### **Campaign Finance Report**

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

| Filer Identificati<br>Number :           | on 9400                          | 092       |                        |         | Rep<br>File |             |        | CAND               | DATE      |        | СОМИ       | 4ITTEE             | ✓              | LOB     | BYIST    |           |    |
|--|----------------------------------|-----------|------------------------|---------|-------------|-------------|--------|--------------------|-----------|--------|------------|--------------------|----------------|---------|----------|-----------|----|
| Name of Filing C                         | Committee, Candid                | ate or Lo | obbyist:               |         | BOS         | COI         | LA, LI | SA FRIE            | NDS O     | F      | -          |                    |                |         |          |           | _  |
| Street Address:                          | PO BOX 1294                      |           |                        |         |             |             |        |                    |           |        |            |                    |                |         |          |           |    |
| City:                                    | BETHLEHEM                        |           |                        |         |             |             |        | State:             | PA        |        |            | Zip Cod            | <b>de:</b> 18  | 3016-1  | 294      |           |    |
| TYPE OF<br>REPORT                        | 6TH TUESDAY<br>PRE-PRIMARY       | 1.        | 2ND FRIDA'<br>PRIMARY  | Y PRE   | - 2         | 2.          | 30 DA  |                    | POST-     | 3.     |            | AMENDM<br>REPORT?  |                | Yes     | No       |           |    |
| (place X to<br>the right of              | 6TH TUESDAY<br>PRE-ELECTION      | 4.        | 2ND FRIDA'<br>ELECTION | Y PRE   | =- !        | 5. <b>X</b> | 30 DA  |                    | POST-     | 6.     |            | TERMINA<br>REPORT? |                | Yes     | No       | ~         |    |
| report type)                             | ANNUAL REPORT                    | 7.        | <b>Year</b> 2017       |         |             |             |        | NG METH<br>CHECK O |           |        |            | PAPER              |                | /       | DISKE    | TTE       |    |
| Name of Office S                         | -<br>Sought by Candida           | te:       |                        |         |             |             |        | DATE C             | F ELE     | CTIC   | N          | District<br>Number | Office<br>Code | Par     | ty Code  | County    | ,  |
|  |                                  |           |                        |         |             |             |        | МО                 | DAY       | YI     | EAR        | Number             | Toode          | DEI     | 1        | 48        |    |
|  |                                  |           |                        |         |             |             |        | 11                 |           | 7      | 2017       |                    | (SEE IN        | STRUCTI | ONS FOR  | CODES)    |    |
|  | Receipts and                     | МО        | DAY                    | YEAR    | ł           |             |        | МО                 | DAY       | Y      | EAR        | FO                 | R OFFI         | CE USE  | ONLY     |           |    |
| Expenditures                             | from:                            |           | 1 1                    | 2       | 017         | Т           | 0      | 10                 | )         | 23     | 2017       |                    |                |         |          |           |    |
| A. Amount Bro                            | ught Forward Fron                | n Last R  | eport                  |         |             |             | \$     |                    |           | 236,   | 302.77     |                    |                |         |          |           |    |
| B. Total Moneta                          | ary Contributions A              | And Rec   | eipts (From            | Sche    | dule        | 1)          | \$     |                    |           | 96,    | 075.00     |                    |                |         |          |           |    |
| C. Total Funds                           | Available (Sum Of                | Lines A   | and B)                 |         |             |             | \$     |                    |           | 332,   | 377.77     |                    |                |         |          |           |    |
| D. Total Expend                          | ditures (From Scho               | edule II  | I)                     |         |             |             | \$     |                    |           | 24,6   | 33.96      |                    |                |         |          |           |    |
| E. Ending Cash                           | Balance (Subtract                | Line D    | From Line (            | 2)      |             |             | \$     |                    | :         | 308,2  | 243.81     |                    |                |         |          |           |    |
| F. Value Of In-                          | Kind Contributions               | Receiv    | ed (From So            | chedu   | le II       | :)          | \$     |                    |           |        | 0.00       |                    |                |         |          |           |    |
| G. Unpaid Debt                           | s And Obligations                | (From S   | Schedule IV            | )       |             |             | \$     |                    |           |        | 0.00       |                    |                |         |          |           |    |
|  |                                  |           |                        | AFF     | IDA         | ١٧٧         | T SE   | CTION              |           |        |            |                    |                |         |          |           |    |
|  | s a Committee rep                | •         | _                      |         |             |             |        |                    | •         |        |            |                    |                |         |          |           |    |
| I swear (or affirm) correct and complete | ) that this report, incl<br>ete. | uding the | attached sch           | nedules | s filed     | d on        | paper  | or by elect        | tronic m  | edium  | , are to t | he best o          | f my knov      | wledge  | and beli | ef , true | A. |
| Sworn to and subs                        | cribed before me this<br>day of  | 1         | 20                     |         |             |             |        |                    |           | 5      | Signature  | of Perso           | n Submit       | ting Re | oort     |           | '  |
|  | Signatu                          | ro        |                        |         |             |             | -<br>- |                    |           |        |            | Prin               | ted Name       | •       |          |           | -  |
| My Commission Ex                         | •                                |           |                        |         |             |             |        |                    |           |        |            | Ema                | il             |         |          |           | ٠  |
|  | мо                               | D         | AY                     | YR      |             |             | _      |                    | Ar        | ea Co  | le         | Daytim             | e Teleph       | one Nu  | mber     |           | '  |
| Part II- If this is                      | a report of a cand               | lidate's  | authorized             | Comn    | nitte       | e, C        | andid  | ate shall          | sign h    | ere.   |            |                    |                |         |          |           |    |
| I swear (or affirm)<br>No 320) as amende | that to the best of n            | ny knowle | edge and beli          | ef this | polit       | tical       | comm   | ittee has r        | not viola | ted ar | ıy provisi | ions of the        | e act of J     | une 3,1 | 937 (P.L | . 1333,   | ı  |
| Sworn to and subsc                       | ribed before me this             |           |                        |         |             |             |        |                    | -         |        | Si         | ignature o         | of Candida     | ate     |          |           | ٠  |
|  | day of                           |           |                        |         |             |             | -      |                    |           |        |            | Printe             | d Name         |         |          |           | .  |
|  | Signature                        |           |                        |         |             |             | -      |                    |           |        |            |                    |                |         |          |           | .  |
| My Commission Exp                        | ires                             |           |                        |         |             |             |        |                    |           |        |            | Ema                | il             |         |          |           |    |
|  | МО                               | D         | AY                     | YR      | 1           |             | -      |                    | Area      | Code   |            | Da                 | aytime T       | elephor | e Numb   | er        |    |

