#### CAMPAIGN FINANCE REPORT Name and Address of Filing Candidate or Committee Supports For Thomas Slonaker Name: 7090 Saw Mill Rd Address: City, State, Zip: Germansville PA 18053 Report Filed By Candidate X Committee Type of Report **Election Date** Amended **Termination** 2015 – 2<sup>nd</sup> Friday Pre-Election 11/03/2015 **Termination Report?** Office Sought By Candidate County Party Lehigh County Controller $\overline{D}$ Lehigh **Summary of Receipts & Expenditures** 06/092015 From: 10/19/2015 To: A. Amount Brought Forward From Last Report 3,064.12 B. Total Monetary Contributions & Receipts (from Schedule I) 18,000.00 C. Total Funds Available (Sum of Lines A & B) 21,064.12 D. Total Expenditures (from Schedule III) 2,256.94 E. Ending Cash Balance (Subtract Line D from Line C) 18.807.18 F. Value of In-Kind Contributions Received (from Schedule II) 0.00 G. Unpaid Debts & Obligations (from Schedule IV) (87,801.18)

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

#### PAGE 2 OF \_\_\_\_\_\_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

#### **Detailed Summary Page**

Name of Filing Committee or Candidate Supporters For Thomas Slonaker	From 0 (a 0.0	100 PI 01 01 2015
JUPPEL KIS FOLL KOMOS STONAKEL		
1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS	PER CONT	RIBUTOR
TOTAL for the Reporting Period	(1)	\$ .
2. CONTRIBUTIONS \$50.01 TO \$250.00 FROM PART A AND PART E	Ŋ	
Contributions Received from Political Committees (Part A)		s
All Other Contributions (Part B)		\$
TOTAL for the Reporting Period	(2)	\$
·	-	
3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		
Contributions Received from Political Committees (Part C)		s
All Other Contributions (Part D)		\$ 18000.00
TOTAL for the Reporting Period	(3)	\$ 18000.00
4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CH	ECKS, ETC	: (FROM PART E)
TOTAL for the Reporting Period	(4)	S
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.)		\$ 18000.00

### PAGE 3 OF 6

### 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.)

Name of Filing Committee or Candidate  Supporters Forth	o no	s Slanke	ح	From C	609	2106 PIOT 01 STON
70/201 JE13 191 1.	_ (	- 310/00	· !	DATE		AMOUNT
Full Name of Contributor			MO.	DAY	YEAR	¢ .
Thomas Slopaker			10	16	2012	\$ 18000.00
			MO.	DAY	YEAR	\$
4110 Scheidys Rd	Faces 1	Zip Code (Plus 4)	MO.	DAY	YEAR	
City .	State	- 6208/		<u> </u>	- IEAN	\$ .
Employer Name	<u>, 61</u>	18079	Occupa			_
Self	•		Ca	tobib 4	re/Ta	+ Preparor
Employer Mailing Address/Principal Place of Business						
Same						
Full Name of Contributor			MO.	DAY	YEAR	\$
				DAY	YEAR	
Mailing Address			MO.		TEAN	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
City		-				\$
Employer Name			Occup	rtion		
			<u> </u>			
Employer Mailing Address/Principal Place of Business						
Full Name of Contributor			MO.	DAY	YEAR	S
			MO.	DAY	YEAR	
Mailing Address				<u> </u>	TEAN	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
•,		-				\$
Employer Name			Occup	ntion	<del> </del>	
Employer Mailing Address/Principal Place of Business			<u> </u>			
Full Name of Contributor			MO.	DAY	YEAR	s
			MO.	DAY	YEAR	
Mailing Address					1,5.5	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
	i	-				\$
Employer Name	<u> </u>		Occup	etion	<del></del>	
			1			
Employer Mailing Address/Principal Place of Business						
Full Name of Contributor			100	DAY	YEAR	\$
			MO	DAY	YEAR	
Mailing Address						\$
City	State	Zip Code (Plus 4)	MO	DAY	YEAR	
		-				\$
Employer Name			Occup	etien		
			1	<u> </u>		
Employer Mailing Address/Principal Place of Business						
						TRACE POTAL
Enter Grand Total of Part D on Schor	tile l	Detailed Summer	v Pan	e Section	n 3	PAGE TOTAL 18000,00
						1000000

