

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

|  |                          |           |                         |                                    |                 |                         |            |  |                              |                    |                                     |                    |
|--|--------------------------|-----------|-------------------------|------------------------------------|-----------------|-------------------------|------------|--|------------------------------|--------------------|-------------------------------------|--------------------|
| <b>Filer Identification Number :</b>   |                          | 20120115  |                         | <b>Report Filed By :</b>           |                 | <b>CANDIDATE</b>        |            | <b>COMMITTEE</b> <input checked="" type="checkbox"/> |                              | <b>LOBBYIST</b>    |                                     |                    |
| <b>Name of Filing Committee, Candidate or Lobbyist:</b> SCHLOSSBERG, MIKE FRIENDS OF |                          |           |                         |                                    |                 |                         |            |  |                              |                    |                                     |                    |
| <b>Street Address:</b> PO BOX 1537   |                          |           |                         |                                    |                 |                         |            |  |                              |                    |                                     |                    |
| <b>City:</b> ALLENTOWN   |                          |           |                         |                                    |                 | <b>State:</b> PA        |            |  | <b>Zip Code:</b> 18105-1537  |                    |                                     |                    |
| <b>TYPE OF REPORT</b><br><br>(place X to the right of report type)                   | 6TH TUESDAY PRE-PRIMARY  | 1.        | 2ND FRIDAY PRE-PRIMARY  | 2.                                 | 30 DAY PRIMARY  | POST-                   | 3.         | AMENDMENT REPORT?                                    | Yes                          | No                 | <input checked="" type="checkbox"/> |                    |
|  | 6TH TUESDAY PRE-ELECTION | 4.        | 2ND FRIDAY PRE-ELECTION | 5.                                 | 30 DAY ELECTION | POST-                   | 6.         | TERMINATION REPORT?                                  | Yes                          | No                 | <input checked="" type="checkbox"/> |                    |
|  | ANNUAL REPORT            | 7. X      | Year 2016               | <b>FILING METHOD ( ) CHECK ONE</b> |                 |                         |            | <b>PAPER</b> <input checked="" type="checkbox"/>     | <b>DISKETTE</b>              |                    |                                     |                    |
| <b>Name of Office Sought by Candidate:</b>   |                          |           |                         |                                    |                 | <b>DATE OF ELECTION</b> |            |  | <b>District Number</b>       | <b>Office Code</b> | <b>Party Code</b>                   | <b>County Code</b> |
| REPRESENTATIVE IN THE GENERAL ASSEMBLY   |                          |           |                         |                                    |                 | <b>MO</b>               | <b>DAY</b> | <b>YEAR</b>  | 132                          | STH                | DEM                                 | 39                 |
|  |                          |           |                         |                                    |                 | 11                      | 8          | 2016   | (SEE INSTRUCTIONS FOR CODES) |                    |                                     |                    |
| <b>Summary of Receipts and Expenditures from:</b>                                    |                          | <b>MO</b> | <b>DAY</b>              | <b>YEAR</b>                        | <b>TO</b>       | <b>MO</b>               | <b>DAY</b> | <b>YEAR</b>  | <b>FOR OFFICE USE ONLY</b>   |                    |                                     |                    |
|  |                          | 11        | 29                      | 2016                               |                 | 12                      | 31         | 2016   |                              |                    |                                     |                    |
| <b>A. Amount Brought Forward From Last Report</b>                                    |                          |           |                         |                                    |                 | \$ 21,070.97            |            |  |                              |                    |                                     |                    |
| <b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>                |                          |           |                         |                                    |                 | \$ 99.20                |            |  |                              |                    |                                     |                    |
| <b>C. Total Funds Available (Sum Of Lines A and B)</b>                               |                          |           |                         |                                    |                 | \$ 21,170.17            |            |  |                              |                    |                                     |                    |
| <b>D. Total Expenditures (From Schedule III)</b>                                     |                          |           |                         |                                    |                 | \$ 3,661.01             |            |  |                              |                    |                                     |                    |
| <b>E. Ending Cash Balance (Subtract Line D From Line C)</b>                          |                          |           |                         |                                    |                 | \$ 17,509.16            |            |  |                              |                    |                                     |                    |
| <b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>                 |                          |           |                         |                                    |                 | \$ 0.00                 |            |  |                              |                    |                                     |                    |
| <b>G. Unpaid Debts And Obligations (From Schedule IV)</b>                            |                          |           |                         |                                    |                 | \$ 0.00                 |            |  |                              |                    |                                     |                    |

