75 code	Cate (MIN/OC/46)()	5	

## PART D All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part C)

FULL Manifes of Contributor			Linia Com Had WALLES		
Wael Yac	coub		6/1/15	500	
House # Street Addre			Date (MMA/OU/YYYY)		
525	5th. Street				
City Whitehall	PA	<b>75p Code</b> 18052			
Employer Name					
Employer Malling Address /	Whitehall Medical Asso	ociates	<b>Occupation</b> physician		
Principal Place of Business	525 5th. Street Whiteha	ıall, PA 18052			
Full Name of Contributor			Pass (walled) to the		
	& Michael Ross		5/9/15	500	
House # Street Addres	33. <b>1</b>		Date (New/OD/1777)	3	
	Jordan Street				
<b>City</b> Orefield	State PA	<b>Zip Code</b> 18069	CTD MANNOW	3	
Enacy College			S COMPANIA D		
Employer Malling Address/	A-1 Towing		Business own	ier	
Principal Place of Business	1046 N. Gilmore Street	Allentown, PA 18052			
Full Name of Contributor	<u> </u>		Carle Carles (Carles)		
Aziz Weht	bey		5/13/15	300	
House 8			Date (MAX/DE)/YYYY		
815	Hanover Ave.				
Allentown	State PA	18109	Acta May Aby Anny		
Employer Nesse Employer Malling Address /	Waheeb inc.		Business owner	er	
Principal Place of Business	815 Hanover Ave. Allent	town, PA 18109	<del>_</del>		
Full Name of Contributor				-10.7	
Nidal Yaco			6/2/15	500	
450 Street Address	Pershing Blvd.		Debi [MM/DD/YYYY]		
<b>Chy</b> Whitehall	State	<b>Zie Code</b> 18052	Date (MRA/DD/YYYY)		
Employer Name					
	Whitehall Medical & Den	ntal Associates	Dentist		
Employer Mailing Address / Principal Place of Business	525 5th. Street Whitehall	II, PA 18052			

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# Statement of Expenditures

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City		State	Zip Code	
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House #	Street Address			Oscorption of Expanditure
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House #	House # Street Address			
City		State	Zip Code	
		1424.340		