

CAMPAIGN FINANCE REPORT

Name and Address of Filing Candidate or Committee

Name:	<i>For The People</i>
Address:	<i>PO Box 1881</i>
City, State, Zip:	<i>Allentown PA 18105</i>

Candidate		Committee	
Type of Report	Election Date	Amended	Termination
2016 – Annual Report			
Termination Report?			
Office Sought By Candidate	Party	County	
<i>Lehigh County PAC</i>		<i>Lehigh</i>	

Summary of Receipts & Expenditures

From:	<i>11/29/2016</i>	To:	<i>12/31/2016</i>
A. Amount Brought Forward From Last Report			<i>5,059.31</i>
B. Total Monetary Contributions & Receipts (from Schedule I)			<i>1.87</i>
C. Total Funds Available (Sum of Lines A & B)			<i>5,061.18</i>
D. Total Expenditures (from Schedule III)			<i>447.30</i>
E. Ending Cash Balance (Subtract Line D from Line C)			<i>4,613.88</i>
F. Value of In-Kind Contributions Received (from Schedule II)			<i>0.00</i>
G. Unpaid Debts & Obligations (from Schedule IV)			<i>0.00</i>

*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 FOR THE PEOPLE	Reporting Period From: <u>11/29/2016</u> To: <u>12/31/2016</u>
--	--

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor		
	TOTAL for the Reporting Period (1)	\$ 0.00

2. 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

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)		
	TOTAL for the Reporting Period (4)	\$ 1.87

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.)		\$ 1.87
---	--	---------

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.

Name of Filing Committee or Candidate	Reporting Period
	From: To:
DATE AMOUNT	

Full Name of Contributing Committee	MO	DAY	YEAR	AMOUNT
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 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
\$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A)**

Name of Filing Committee or Candidate	Reporting Period
	From: _____ To: _____
DATE AMOUNT	

Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

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 Candidate	Reporting Period
	From: To:

	DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

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.)

Name of Filing Committee or Candidate	Reporting Period
	From: To:

	DATE		AMOUNT
Full Name of Contributor	MO	DAY	YEAR
Mailing Address			\$ 0.00
City	State	Zip Code (Plus 4)	
Employer Name	Occupation		
Employer Mailing Address/Principal Place of Business	City	State	Zip Code (Plus 4)

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

PAGE TOTAL
\$ 0.00

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.

Name of Filing Committee or Candidate FOR THE PEOPLE	Reporting Period From: <u>11/29/2016</u> To: <u>12/31/2016</u>
--	--

				DATE			AMOUNT
Full Name		MO	DAY	YEAR			
Embassy Bank							\$ 0.47
Mailing Address PO Box 20405				11	30	2016	
City Lehigh Valley	State PA	Zip Code (Plus 4) 18002					
Receipt Description interest on account for Sept							
Embassy Bank							\$ 0.48
Mailing Address PO Box 20405				11	30	2016	
City Lehigh Valley	State PA	Zip Code (Plus 4) 18002					
Receipt Description interest on account for October							
Embassy Bank							\$ 0.47
Mailing Address PO Box 20405				11	30	2016	
City Lehigh Valley	State PA	Zip Code (Plus 4) 18002					
Receipt Description interest from account for November							
Embassy Bank							\$ 0.45
Mailing Address PO Box 20405				12	31	2016	
City Lehigh Valley	State PA	Zip Code (Plus 4) 18002					
Receipt Description interest on account for December							

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

PAGE TOTAL	
\$	1.87

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 FOR THE PEOPLE	Reporting Period From: <u>11/29/2016</u> To: <u>12/31/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - 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 (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)	\$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period
	From: _____ To: _____

			DATE			AMOUNT
Full Name of Contributor			MO	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-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL
						\$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period
	From: _____ To: _____

				DATE	AMOUNT	
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code(Plus 4)				
Employer of Contributor			Occupation			
Employer Mailing Address/Principal Place of Business	City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					PAGE TOTAL	0.00

**SCHEDULE III
STATEMENT OF EXPENDITURE**

Name of Filing Committee or Candidate	Reporting Period
FOR THE PEOPLE	From <u>11/29/2016</u> To: <u>12/31/2016</u>

To Whom Paid	DATE			AMOUNT
	MO	DAY	YEAR	
Embassy Bank				
Mailing Address PO Box 20405	12	8	2016	\$ 447.30
City Lehigh Valley	State PA	Zip Code (Plus 4) 18002	Description of Expenditure event expenses	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL \$ 447.30