## AFFIDAVIT SECTION

### PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

### Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                       |
| SCHLOSSBERG, MIKE FRIENDS OF                 | From: <u>11/29/2016</u> To: <u>12/31/2016</u> |

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

|  |         |
|--|---------|
| <b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b> |         |
| <b>Contributions Received From Political Committees (Part A)</b>                 | \$ 0.00 |
| <b>All Other Contributions (Part B)</b>  | \$ 0.00 |
| <b>TOTAL for the Reporting Period (2)</b>  | \$ 0.00 |

|   |         |
|---|---------|
| <b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b> |         |
| <b>Contributions Received From Political Committees (Part C)</b>        | \$ 0.00 |
| <b>All Other Contributions (Part D)</b>                                 | \$ 0.00 |
| <b>TOTAL for the Reporting Period (3)</b>                               | \$ 0.00 |

|  |          |
|--|----------|
| <b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b> |          |
| <b>TOTAL for the Reporting Period (4)</b>  | \$ 99.20 |

|   |          |
|---|----------|
| <b>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.)</b> | \$ 99.20 |
|---|----------|





**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 | \$ 0.00 |  |
| Mailing Address                     |       |                   |      |     |      |         |  |
| City                                | State | Zip Code (Plus 4) |      |     |      |         |  |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 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: <span style="margin-left: 100px;">To:</span> |

|  |       |                   | DATE              | AMOUNT  |
|--|-------|-------------------|-------------------|---------|
| Full Name of Contributor                             |       |                   | MO                | DAY     |
| Mailing Address                                      |       |                   | YEAR              | \$ 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.

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 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.**

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b><br><br>SCHLOSSBERG, MIKE FRIENDS OF | <b>Reporting Period</b><br><br><b>From:</b> <u>11/29/2016</u> <b>To:</b> <u>12/31/2016</u> |
|--|--|

|   |                        |                                       |  | DATE                |                      | AMOUNT                  |                 |
|---|------------------------|---------------------------------------|--|---------------------|----------------------|-------------------------|-----------------|
| <b>Full Name</b><br>Amtrak                |                        |                                       |  | <b>MO</b><br><br>12 | <b>DAY</b><br><br>15 | <b>YEAR</b><br><br>2016 | \$<br><br>26.40 |
| <b>Mailing Address</b> 2955 Market Street |                        |                                       |  |                     |                      |                         |                 |
| <b>City</b> Philadelphia                  | <b>State</b><br><br>PA | <b>Zip Code (Plus 4)</b><br><br>19104 |  |                     |                      |                         |                 |
| <b>Receipt Description</b> Travel Refund  |                        |                                       |  |                     |                      |                         |                 |

|   |                        |                                       |  |                     |                      |                         |                 |
|---|------------------------|---------------------------------------|--|---------------------|----------------------|-------------------------|-----------------|
| <b>Full Name</b><br>Amtrak                |                        |                                       |  | <b>MO</b><br><br>12 | <b>DAY</b><br><br>15 | <b>YEAR</b><br><br>2016 | \$<br><br>72.80 |
| <b>Mailing Address</b> 2955 Market Street |                        |                                       |  |                     |                      |                         |                 |
| <b>City</b> Philadelphia                  | <b>State</b><br><br>PA | <b>Zip Code (Plus 4)</b><br><br>19104 |  |                     |                      |                         |                 |
| <b>Receipt Description</b> Travel Refund  |                        |                                       |  |                     |                      |                         |                 |