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

| Name of Filing Committee or Candidate  | Reporting | g Period       |              |            |
|--|-----------|----------------|--------------|------------|
| BOSCOLA, LISA FRIENDS OF   | From:     | <u>1/1/201</u> | <u>7</u> To: | 10/23/2017 |
| 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)  |           |                | \$           | 1,800.00   |
| All Other Contributions (Part B)   |           |                | \$           | 3,175.00   |
| TOTAL for the Reporting  | ) Period  | (2)            | \$           | 4,975.00   |
| 3. Contributions Received Over \$250.00 (From Part C and Part D)   |           |                |              |            |
| Contributions Received From Political Committees (Part C)  |           |                | \$           | 52,150.00  |
| All Other Contributions (Part D)   |           |                | \$           | 38,950.00  |
| TOTAL for the Reporting  | Period    | (3)            | \$           | 91,100.00  |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)   |           |                |              |            |
| TOTAL for the Reporting  | ) Period  | (4)            | \$           | 0.00       |
|  |           |                |              |            |
| Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa |           |                | \$           | 96,075.00  |

#### 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.

| Name of Filing Committee or Cand                              | didate             |                                  | Re  | porting I | Period |                       |    |            |
|---|--------------------|----------------------------------|-----|-----------|--------|-----------------------|----|------------|
| BOSCOLA, LISA FRIENDS OF                                      |                    |                                  | Fro | om:       | 1/1/20 | ) <u>17</u> <b>To</b> | :  | 10/23/2017 |
|   |                    |                                  | 1   |           | DATE   |                       |    | AMOUNT     |
| Full Name of Contributing Committee PA MEDICAL PAC (PAM PAC)  | ee                 |                                  |     | МО        | DAY    | YEAR                  |    |            |
| Mailing Address P.O. BOX 882                                  | 20                 |                                  |     |           |        |                       | \$ | 250.00     |
| City HARRISBURG   | <b>State</b><br>PA | <b>Zip Code (Plus</b> 171050000  | 4)  | 8         | 22     | 2017                  |    |            |
| Full Name of Contributing Committee<br>1776 PAC (UFCW)        | ee                 |                                  |     | МО        | DAY    | YEAR                  |    |            |
| Mailing Address 3031-A WALT                                   | TON RD STE 201     |                                  |     | 0         | 11     | 2017                  | \$ | 250.00     |
| City PLYMOUTH MEETING   | <b>State</b><br>PA | <b>Zip Code (Plus</b> 19462-0000 | 4)  | 8         | 11     | 2017                  |    |            |
| Full Name of Contributing Committee                           | ee                 |                                  |     | МО        | DAY    | YEAR                  |    |            |
| Mailing Address 500 N 3rd St                                  |                    |                                  |     |           |        |                       | \$ | 250.00     |
| <b>City</b> Harrisburg  | <b>State</b><br>PA | Zip Code (Plus<br>17101          | 4)  | 8         | 11     | 2017                  |    |            |
| Full Name of Contributing Committee WINDSTREAM CORPORATE PAC  | ee                 |                                  |     | МО        | DAY    | YEAR                  |    |            |
| Mailing Address 4001 RODNE                                    | Y PARHAM RD        |                                  |     | -         | 27     | 2017                  | \$ | 250.00     |
| City LITTLE ROCK  | <b>State</b><br>AR | <b>Zip Code (Plus</b> 722120000  | 4)  | 5         | 27     | 2017                  |    |            |
| Full Name of Contributing Committee Roosevelt Democratic Assn | ee                 |                                  |     | МО        | DAY    | YEAR                  |    |            |
| Mailing Address 2007 8th St                                   |                    |                                  |     |           |        |                       | \$ | 100.00     |
| <b>City</b> Bethlehem   | <b>State</b><br>PA | Zip Code (Plus<br>18020          | 4)  | 7         | 6      | 2017                  |    |            |