#### SCHEDULE III

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate					g Period	
Supporters For Thom	200	Slowles	_	From	<u>0609</u>	2015 to 10192015
		- 15, -2,		L		
To Whom Paid			1 140	244	VEAR	Amount
Kennedy Printing Co	AMC.		M0.	<del>  \'\'\'\'\\</del>	2015	\$726.84
Mailing Address	· · ·		Descri	ption of Ex		
5534 Baltimore Ave Philadelphia			.   8	いいかん	ina 15	Palm Cards
City	State	1	<del>u                                    </del>		- 0 +	1 04.03
Philadelohia	49	19143-				
			140	7	1	Amount
Lewigh County Denoce	alic	Party	70	1 1/4	1 Aug	\$ 100,00
Mailing Address	<u> </u>		Descri	ption of Ex	(penditure	Amount \$ 100,00
PO BOX 3142				d ato	الله	· C
,	State		<u>,                                    </u>		30110	
Wescoesu:1/e	18	18106-	ļ			
To Whom Paid			MO.	DAY	YEAR	Amount
the Press						
Mailing Address		<del></del>	Descri	tion of Ex	penditure	\$ 1430.10
1633 N 26th St	_		Ne	ر ه ۱۵ وحد	nor A8	duertise ment
	State	Zip Code Plus 4	)	1 2	/21 1 1	- TISE WENCE
Allentown A	199	18104 -				
To Whom Paid			MO.	DAY	YEAR	Amount
					1	s
Mailing Address			Descrip	tion of Ex	penditure	
City			ŀ			
City	State	Zip Code (Plus 4			<del></del>	
		_				
To Whom Paid			MO.	DAY	YEAR	Amount
		_			1	s
Mailing Address			Descrip	tion of Ex	penditure	
City			_L			
S.,,	State	Zip Code (Plus 4)				
		-				
To Whom Paid			MO.	DAY	YEAR	Amount
Mailing Address						1 s
weiling Address			Descript	ion of Exp	enditure	
City	-					
	State	Zip Code (Plus 4)				
Y a Mile and the second	<u>i</u>	-				
To Whom Paid			MO.	DAY	YEAR	Amount
Mailing Address						ls
Manual Audiess			Descript	ion of Exp	enditure	
city	,					
,	State	Zip Code (Plus 4)				
		-				
To Whom Paid			MO.	DAY	YEAR	Amount
Mailing Address						\$
•			Descripti	on of Expe	enditure	
ity	Canal 1	\$1. O. d. D.				
	State	Zip Code (Plus 4)	i			
		<del>-</del>				

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL \$ 2256.94

## 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.

Name of Filing Committee or Candidate	-		Reporting		
Supporters For Thomas	Slowake	5۲	From C	6093	015 to 10192015
Name of Creditor					Outstanding Balance of Debt
Norean Schneck	DATE	_	<del></del>	T	\$ 860,36
4110 Scheidys Rd	DEBT	MO.	26	O3	
City	THECOMED	State	Zip Code		
Whitehall		18	1802		
Description of Debt					
Loan					Outstanding Balance of Debt
Norsen Schneck					\$3740.82
Ada to a Address	DATE	MO.	DAY	YEAR	
4110 Scheidys Rd	INCURRED	10	89	03	
"Whitehall		PA	18000		
Description of Debt	<del> </del>	110	1803		
Loan					
Name of Creditor					Outstanding Balance of Debt
Thomas Slonater	Tass	T	T		\$6000.00
4110 Scheidys Rd	DATE DEST INCURRED	10	89	03	
E C 117	TINCOMRED	State	Zip Code		
whitehall		PA	1800-		
Description of Debt					
Name of Ereditor					Outstanding Balance of Debt
Thomas Slonaker					\$ 1000.00
Martine Address	DATE DEBT	MO.	DAY	YEAR	
4110 Scheidys Rd	INCURRED	State	Zia Code	03	
"whitehall		A	105-	-	
Description of Debt		1111			
Loan					
Thomas Slowaker					Outstanding Balance of Debt
	DATE	MC.	DAY	YEAR	\$10000.00
Milo Scheidys Rd	DEBT INCURRED	0.5	02	67	
		State	Zip Code		
Description of Debt		Ph	18020-		
Load					
Name of Creditor					Outstanding Balance of Debt
Thomas Slowaker					\$ 20000.00
Mailing Address 4110 Scheidys Rd	DATE	MO.	DAY	YEAR	
City	INCURRED	State	210 Code	Plus 4	
Whitehall		4	1805-		
Description of Debt					
Loan					
Enter Grand Total of Illeraid Dahas as Bassa &					PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Re	port Cover F	<b>-age</b> , 1	τ <b>em</b> G.		81.1001.18