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

| PAGE TOTAL |       |
|------------|-------|
| \$         | 99.20 |

## 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**

|  |  |   |         |
|--|--|---|---------|
| <b>Name of Filing Committee or Candidate</b>   |  | <b>Reporting Period</b>                       |         |
| SCHLOSSBERG, MIKE FRIENDS OF   |  | From: <u>11/29/2016</u> To: <u>12/31/2016</u> |         |
| <b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>   |  |   |         |
| TOTAL for the Reporting Period   |  | (1)   | \$ 0.00 |
| <b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>  |  |   |         |
| TOTAL for the Reporting Period   |  | (2)   | \$ 0.00 |
| <b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>  |  |   |         |
| 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<br><br>From: <span style="float: right;">To:</span> |
|---------------------------------------|--|

|   |       |                   | DATE |     |      | AMOUNT                           |
|---|-------|-------------------|------|-----|------|----------------------------------|
| Full Name of Contributor  |       |                   | MO   | DAY | YEAR | \$ 0.00                          |
| Mailing Address   |       |                   |      |     |      |                                  |
| 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. |       |                   |      |     |      | <b>PAGE TOTAL</b><br><br>\$ 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<br>0.00 |         |

# SCHEDULE III STATEMENT OF EXPENDITURES

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                      |
| SCHLOSSBERG, MIKE FRIENDS OF                 | From <u>11/29/2016</u> To: <u>12/31/2016</u> |

| DATE  |                 |                                |   | AMOUNT    |
|---|-----------------|--------------------------------|---|-----------|
| <b>To Whom Paid</b>                                     | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |           |
| Allentown School District Foundation                    |                 |                                |   |           |
| <b>Mailing Address</b> 31 South Penn Street, PO Box 328 | 12              | 5                              | 2016  | \$ 300.00 |
| <b>City</b> Allentown                                   | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 18105 | <b>Description of Expenditure</b> Ad                                |           |
| <b>To Whom Paid</b>                                     | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |           |
| Friends of Peter Schweyer                               |                 |                                |   |           |
| <b>Mailing Address</b> PO Box 4364                      | 12              | 19                             | 2016  | \$ 500.00 |
| <b>City</b> Allentown                                   | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 18105 | <b>Description of Expenditure</b> Reimbursement for SEIU Gift Cards |           |
| <b>To Whom Paid</b>                                     | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |           |
| Amtrak  |                 |                                |   |           |
| <b>Mailing Address</b> 2955 Market Street               | 11              | 30                             | 2016  | \$ 9.00   |
| <b>City</b> Philadelphia                                | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 19104 | <b>Description of Expenditure</b> Travel Insurance                  |           |
| <b>To Whom Paid</b>                                     | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |           |
| Amtrak  |                 |                                |   |           |
| <b>Mailing Address</b> 2955 Market Street               | 11              | 30                             | 2016  | \$ 86.00  |
| <b>City</b> Philadelphia                                | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 19104 | <b>Description of Expenditure</b> Travel - Ticket                   |           |
| <b>To Whom Paid</b>                                     | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |           |
| Amtrak  |                 |                                |   |           |
| <b>Mailing Address</b> 2955 Market Street               | 11              | 30                             | 2016  | \$ 282.00 |
| <b>City</b> Philadelphia                                | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 19104 | <b>Description of Expenditure</b> Travel - Ticket                   |           |
| <b>To Whom Paid</b>                                     | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |           |
| Amtrak  |                 |                                |   |           |
| <b>Mailing Address</b> 2955 Market Street               | 12              | 8                              | 2016  | \$ 81.00  |
| <b>City</b> Philadelphia                                | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 19104 | <b>Description of Expenditure</b> Travel - Ticket                   |           |

