

# 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>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2017	<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>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	DEM 39			
						11	7	2017	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>					
				10	24	2017	<b>TO</b>	11	27	2017		
<b>A. Amount Brought Forward From Last Report</b>						\$ 20,569.54						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 3,775.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 24,344.54						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 2,623.17						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 21,721.37						
<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>10/24/2017</u> To: <u>11/27/2017</u>

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

<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>	\$ 750.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 750.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 500.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 500.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 2,475.00

<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>	\$ 3,775.00
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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.**

<b>Name of Filing Committee or Candidate</b>  SCHLOSSBERG, MIKE FRIENDS OF	<b>Reporting Period</b>  <b>From:</b> <u>10/24/2017</u> <b>To:</b> <u>11/27/2017</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"><b>DATE</b></td> <td style="width: 40%; border: none;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

<b>Full Name of Contributing Committee</b> LAWPAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 212 North Third Street, Suite 101			10	24	2017	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101				

<b>Full Name of Contributing Committee</b> FRIENDS OF BOB DONCHEZ			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 377 DEVONSHIRE DR			10	26	2017	
<b>City</b> BETHLEHEM	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18017				

<b>Full Name of Contributing Committee</b> Pennsylvania Emergency Physicians PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 200 North 3rd Street, Suite 1500			10	25	2017	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101				

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

<b>PAGE TOTAL</b>
\$ 750.00

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

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

PAGE TOTAL
\$ 0.00

## 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.

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
SCHLOSSBERG, MIKE FRIENDS OF	<b>From:</b> <u>10/24/2017</u> <b>To:</b> <u>11/27/2017</u>

				DATE			AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$	500.00
Pennsylvania Optometric PAC								
Mailing Address								
218 North Street				10	24	2017		
City	HARRISBURG		State					

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

<b>PAGE TOTAL</b>
\$ 500.00

**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="float: right;">To:</span>

				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.

<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>  SCHLOSSBERG, MIKE FRIENDS OF	<b>Reporting Period</b>  <b>From:</b> <u>10/24/2017</u> <b>To:</b> <u>11/27/2017</u>
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				DATE			AMOUNT
Full Name				MO	DAY	YEAR	
PA House Democratic Campaign Committee							
<b>Mailing Address</b> 205 State Street				11	10	2017	\$            2,475.00
<b>City</b> Harrisburg	<b>State</b>  <div style="text-align: center;">PA</div>	<b>Zip Code (Plus 4)</b>  <div style="text-align: center;">17101</div>					
<b>Receipt Description</b> Refund							

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

<b>PAGE TOTAL</b>
\$            2,475.00

## 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
SCHLOSSBERG, MIKE FRIENDS OF		From: <u>10/24/2017</u> To: <u>11/27/2017</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 RECIEVED - 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  From: <span style="float: right;">To:</span>
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			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>  \$ 0.00

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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
SCHLOSSBERG, MIKE FRIENDS OF	From <u>10/24/2017</u> To: <u>11/27/2017</u>

DATE				AMOUNT		
To Whom Paid Jewish Day School			MO	DAY	YEAR	\$ 500.00
Mailing Address 2313 W. Pennsylvania Street			10	24	2017	
City Allentown	State PA	Zip Code (Plus 4) 18104	Description of Expenditure Sponsorship			
To Whom Paid McNeill for PA			MO	DAY	YEAR	\$ 500.00
Mailing Address 2285 Schoenersville Road			10	24	2017	
City Bethlehem	State PA	Zip Code (Plus 4) 18017	Description of Expenditure Donation			
To Whom Paid AT&T			MO	DAY	YEAR	\$ 230.77
Mailing Address 214 Lehigh Valley Mall			10	26	2017	
City Whitehall	State PA	Zip Code (Plus 4) 18052	Description of Expenditure Cell Phone			
To Whom Paid AT&T			MO	DAY	YEAR	\$ 52.01
Mailing Address 214 Lehigh Valley Mall			10	26	2017	
City Whitehall	State PA	Zip Code (Plus 4) 18052	Description of Expenditure Cell Phone Data			
To Whom Paid AT&T			MO	DAY	YEAR	\$ 52.01
Mailing Address 214 Lehigh Valley Mall			11	27	2017	
City Whitehall	State PA	Zip Code (Plus 4) 18052	Description of Expenditure Cell Phone Data			

To Whom Paid AT&T			MO	DAY	YEAR	\$ 173.02
Mailing Address 214 Lehigh Valley Mall			11	27	2017	
City Whitehall	State PA	Zip Code (Plus 4) 18052	Description of Expenditure Cell Phone			
To Whom Paid Muhlenberg College			MO	DAY	YEAR	\$ 60.00
Mailing Address 2400 West Chew Street			10	26	2017	
City Allentown	State PA	Zip Code (Plus 4) 18104	Description of Expenditure Board of Associates			
To Whom Paid Facebook			MO	DAY	YEAR	\$ 85.34
Mailing Address 1 Hacker Way			11	1	2017	
City Menlo Park	State CA	Zip Code (Plus 4) 94205	Description of Expenditure Advertisement			
To Whom Paid BB&T Bank			MO	DAY	YEAR	\$ 15.00
Mailing Address 835 Hamilton Street			11	1	2017	
City Allentown	State PA	Zip Code (Plus 4) 18102	Description of Expenditure Service Charges			
To Whom Paid Paypal			MO	DAY	YEAR	\$ 63.60
Mailing Address 2211 North 1st Street			11	2	2017	
City San Jose	State CA	Zip Code (Plus 4) 95131	Description of Expenditure Tickets			
To Whom Paid Allentown St. Patricks Day Parade			MO	DAY	YEAR	\$ 300.00
Mailing Address PO Box 3517			11	3	2017	
City Allentown	State PA	Zip Code (Plus 4) 18106	Description of Expenditure Sponsorship			

<b>To Whom Paid</b> Liberty Bell Shrine of Allentown			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 622 Hamilton Street			11	3	2017	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18104	<b>Description of Expenditure</b> Donation			

  

<b>To Whom Paid</b> Mary Ann Donuts			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 380.00
<b>Mailing Address</b> 1601 West Liberty Street			11	8	2017	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18102	<b>Description of Expenditure</b> Donuts for Election Day			

  

<b>To Whom Paid</b> Geoff Brace			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 31.42
<b>Mailing Address</b> 227 North 9th Street			11	11	2017	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18102	<b>Description of Expenditure</b> Reimbursement			

  

<b>To Whom Paid</b> Kiwanan Club of Allentown			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 80.00
<b>Mailing Address</b> PO Box 4355			11	15	2017	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18105	<b>Description of Expenditure</b> Sponsorship			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 2,623.17