### STATEMENT OF UNPAID DEBTS

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

Name of Filing Committee or Candidate		Reporting Period	_
Supporters For Thomas	s Slonal	KOC From 06092	2106 P101 ot 219
200000			
Name of Creditor			Outstanding Balance of Debt
Thomas Slowaker	DATE	MO. DAY YEAR	\$ 700.00
4110 Scheidyc Rd	DEBT	4 08 69	
City		State Zip Code (Plus 4)	
Whitehall		PA 18452	
Description of Debt			
			Outstanding Balance of Debt
Thomas Stonardi			\$ 500.00
4110 Scheidys Rd	DATE DEBT	8 25 10	
■ City	INCURRED	State Zip Code (Pius 4)	
Whitehall		PA 18052-	
Description of Debt			
Loan			Outstanding Balance of Debt
Thomas Slonaker			S 2000.00
Mailing Address	DATE	MO. DAY YEAR	, , , , ,
4110 Scheidys Rd	DEBT	5 6 11	
whitehall		State Zip Code (Plus 4)	
Description of Debt		160 1800	
Local			l
hame of Creditor			Outstanding Balance of Debt
name of creditor Thomas Slonater	¥		Outstanding Balance of Debt \$1000.60
name of creditor Thomas Slonater	DATE DEBT	MO. DAY YEAR	_
Marting Address HILO Sheidys Rd		State Zip Code (Plus 4:	_
Marling Address Hollo Sheidys Rd  City Whitehall	DEBT	07 01 11	_
Marting Address  Hilo Scheidys Rd  City  Whitehall  Description of Debt	DEBT	State Zip Code (Plus 4:	
Marling Address  Marling Address  HILO Scheidys Rd  City Whitehall  Description of Debt  Loan	DEBT	State Zip Code (Plus 4:	\$10000.00
Maring Address HILO Sheidys Rd  City Whitehall  Description of Debt  Loan	DEBT	State Zip Code (Plus 4:	
Marting Address  Marting Address  HILO Sheidys Rd  City Whitehall  Description of Debt  Loan  Name of Creditor  Thomas Slonaker  Marting Address  Marting Address	DEBT INCURRED	State Zip Code (Plus 4: PR (8652)=	\$   0 0 0 0 . 60
Name of Creditor Thomas Slonater  Mailing Address HILO Scheidys Rd  City Whitehall  Description of Debt Loan  Name of Creditor Thomas Slonater  Mailing Address  Ullo Scheidys Rd	DEBT INCURRED	07 01 11   State   Zip Code (Pius 4:   PM   18652=   MO.   DAY   YEAR   10   17   11	\$   0 0 0 0 . 60
Name of Creditor Thomas Slonater  Mailing Address  Loan  Name of Creditor  Loan  Name of Creditor  Thomas Slonater  Mailing Address  Ullo Sheilys Rd  City  City	DEBT DEBT	State Zip Code (Pius 4: PR (865)  MO. DAY YEAR 10 (7 + 1) State Zip Code (Pius 4:	\$   0 0 0 0 . 60
Name of Creditor Thomas Slonater  Mailing Address  HILO Sheidys Rd  City Whitehall  Description of Debt Loan  Name of Creditor Thomas Slonater  Mailing Address  HILO Sheidys Rd  City Whitehall  Description of Debt	DEBT DEBT	07 01 11   State   Zip Code (Pius 4:   PM   18652=   MO.   DAY   YEAR   10   17   11	\$   0 0 0 0 . 60
Name of Creditor Thomas Slonater  Mailing Address  LIO Scheidys Rd  City Whitehall  Description of Debt  Loan  Name of Creditor Thomas Slonater  Mailing Address  U110 Scheidys Rd  City Whitehall  Description of Debt  Loan	DEBT DEBT	State Zip Code (Pius 4: PR (865)  MO. DAY YEAR 10 (7 + 1) State Zip Code (Pius 4:	SIDODO.00  Outstanding Balance of Debt SIS DOD.00
Name of Creditor Thomas Slonater  Mailing Address  Allo Scheidys Rd  City Whitehall  Description of Debt Loan  Name of Creditor Thomas Slonater  Mailing Address  4110 Scheidys Rd  City Whitehall  Description of Debt Loan	DEBT DEBT	State Zip Code (Pius 4: PR (865)  MO. DAY YEAR 10 (7 + 1) State Zip Code (Pius 4:	SIDODO.60  Outstanding Balance of Debt SIS DOD.00