| Full Name of Contributing Committee PENN HY-PAC (PA DENTAL HYGIENISTS   | 5)                 |  | МО        | DAY          | YEAR             |                        |
|---|--------------------|--|-----------|--------------|------------------|------------------------|
| Mailing Address 123 RUSSELL AVE   |                    |  |           |              |                  | <b>\$</b> 100.00       |
| City DOUGLASVILLE   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19518      | 6         | 16           | 2017             |                        |
| Full Name of Contributing Committee SCHOOL NURSE PAC  |                    |  | МО        | DAY          | YEAR             |                        |
| Mailing Address 3343 STONEHOUS  | SE COURT           | Zip Code (Plus 4)                      | 6         | 16           | 2017             | \$ 100.00              |
| City BETHLEHEM  | PA                 | 18017                                  |           |              |                  |                        |
|   |                    |  |           |              |                  |                        |
| Full Name of Contributing Committee HIGHMARK PAC OF HIGHMARK INC  |                    |  | МО        | DAY          | YEAR             |                        |
| _   |                    |  | МО        | DAY          | YEAR             | <b>\$</b> 250.00       |
| HIGHMARK PAC OF HIGHMARK INC  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17089-0000 | <b>MO</b> | <b>DAY</b> 9 | <b>YEAR</b> 2017 | <b>\$</b> 250.00       |
| HIGHMARK PAC OF HIGHMARK INC  Mailing Address 1800 CENTER ST  |                    |  |           |              |                  | \$ 250.00              |
| HIGHMARK PAC OF HIGHMARK INC  Mailing Address 1800 CENTER ST  City CAMP HILL  Full Name of Contributing Committee | PA                 |  | 8         | 9            | 2017             | \$ 250.00<br>\$ 250.00 |

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

**PAGE TOTAL** \$ 1,800.00

### 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 Candidat                  | e                  |                                   | Rep  | orting Po | eriod |                 |    |            |
|---|--------------------|-----------------------------------|------|-----------|-------|-----------------|----|------------|
| BOSCOLA, LISA FRIENDS OF                              |                    |                                   | Froi | m:        | 1/1/2 | 2017 <b>T</b> o | ): | 10/23/2017 |
|   |                    |                                   |      |           | DATE  |                 |    | AMOUNT     |
| <b>Full Name of Contributor</b> Abe P. Kassis         |                    |                                   |      | МО        | DAY   | YEAR            |    |            |
| Mailing Address 2851 Baglyos Cir                      |                    |                                   |      |           |       |                 | \$ | 125.00     |
| <b>City</b> Bethlehem                                 | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18020 |      | 8         | 22    | 2017            |    |            |
| Full Name of Contributor  David Schultz               |                    |                                   |      | МО        | DAY   | YEAR            |    |            |
| Mailing Address 1001 Harbour Cove  City Sommers Point | <b>State</b><br>NJ | <b>Zip Code (Plus 4)</b><br>18244 |      | 8         | 22    | 2017            | \$ | 250.00     |
| Full Name of Contributor Phil Noto                    |                    |                                   |      | МО        | DAY   | YEAR            |    |            |
| Mailing Address 42 Clairmont Ave                      |                    |                                   |      |           |       |                 | \$ | 250.00     |
| City Easton   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18042 |      | 8         | 22    | 2017            |    |            |
| Full Name of Contributor Ralph Gilmore                |                    |                                   |      | МО        | DAY   | YEAR            |    |            |
| Mailing Address 1437 Manor Dr  City Bethlehem         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18015 |      | 8         | 11    | 2017            | \$ | 250.00     |
| Full Name of Contributor<br>Melissa Rudas             |                    |                                   |      | МО        | DAY   | YEAR            |    |            |
| Mailing Address 3379 Rising Sun Ct                    |                    |                                   |      |           |       |                 | \$ | 125.00     |
| <b>City</b> Nazereth                                  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18064 |      | 8         | 11    | 2017            |    |            |