|  |          |                         |  |     |      |             |
|--|----------|-------------------------|--|-----|------|-------------|
| To Whom Paid                                 |          |                         | MO   | DAY | YEAR | \$ 34.00    |
| Amtrak                                       |          |                         | 12   | 19  | 2016 |             |
| Mailing Address 2955 Market Street           |          |                         | 12   | 19  | 2016 |             |
| City Philadelphia                            | State PA | Zip Code (Plus 4) 19104 | Description of Expenditure<br>Travel - Ticket                    |     |      |             |
| To Whom Paid                                 |          |                         | MO   | DAY | YEAR | \$ 300.00   |
| Allentown St. Patrick's Day Parade           |          |                         | 12   | 12  | 2016 |             |
| Mailing Address PO Box 3517                  |          |                         | 12   | 12  | 2016 |             |
| City Allentown                               | State PA | Zip Code (Plus 4) 18105 | Description of Expenditure<br>Event Sponsorship                  |     |      |             |
| To Whom Paid                                 |          |                         | MO   | DAY | YEAR | \$ 6.84     |
| Syb's West End Deli                          |          |                         | 12   | 5   | 2016 |             |
| Mailing Address 2151 West Liberty Street     |          |                         | 12   | 5   | 2016 |             |
| City Allentown                               | State PA | Zip Code (Plus 4) 18104 | Description of Expenditure<br>Constituent Meal                   |     |      |             |
| To Whom Paid                                 |          |                         | MO   | DAY | YEAR | \$ 53.50    |
| Sugar Hill Jazz                              |          |                         | 12   | 1   | 2016 |             |
| Mailing Address 39 south 9th Street          |          |                         | 12   | 1   | 2016 |             |
| City Allentown                               | State PA | Zip Code (Plus 4) 18102 | Description of Expenditure<br>Volunteer Meal                     |     |      |             |
| To Whom Paid                                 |          |                         | MO   | DAY | YEAR | \$ 20.00    |
| Rose Garden Neighborhood Association         |          |                         | 12   | 5   | 2016 |             |
| Mailing Address Information Requested        |          |                         | 12   | 5   | 2016 |             |
| City Allentown                               | State PA | Zip Code (Plus 4) 18105 | Description of Expenditure<br>Membership Dues                    |     |      |             |
| To Whom Paid                                 |          |                         | MO   | DAY | YEAR | \$ 45.15    |
| Hank Beaver                                  |          |                         | 12   | 28  | 2016 |             |
| Mailing Address 41 North 10th Street, Apt. 2 |          |                         | 12   | 28  | 2016 |             |
| City Lemoyne                                 | State PA | Zip Code (Plus 4) 17043 | Description of Expenditure<br>Reimbursement for Campaign Expense |     |      |             |
| To Whom Paid                                 |          |                         | MO   | DAY | YEAR | \$ 321.56   |
| GoDaddy.com                                  |          |                         | 12   | 27  | 2016 |             |
| Mailing Address 14455 North Hayden Road      |          |                         | 12   | 27  | 2016 |             |
| City Scottsdale                              | State AZ | Zip Code (Plus 4) 85260 | Description of Expenditure<br>Website                            |     |      |             |
| To Whom Paid                                 |          |                         | MO   | DAY | YEAR | \$ 1,000.00 |
| Friends of Charlie Thiel                     |          |                         | 12   | 30  | 2016 |             |
| Mailing Address PO Box 214                   |          |                         | 12   | 30  | 2016 |             |
| City Allentown                               | State PA | Zip Code (Plus 4) 18105 | Description of Expenditure<br>Contribution                       |     |      |             |

|  |                    |                                   |   |            |             |           |
|--|--------------------|-----------------------------------|---|------------|-------------|-----------|
| <b>To Whom Paid</b><br>Frameworks                  |                    |                                   | <b>MO</b>   | <b>DAY</b> | <b>YEAR</b> | \$ 135.00 |
| <b>Mailing Address</b> 1333 H Street NW, Suite 700 |                    |                                   | 12  | 27         | 2016        |           |
| <b>City</b> Washington                             | <b>State</b><br>DC | <b>Zip Code (Plus 4)</b><br>20005 | <b>Description of Expenditure</b><br>Communications Class |            |             |           |