Name of Creditor Thomas Slonater  Marling Address  LIO Scheidys Rd  City Whitehall  Description of Debt Loan  Name of Creditor Thomas Slonater  Marling Address  U110 Scheidys Rd  City Whitehall  Description of Debt Loan	DEBT INCURRED DEBT INCURRED	State Zip Code (Pius 4: PR (865)  MO. DAY YEAR 10 (7 + 1) State Zip Code (Pius 4:	Outstanding Balance of Debt \$ 1 5 000;00
Name of Creditor Thomas Slonater  Marling Address  LIO Sheidys Rd  City Whitehall  Description of Debt  Loan  Name of Creditor Thomas Slonaker  Mailing Address  U110 Sheidys Rd  City Whitehall  Description of Debt  Loan  Name of Creditor Thomas Slonaker  Mailing Address  HIO Scheidys Rd  Name of Creditor Thomas Slonaker  Mailing Address  HIO Scheidys Rd	DEBT INCURRED	State Zip Code (Pius 4: PR 18652-  MO. DAY YEAR 10 17 91 State Zip Code (Pius 4: PA 18652-	Outstanding Balance of Debt \$ 1 5 000,00
Name of Creditor Thomas Slonater  Marling Address  LIO Sheidys Rd  City Whitehall  Description of Debt  LOAN  Name of Creditor Thomas Slonaker  Mailing Address  UIIO Sheidys Rd  City  Description of Debt  LOAN  Name of Creditor Thomas Slonaker  Marling Address  HIO Scheidys Rd  City  Whitehall  Description of Debt  LOAN  Name of Creditor Thomas Slonaker  Marling Address  HIO Scheidys Rd  City  Whitehall	DEBT INCURRED  DATE DEBT INCURRED	State Zip Code (Pius 4: PR 18652	Outstanding Balance of Debt \$ 1 5 000 and 00
Name of Creditor Thomas Slonater  Marling Address  LIO Sheidys Rd  City Whitehall  Description of Debt  LOAN  Name of Creditor Thomas Slonaker  Mailing Address  UILO Sheidys Rd  City Whitehall  Description of Debt  LOAN  Name of Creditor Thomas Slonaker  Marling Address  HIO Scheidys Rd  City Whitehall  Description of Debt  City Whitehall  Description of Debt	DEBT INCURRED  DATE DEBT INCURRED	MO. DAY YEAR  NO. DAY YEAR	Outstanding Balance of Debt \$ 1 5 000 and 00
Name of Creditor Thomas Slonater  Marling Address  LIO Sheidys Rd  City Whitehall  Description of Debt  LOAN  Name of Creditor Thomas Slonaker  Mailing Address  UIIO Sheidys Rd  City  Description of Debt  LOAN  Name of Creditor Thomas Slonaker  Marling Address  HIO Scheidys Rd  City  Whitehall  Description of Debt  LOAN  Name of Creditor Thomas Slonaker  Marling Address  HIO Scheidys Rd  City  Whitehall	DEBT INCURRED  DATE DEBT INCURRED	MO. DAY YEAR  NO. DAY YEAR	Outstanding Balance of Debt \$15000.00  Outstanding Balance of Debt \$18000.00
Name of Creditor Thomas Slonater  Marling Address  LIO Sheidys Rd  City Whitehall  Description of Debt  LOAN  Name of Creditor Thomas Slonaker  Mailing Address  UILO Sheidys Rd  City Whitehall  Description of Debt  LOAN  Name of Creditor Thomas Slonaker  Marling Address  HIO Scheidys Rd  City Whitehall  Description of Debt  City Whitehall  Description of Debt	DEBT INCURRED  DATE DEBT INCURRED  DATE DEBT INCURRED	STORE ZIP CODE (PIUS 4: PR 18652  MO. DAY YEAR 10 17 91  STORE ZIP CODE (PIUS 4: PA 18652  MO. DAY YEAR 10 16 15  STORE ZIP CODE (PIUS 4: PA 18052	Outstanding Balance of Debt \$ 1 5 000,00