|  |             |               |                      | FAGL |        |
|--|-------------|---------------|----------------------|------|--------|
| Full Name of Contributor   |             | DAY           | VEAD                 |      |        |
| andrew fetherston  | МО          | DAY           | YEAR                 |      |        |
| Mailing Address 105 Jefferson  |             |               |                      | \$   | 200.00 |
| City Highland Mills State Zip Code (Plus 4)  | 8           | 24            | 2017                 |      |        |
| NY 10930   |             |               |                      |      |        |
| Full Name of Contributor Phillip Grealy  | мо          | DAY           | YEAR                 |      |        |
| Mailing Address 3097 Ferncrest Dr  |             |               |                      | \$   | 200.00 |
| City Yorktown State Zip Code (Plus 4)  | 7           | 27            | 2017                 |      |        |
| NY 10598   |             |               |                      |      |        |
| Full Name of Contributor John T Collins  | мо          | DAY           | YEAR                 |      |        |
| Mailing Address Could Not Find   |             |               |                      | \$   | 200.00 |
| City NA State Zip Code (Plus 4)  | 7           | 27            | 2017                 |      |        |
| City NA State Zip code (Fids 4)  |             |               | l                    |      |        |
| PA 18017   |             |               |                      |      |        |
| NA NA  | МО          | DAY           | YEAR                 |      |        |
| Full Name of Contributor   | МО          | DAY           | YEAR                 | \$   | 200.00 |
| Full Name of Contributor James Biegen  Mailing Address 10 Wick Dr  | <b>MO</b> 7 | <b>DAY</b> 27 | <b>YEAR</b> 2017     | \$   | 200.00 |
| Full Name of Contributor James Biegen  Mailing Address 10 Wick Dr  |             |               |                      | \$   | 200.00 |
| Full Name of Contributor James Biegen  Mailing Address 10 Wick Dr  City Woodstown State Zip Code (Plus 4)  |             |               |                      | \$   | 200.00 |
| Full Name of Contributor James Biegen  Mailing Address 10 Wick Dr  City Woodstown State NJ 08098  Full Name of Contributor   | 7           | 27<br>DAY     | 2017<br>YEAR         | \$   | 200.00 |
| Full Name of Contributor James Biegen  Mailing Address 10 Wick Dr  City Woodstown  State NJ 2ip Code (Plus 4) 08098  Full Name of Contributor Terrence Marcincin  Mailing Address 1620 Easton  | 7           | 27            | 2017                 |      |        |
| Full Name of Contributor James Biegen  Mailing Address 10 Wick Dr  City Woodstown  State Zip Code (Plus 4) 08098  Full Name of Contributor Terrence Marcincin  Mailing Address 1620 Easton   | 7 MO        | 27<br>DAY     | 2017<br>YEAR         |      |        |
| Full Name of Contributor James Biegen  Mailing Address 10 Wick Dr  City Woodstown  Full Name of Contributor Terrence Marcincin  Mailing Address 1620 Easton  City BEthlehem  PA 18017  Item 18017  State Zip Code (Plus 4) 08098  Zip Code (Plus 4) 08098  | 7 MO        | 27<br>DAY     | 2017<br>YEAR         |      |        |
| Full Name of Contributor  James Biegen  Mailing Address 10 Wick Dr  City Woodstown  State NJ 08098  Full Name of Contributor Terrence Marcincin  Mailing Address 1620 Easton  City BEthlehem  State Zip Code (Plus 4) 08098  Zip Code (Plus 4) 18017   | <b>мо</b> 6 | 27 DAY 30     | 2017  YEAR  2017     |      |        |
| Full Name of Contributor James Biegen  Mailing Address 10 Wick Dr  City Woodstown  Full Name of Contributor Terrence Marcincin  Mailing Address 1620 Easton  City BEthlehem  State Zip Code (Plus 4) 08098  Zip Code (Plus 4) 18017  Full Name of Contributor Terrence Marcincin  Full Name of Contributor Greg Butz | <b>мо</b> 6 | 27<br>DAY     | 2017<br>YEAR<br>2017 | \$   | 250.00 |

