

CAMPAIGN FINANCE REPORT			
Name and Address of Filing Candidate or Committee			
Name:	<i>Lehigh County Tax Facts</i>		
Address:	<i>987 Postal Rd</i>		
City, State, Zip:	<i>Allentown PA 18109</i>		
Report Filed By			
Candidate		Committee	
Type of Report	Election Date	Amended	Termination
2015 - 2 nd Friday Pre-Primary	05/19/2015		
Termination Report?			
Office Sought By Candidate	Party	County	
		<i>Lehigh</i>	
Summary of Receipts & Expenditures			
From:	<i>01/01/2015</i>	To:	<i>05/04/2015</i>
A. Amount Brought Forward From Last Report			<i>35,000.00</i>
B. Total Monetary Contributions & Receipts (from Schedule I)			<i>0.00</i>
C. Total Funds Available (Sum of Lines A & B)			<i>35,000.00</i>
D. Total Expenditures (from Schedule III)			<i>25,315.00</i>
E. Ending Cash Balance (Subtract Line D from Line C)			<i>9,685.00</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.

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>Lehigh County Tax Facts</i>	Reporting Period From <i>1/1/15</i> To <i>5/4/15</i>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
	TOTAL for the Reporting Period	(1) \$ <i>- 0 -</i>

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)		
Contributions Received from Political Committees (Part A)		\$
All Other Contributions (Part B)		\$
	TOTAL for the Reporting Period	(2) \$ <i>- 0 -</i>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		
Contributions Received from Political Committees (Part C)		\$
All Other Contributions (Part D)		\$
	TOTAL for the Reporting Period	(3) \$ <i>- 0 -</i>

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)		
	TOTAL for the Reporting Period	(4) \$ <i>- 0 -</i>

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)</i>	\$ <i>- 0 -</i>
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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 <i>Lehigh County Tax Facts</i>	Reporting Period From <i>1/1/15</i> To <i>5/4/15</i>
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	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributing Committee				\$ -0-
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$

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

PAGE TOTAL \$ -0-

**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 <i>Lehigh County Tax Facts</i>	Reporting Period From <i>1/1/15</i> To <i>5/4/15</i>
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	DATE			AMOUNT
	MO.	DAY	YEAR	\$
Full Name of Contributor				\$ <u>0-</u>
Mailing Address				
City				
State				
Zip Code (Plus 4)				
Full Name of Contributor				\$
Mailing Address				
City				
State				
Zip Code (Plus 4)				
Full Name of Contributor				\$
Mailing Address				
City				
State				
Zip Code (Plus 4)				
Full Name of Contributor				\$
Mailing Address				
City				
State				
Zip Code (Plus 4)				
Full Name of Contributor				\$
Mailing Address				
City				
State				
Zip Code (Plus 4)				
Full Name of Contributor				\$
Mailing Address				
City				
State				
Zip Code (Plus 4)				
Full Name of Contributor				\$
Mailing Address				
City				
State				
Zip Code (Plus 4)				
Full Name of Contributor				\$
Mailing Address				
City				
State				
Zip Code (Plus 4)				
Full Name of Contributor				\$
Mailing Address				
City				
State				
Zip Code (Plus 4)				

PAGE TOTAL	\$ <u>0-</u>
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Enter Grand Total of Part B 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 over \$250.00 in the reporting period.

Name of Filing Committee or Candidate <i>Lehigh County Tax Facts</i>	Reporting Period From <i>1/1/15</i> To <i>5/4/15</i>
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				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributing Committee							\$ -0-
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					\$
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					\$
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					\$
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					\$
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					\$
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					\$
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					\$
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					\$

PAGE TOTAL	\$ -0-
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Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.