|                                     |                    |                                   |   |            |             |           |
|-------------------------------------|--------------------|-----------------------------------|---|------------|-------------|-----------|
| <b>To Whom Paid</b><br>Facebook     |                    |                                   | <b>MO</b>   | <b>DAY</b> | <b>YEAR</b> | \$ 199.63 |
| <b>Mailing Address</b> 1 Hacker Way |                    |                                   | 12  | 1          | 2016        |           |
| <b>City</b> Menlo Park              | <b>State</b><br>CA | <b>Zip Code (Plus 4)</b><br>94025 | <b>Description of Expenditure</b><br>Advertisements |            |             |           |

|   |                    |                                   |   |            |             |          |
|---|--------------------|-----------------------------------|---|------------|-------------|----------|
| <b>To Whom Paid</b><br>DC Cab                 |                    |                                   | <b>MO</b>                                   | <b>DAY</b> | <b>YEAR</b> | \$ 22.00 |
| <b>Mailing Address</b> 2606 Blandensburg Road |                    |                                   | 12  | 7          | 2016        |          |
| <b>City</b> Washington                        | <b>State</b><br>DC | <b>Zip Code (Plus 4)</b><br>20018 | <b>Description of Expenditure</b><br>Travel |            |             |          |

|  |                    |                                   |   |            |             |          |
|--|--------------------|-----------------------------------|---|------------|-------------|----------|
| <b>To Whom Paid</b><br>Creative Mobile   |                    |                                   | <b>MO</b>                                   | <b>DAY</b> | <b>YEAR</b> | \$ 19.55 |
| <b>Mailing Address</b> 42-32 21st Street |                    |                                   | 12  | 6          | 2016        |          |
| <b>City</b> Long Island City             | <b>State</b><br>NY | <b>Zip Code (Plus 4)</b><br>11101 | <b>Description of Expenditure</b><br>Travel |            |             |          |

|   |                    |                                   |   |            |             |          |
|---|--------------------|-----------------------------------|---|------------|-------------|----------|
| <b>To Whom Paid</b><br>BB&T                   |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> | \$ 15.00 |
| <b>Mailing Address</b> 1660 North Cedar Crest |                    |                                   | 12  | 1          | 2016        |          |
| <b>City</b> Allentown                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18104 | <b>Description of Expenditure</b><br>Bank Fee |            |             |          |

|                                    |                    |                                   |   |            |             |          |
|------------------------------------|--------------------|-----------------------------------|---|------------|-------------|----------|
| <b>To Whom Paid</b><br>AT&T        |                    |                                   | <b>MO</b>                                 | <b>DAY</b> | <b>YEAR</b> | \$ 51.68 |
| <b>Mailing Address</b> PO Box 5083 |                    |                                   | 12  | 27         | 2016        |          |
| <b>City</b> Carol Stream           | <b>State</b><br>IL | <b>Zip Code (Plus 4)</b><br>60197 | <b>Description of Expenditure</b><br>Data |            |             |          |

|                                    |                    |                                   |   |            |             |           |
|------------------------------------|--------------------|-----------------------------------|---|------------|-------------|-----------|
| <b>To Whom Paid</b><br>AT&T        |                    |                                   | <b>MO</b>                                       | <b>DAY</b> | <b>YEAR</b> | \$ 179.10 |
| <b>Mailing Address</b> PO Box 5083 |                    |                                   | 12  | 27         | 2016        |           |
| <b>City</b> Carol Stream           | <b>State</b><br>IL | <b>Zip Code (Plus 4)</b><br>60197 | <b>Description of Expenditure</b><br>Cell Phone |            |             |           |

|  |  |  |  |  |  |                   |
|--|--|--|--|--|--|-------------------|
| <b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b> |  |  |  |  |  | <b>PAGE TOTAL</b> |
|  |  |  |  |  |  | \$ 3,661.01       |