| Full Name of Contr<br>David & John How   |                   |                    |                                   | МО | DAY | YEAR |                  |
|--|-------------------|--------------------|-----------------------------------|----|-----|------|------------------|
| Mailing Address                          | 203 E Emmaus Ave  |                    |                                   | _  |     |      | \$ 250.00        |
| <b>City</b> Allentown                    |                   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 18103    | 7  | 28  | 2017 |                  |
| Full Name of Contr<br>Martin Cohen       | ibutor            |                    |                                   | МО | DAY | YEAR |                  |
| Mailing Address                          | 2851 Baglyos Cir  |                    |                                   |    |     |      | <b>\$</b> 250.00 |
| <b>City</b> Bethelhem                    |                   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18020 | 7  | 28  | 2017 |                  |
| Full Name of Contr<br>Richard Oravec     | ibutor            |                    |                                   | МО | DAY | YEAR |                  |
| Mailing Address                          | 1937 Saucon Dale  | Cir                |                                   |    |     |      | <b>\$</b> 125.00 |
| <b>City</b> BEthlehem                    |                   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18015 | 9  | 7   | 2017 |                  |
| Full Name of Contr<br>Chirsty Schlottman |                   |                    |                                   | МО | DAY | YEAR |                  |
| Mailing Address                          | 717 Washington St |                    |                                   |    |     |      | \$ 250.00        |
| City Easton                              |                   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18042 | 9  | 7   | 2017 |                  |
|  |                   |                    |                                   |    |     |      |                  |

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

**PAGE TOTAL \$** 3,175.00

#### **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 |        |      |       |          |
|--|--------------------|---------------------------|-----------------|--------|--------|------|-------|----------|
| BOSCOLA, LISA FRIENDS OF   |                    |                           | From:           | 1/     | 1/2017 | То:  | 10/23 | <u> </u> |
|  |                    |                           |                 | DA     | TE     |      | АМО   | UNT      |
| Full Name of Contributing Committee LOCAL 0690 PLUMBERS UNION POL AC             | TION FUND          |                           |                 | МО     | DAY    | YEAR |       |          |
| Mailing Address 2791 SOUTHAMPTON   | N ROAD             |                           |                 |        |        |      | \$    | 1,500.00 |
| City PHILADELPHIA  | <b>State</b><br>PA | <b>Zip Code</b><br>191540 | <b>(Plus 4)</b> | 7      | 27     | 2017 |       |          |
| Full Name of Contributing Committee FEDEXPAC                                     |                    |                           |                 | МО     | DAY    | YEAR |       |          |
| Mailing Address 942 SHADY GROVE F  City Memphis                                  | State              | <b>Zip Code</b><br>38120  | e (Plus 4)      | 9      | 27     | 2017 | \$    | 1,000.00 |
| Full Name of Contributing Committee  Brotherhood of Locomotive Enginners F       | PAC                | ,                         |                 | мо     | DAY    | YEAR |       |          |
| Mailing Address 7061 E Pleasant Vall   | ey Rd              |                           |                 |        |        |      | \$    | 500.00   |
| <b>City</b> Independence   | State<br>OH        | <b>Zip Code</b> 44131     | e (Plus 4)      | 5      | 17     | 2017 |       |          |
| <b>Full Name of Contributing Committee</b> Brotherhood of Locomotive Enginners F | PAC                |                           |                 | МО     | DAY    | YEAR |       |          |
| Mailing Address 7061 E Pleasant Vall   | ey Rd              |                           |                 |        |        |      | \$    | 250.00   |
| City Independence  | State<br>OH        | <b>Zip Code</b> 44131     | e (Plus 4)      | 9      | 27     | 2017 |       |          |
| Full Name of Contributing Committee  LAWPAC                                      |                    |                           |                 | МО     | DAY    | YEAR |       |          |
| Mailing Address 327 SOUTH 13TH ST  | REET               |                           |                 |        |        |      | \$    | 350.00   |
| City PHILADELPHIA  | <b>State</b><br>PA | <b>Zip Code</b>           | e (Plus 4)      | 9      | 27     | 2017 |       |          |

