	CA	MPAIGN 1	FINANCE REI	PORT		****
	Name and A	ddress of F	iling Candidate	or Con	ımitte	ee
Name: Address: City, State, 7	Zip:					
Candidate		Тера	Committee			
Type of Rep 2016 – 2 nd Fr	ort iday Pre-Primar	у	Election Date Amend 04/26/2016		led	Termination
Termination	-					
Office Sough	Office Sought By Candidate		Party	County	7	
Lehigh Coun	ty PAC			Lehigh		
	Sumr	nary of Rec	eipts & Expend	litures		
From:	03/08/2016		To:	04/11/2	016	
A. Amount B	Frought Forwa	rd From Las	t Report	I	13,1	83.32
B. Total Mon	etary Contribu	utions & Rec	ceipts (from Sche	dule I)	1.00	
C. Total Fun	ds Available (S	um of Lines	A & B)		13,10	84.32
D. Total Exp	enditures (fron	1 Schedule I	II)		2,07	7.89
E. Ending Ca	ish Balance (Su	ıbtract Line	D from Line C)		11,10	06.43
F. Value of Ir	n-Kind Contrib	outions Rece	ived (from Sched	lule II)	0.00	
G. Unpaid De	ebts & Obligati	ions (from S	chedule IV)		0.00	
					1	

^{*}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	Reporting	Period		
FOR THE PEOPLE	From:	3/8/	2 <u>016</u> To:	4/11/2016
Unitemized Contributions Received - \$ 50.00 or Less Per Contributor		482		a de la companya de La companya de la companya de l
TOTAL for the Reporting	Period	(1)	\$	0.00
. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D) Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	1.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa	nd enter an	nount i.)	\$	1.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

With an ag	gregate rais						
Name of Filing Committee or Candid	ate		Reporting F	Period			
			From:		то:		
				DATE			AMOUNT
Full Name of Contributing Committee			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4))				
					1	Γ	PAGE TOTAL

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

0.00

PART B

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from

	Reporting Period							
Name of Filing Committee o	or Candidate		From:			Го:		
				DATE		AMO	UNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						\$	0.0	
	State	Zip Code (Plus 4)						

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.

Name of Filing Committee or Candid	me of Filing Committee or Candidate From:			Reporting Period To:						
				DATE			AMOUNT			
Full Name of Contributing Committ	ree			МО	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Cod	le (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary F	Page, Section	on 3.			\$	0.00		

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				Repo	orting Per	riod			
				Fron	1:		То	:	
					D#	ATE		АМС	DUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Ziţ	Code (Plus	4)			:		
Employer Name					Occupa	tion	<u> </u>		
Employer Mailing Address/Principal Pla Business	ce of		City		J	State		Zip Code	(Plus 4)
			·		ion 3			PA	GE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detail	ed Sumr	mary Page,	Secti	IUII <i>3</i> .			\$	0.00

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.

Name of Filing Committee or Candidat	:e		Reporti	ing Period	i				
FOR THE PEOPLE			From:		3/8/2010	<u>6</u> To:	4/11/2016		
				D/	ATE		AMOUNT		
Full Name Embassy Bank				мо	DAY	YEAR	\$	1.00	
Mailing Address PO Box 20405			3	31	2016		1.00		
City Lehigh Valley	State	Zip Code	(Plus 4)		31	2020	į		
City Lehigh Valley	PA	18002							
Receipt Description interest		_							
								PAGE TOTAL	
Enter Grand Total of Part E on Sch	edule I, Detaile	d Summary Page	e, Section	ı 4.			\$	1.00	

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**

Name of Filing Committee or Candidate	Reporti	ng Period			
Name of Filling Committees of	From:		3/8/2016	то:	4/11/2016
FOR THE PEOPLE					
. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS I	PER CONTR	IBUTOR	1		
TOTAL for the Reporting P		(1)	\$		0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PA	RT F)				
TOTAL for the Reporting I		(2)	\$		0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)					
TOTAL for the Reporting	Period	(3)	\$		0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page) (Add and e, Item F.)	enter	\$		0.00

SCHEDULE II PART F

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

lame of Filing Committee or Ca	ndidate	F	Reporting	Period			
lame of rilling commerces of			From:			To:	
				DATE			MOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F	on Schedule II, In-Ki	nd Contributions Deta	iled Su	mmary P	age,		PAGE TOTAL
Section 2.	On Semesary					\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Cand	idate				Rep	orting P	eriod			
					Fro	m:		То:		
		 					DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address						 			\$	0.00
City	State	Zip Code(Plus 4)								
Employer of Contributor			<u> </u>			Occupa	ntion		1	
Employer Mailing Address/Princip Business	oal Place of	City	!	State		Zip 4)	Code(Plus	Descr	ption of	Contribution
Enter Grand Total of Part G of Summary Page, Section 3.	on Schedule II	l, In-Kind	 Contributio	ns D	etail	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

lame of Filing Committee or Candid	iate		Reportin	g Period				
OR THE PEOPLE			From	<u>3/8</u>	3/2016	To: <u>4/11/2016</u>		
				DATE			AMOUNT	
o Whom Paid			мо	DAY	YEAR	-		
Card Services								
Mailing Address PO Box 13337	3	11	2016	\$	1,872.35			
Tibus and the later	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure			
C ity Philadelphia	PA	19101	expens	ses				
To Whom Paid			мо	DAY	YEAR			
Card Services								
Mailing Address PO Box 13337			3	17	2016	\$	205.54	
City Philadelphia	State	Zip Code (Plus 4)	Descr	iption of Ex	penditure	•		
rimaucipma	PA	19101	lunch	expenses				
							PAGE TOTAL	
Enter Grand Total of Expendit	ures on Page 1, Re	eport Cover Page, Item	D.			\$	2,077.89	