|  |   |  |           |               |                      | 1 /- | IGE 9    |
|--|---|--|-----------|---------------|----------------------|------|----------|
| Full Name of Contributing Commit   | tee   |  | МО        | DAY           | YEAR                 |      |          |
| AFSCME COUNCIL 13 POL & LEG  | ACCT  |  | MO        | DAI           | ILAK                 |      |          |
| Mailing Address 4031 EXECUTI   | VE PARK DRIVE   |  |           |               |                      | \$   | 500.00   |
| City HARRISBURG  | State   | Zip Code (Plus 4)                                | 5         | 10            | 2017                 |      |          |
|  | PA  | 171111507  |           |               |                      |      |          |
| Full Name of Contributing Commit   | tee   |  | мо        | DAY           | YEAR                 |      |          |
| AFSCME COUNCIL 13 POL & LEG  | ACCT  |  | MO        | DAI           | ILAK                 |      |          |
| Mailing Address 4031 EXECUTI   | VE PARK DRIVE   |  |           |               |                      | \$   | 500.00   |
| City HARRISBURG  | State   | Zip Code (Plus 4)                                | 8         | 22            | 2017                 |      |          |
|  | PA  | 171111507  |           |               |                      |      |          |
| Full Name of Contributing Commit   | tee   |  | МО        | DAY           | YEAR                 |      |          |
| Mailing Address 54 STATE ST 6  | TH FL   |  |           |               |                      | \$   | 500.00   |
| City ALBANY  | State   | Zip Code (Plus 4)                                | 8         | 22            | 2017                 |      |          |
|  | NY  | 122070000  |           |               |                      |      |          |
|  | IVI   | 122070000  |           |               |                      |      |          |
| Full Name of Contributing Commit   |   | 122070000  | МО        | DAY           | YEAR                 |      |          |
| John Morganelli PAC  | tee   | 122070000  | МО        | DAY           | YEAR                 |      |          |
|  | tee   | 122070000  |           |               |                      | \$   | 1,000.00 |
| John Morganelli PAC  | tee   | Zip Code (Plus 4)                                | <b>MO</b> | <b>DAY</b> 21 | <b>YEAR</b> 2017     | \$   | 1,000.00 |
| John Morganelli PAC  Mailing Address 835 Barnsdale   | <b>tee</b>  |  |           |               |                      | \$   | 1,000.00 |
| John Morganelli PAC  Mailing Address 835 Barnsdale   | Rd State PA   | Zip Code (Plus 4)                                |           |               |                      | \$   | 1,000.00 |
| John Morganelli PAC  Mailing Address 835 Barnsdale  City BEthlehem  Full Name of Contributing Commit   | Rd State PA   | Zip Code (Plus 4)                                | - 8       | 21            | 2017                 | \$   | 1,000.00 |
| John Morganelli PAC  Mailing Address 835 Barnsdale  City BEthlehem  Full Name of Contributing Commit Waste Connections  Mailing Address 3 Waterway Sci   | Rd State PA   | Zip Code (Plus 4)                                | - 8       | 21            | 2017                 |      |          |
| John Morganelli PAC  Mailing Address 835 Barnsdale  City BEthlehem  Full Name of Contributing Commit Waste Connections  Mailing Address 3 Waterway So  | Rd State PA tee   | <b>Zip Code (Plus 4)</b> 18017                   | мо        | 21<br>DAY     | 2017<br>YEAR         |      |          |
| John Morganelli PAC  Mailing Address 835 Barnsdale  City BEthlehem  Full Name of Contributing Commit Waste Connections  Mailing Address 3 Waterway Sci   | Rd State PA tee  Place State TX                         | Zip Code (Plus 4) 18017  Zip Code (Plus 4)       | <b>MO</b> | 21<br>DAY     | 2017<br>YEAR<br>2017 |      |          |
| John Morganelli PAC  Mailing Address 835 Barnsdale  City BEthlehem  Full Name of Contributing Commit Waste Connections  Mailing Address 3 Waterway Sc  City The Woodlands  | Rd State PA tee  Place State TX                         | Zip Code (Plus 4) 18017  Zip Code (Plus 4) 77380 | мо        | 21<br>DAY     | 2017<br>YEAR         |      |          |
| John Morganelli PAC  Mailing Address 835 Barnsdale  City BEthlehem  Full Name of Contributing Commit Waste Connections  Mailing Address 3 Waterway Sc  City The Woodlands  Full Name of Contributing Commit                                  | Rd  State PA  Place  State TX  tee  Engineers Local 542 | Zip Code (Plus 4) 18017  Zip Code (Plus 4) 77380 | мо<br>8   | 21 DAY 22     | 2017 YEAR 2017       |      |          |
| John Morganelli PAC  Mailing Address 835 Barnsdale  City BEthlehem  Full Name of Contributing Commit Waste Connections  Mailing Address 3 Waterway Sc  City The Woodlands  Full Name of Contributing Commit International Union of Operating | Rd  State PA  Place  State TX  tee  Engineers Local 542 | Zip Code (Plus 4) 18017  Zip Code (Plus 4) 77380 | <b>MO</b> | 21<br>DAY     | 2017<br>YEAR<br>2017 | \$   | 1,500.00 |

|   |                    |               |                  | PAGE 10                |
|---|--------------------|---------------|------------------|------------------------|
| Full Name of Contributing Committee   | МО                 | DAY           | YEAR             |                        |
| NORTHEAST REGIONAL COUNCIL OF CARPENTERS PEC-PA   | 1-10               |               | ILAK             |                        |
| Mailing Address 91 FIELDCREST AVE RARITAN PLAZA II  |                    |               |                  | <b>\$</b> 1,500.00     |
| City EDISON State Zip Code (Plus 4  | <b>4)</b> 8        | 10            | 2017             |                        |
| NJ 08837  |                    |               |                  |                        |
| Full Name of Contributing Committee   | мо                 | DAY           | YEAR             |                        |
| PA DUQUESNE LIGHT (PENNDUPAC)   |                    |               |                  |                        |
| Mailing Address 411 SEVENTH AVE   |                    |               |                  | \$ 500.00              |
| City PITTSBURGH State Zip Code (Plus 4  | <b>4)</b> 5        | 31            | 2017             |                        |
| PA 152190000  |                    |               |                  |                        |
| Full Name of Contributing Committee PA DUQUESNE LIGHT (PENNDUPAC)   | МО                 | DAY           | YEAR             |                        |
| Mailing Address 411 SEVENTH AVE   |                    |               |                  | <b>\$</b> 350.00       |
| City PITTSBURGH State Zip Code (Plus 4  | 4) 8               | 21            | 2017             |                        |
|   |                    |               |                  |                        |
| PA 152190000  |                    |               |                  |                        |
|   | МО                 | DAY           | YEAR             |                        |
| Full Name of Contributing Committee   |                    | DAY           |                  | \$ 800.00              |
| Full Name of Contributing Committee PA OPTOMETRIC PAC  Mailing Address  |                    | <b>DAY</b> 10 | <b>YEAR</b> 2017 | \$ 800.00              |
| Full Name of Contributing Committee PA OPTOMETRIC PAC  Mailing Address 218 NORTH ST   |                    |               |                  | \$ 800.00              |
| Full Name of Contributing Committee PA OPTOMETRIC PAC  Mailing Address 218 NORTH ST  City HARRISBURG  State Zip Code (Plus 4)   |                    |               |                  | \$ 800.00              |
| Full Name of Contributing Committee PA OPTOMETRIC PAC  Mailing Address 218 NORTH ST  City HARRISBURG State PA 171010000  Full Name of Contributing Committee  | 8                  | 10            | 2017             | \$ 800.00<br>\$ 450.00 |
| Full Name of Contributing Committee PA OPTOMETRIC PAC  Mailing Address 218 NORTH ST  City HARRISBURG State PA 171010000  Full Name of Contributing Committee PA BANKERS PUB AFFAIRS (PABPAC)  Mailing Address 3897 N FRONT ST   | 4) 8<br>MO         | 10            | 2017             |                        |
| Full Name of Contributing Committee PA OPTOMETRIC PAC  Mailing Address 218 NORTH ST  City HARRISBURG State PA 171010000  Full Name of Contributing Committee PA BANKERS PUB AFFAIRS (PABPAC)  Mailing Address 3897 N FRONT ST   | 4) 8<br>MO         | 10            | 2017<br>YEAR     |                        |
| Full Name of Contributing Committee PA OPTOMETRIC PAC  Mailing Address 218 NORTH ST  City HARRISBURG State PA 171010000  Full Name of Contributing Committee PA BANKERS PUB AFFAIRS (PABPAC)  Mailing Address 3897 N FRONT ST  City HARRISBURG State Zip Code (Plus 4)  | 4) 8<br>MO         | 10            | 2017<br>YEAR     |                        |
| Full Name of Contributing Committee PA OPTOMETRIC PAC  Mailing Address 218 NORTH ST  City HARRISBURG State PA 171010000  Full Name of Contributing Committee PA BANKERS PUB AFFAIRS (PABPAC)  Mailing Address 3897 N FRONT ST  City HARRISBURG State PA 171100000  Full Name of Contributing Committee PA BANKERS PUB AFFAIRS (PABPAC)  Full Name of Contributing Committee   | 4) 8<br>MO<br>4) 8 | 10 DAY        | 2017 YEAR 2017   |                        |
| Full Name of Contributing Committee PA OPTOMETRIC PAC  Mailing Address 218 NORTH ST  City HARRISBURG State PA 171010000  Full Name of Contributing Committee PA BANKERS PUB AFFAIRS (PABPAC)  Mailing Address 3897 N FRONT ST  City HARRISBURG State PA 171100000  Full Name of Contributing Committee PA BANKERS PUB AFFAIRS (PABPAC)  Mailing Address 3897 N FRONT ST  City HARRISBURG State PA 171100000  Full Name of Contributing Committee ASBESTOS HEAT & FROST INSULATORS PAC | 4) 8<br>MO<br>4) 8 | 10 DAY        | 2017 YEAR 2017   | \$ 450.00              |

|                                  |             |                   |    |     |      | FAGE II            |
|----------------------------------|-------------|-------------------|----|-----|------|--------------------|
| Full Name of Contributing Commit | ttee        |                   | мо | DAY | YEAR |                    |
| PECO PAC                         |             |                   | MO | DAI | ILAK |                    |
| Mailing Address 2301 MARKET      | ST S14-2    |                   |    |     |      | <b>\$</b> 1,500.00 |
| City PHILADELPHIA                | State       | Zip Code (Plus 4) | 1  | 30  | 2017 |                    |
|                                  | PA          | 19103-0000        |    |     |      |                    |
| Full Name of Contributing Commit | ttee        |                   | МО | DAY | YEAR |                    |
| PECO PAC                         |             |                   | МО | DAT | TEAR |                    |
| Mailing Address 2301 MARKET      | ST S14-2    |                   |    |     |      | <b>\$</b> 500.00   |
| City PHILADELPHIA                | State       | Zip Code (Plus 4) | 8  | 31  | 2017 |                    |
|                                  | PA          | 19103-0000        |    |     |      |                    |
| Full Name of Contributing Commit | ttee        | <u> </u>          | мо | DAY | YEAR |                    |
| PECO PAC                         |             |                   |    |     |      |                    |
| Mailing Address 2301 MARKET      | ST S14-2    |                   | _  |     |      | \$ 500.00          |
| City PHILADELPHIA                | State       | Zip Code (Plus 4) | 5  | 27  | 2017 |                    |
|                                  | PA          | 19103-0000        |    |     |      |                    |
| Full Name of Contributing Commit |             |                   | мо | DAY | YEAR |                    |
| AQUA AMERICA INC H2O PAC (FI     | EDERAL PAC) |                   |    |     |      |                    |
| Mailing Address 762 W LANCA      | STER AVE    |                   |    |     |      | \$ 500.00          |
| City BRYN MAWR                   | State       | Zip Code (Plus 4) | 5  | 27  | 2017 |                    |
|                                  | PA          | 19010-3489        |    |     |      |                    |
| Full Name of Contributing Commit |             |                   | мо | DAY | YEAR |                    |
| NFG PAPAC (NATIONAL FUEL GA      | S)          |                   |    |     |      |                    |
| Mailing Address PO BOX 2081      |             |                   |    |     |      | \$ 500.00          |
| City ERIE                        | State       | Zip Code (Plus 4) | 5  | 27  | 2017 |                    |
|                                  | PA          | 16512-0000        |    |     |      |                    |
| Full Name of Contributing Commit | ttee        |                   | мо | DAY | YEAR |                    |
| PAW PAC                          |             |                   |    |     | 2    |                    |
| Mailing Address 800 West Hers    | shey Dr     |                   |    |     |      | \$ 500.00          |
| City hershey                     | State       | Zip Code (Plus 4) | 5  | 27  | 2017 |                    |
| •                                | PA          | 17033             |    |     |      |                    |
|                                  |             |                   |    |     |      |                    |

|   |  |                   |  |                |               |                  | <br>AGE 12     |
|---|--|-------------------|--|----------------|---------------|------------------|----------------|
| Full Na   | ame of Contributing Committee  |                   |  | мо             | DAY           | YEAR             |                |
| PA BAI  | NKERS PUB AFFAIRS (PABPAC)   |                   |  |                |               |                  |                |
| Mailing   | g Address 3897 N FRONT ST  |                   |  |                |               |                  | \$<br>500.00   |
| City  | HARRISBURG   | State             | Zip Code (Plus 4)                              | 5              | 27            | 2017             |                |
|   |  | PA                | 171100000                                      |                |               |                  |                |
| Full Na   | ame of Contributing Committee  |                   |  | мо             | DAY           | YEAR             |                |
| INDEP   | ENDENCE BLUE CROSS PAC (IBC  | C PAC)            |  |                |               |                  |                |
| Mailing   | g Address 1901 MARKET ST   |                   |  |                |               |                  | \$<br>500.00   |
| City  | PHILADELPHIA   | State             | Zip Code (Plus 4)                              | 5              | 27            | 2017             |                |
|   |  | PA                | 191031480                                      |                |               |                  |                |
|   | nme of Contributing Committee  |                   |  | мо             | DAY           | YEAR             |                |
| Mailing   | g Address 701 PA AVE NW STE  | 725               |  |                |               |                  | \$<br>500.00   |
| City  | WASHINGTON   | State             | Zip Code (Plus 4)                              | 6              | 30            | 2017             |                |
|   |  | DC                | 200040000                                      |                |               |                  |                |
|   |  |                   | 200040000                                      |                |               |                  |                |
|   | ame of Contributing Committee<br>RERS LOCAL 1174 POL ACTION C  |                   | 200040000                                      | мо             | DAY           | YEAR             |                |
| LABOR   |  | ОМ                | 200040000                                      |                |               |                  | \$<br>2,500.00 |
| LABOR   | RERS LOCAL 1174 POL ACTION C   | ОМ                | Zip Code (Plus 4)                              | <b>MO</b> 7    | <b>DAY</b> 21 | <b>YEAR</b> 2017 | \$<br>2,500.00 |
| LABOR<br><b>Mailing</b>                             | RERS LOCAL 1174 POL ACTION C  g Address 465 ALLENTOWN DR   | ОМ                |  |                |               |                  | \$<br>2,500.00 |
| Mailing City  | RERS LOCAL 1174 POL ACTION C  G Address 465 ALLENTOWN DR  ALLENTOWN  The arms of Contributing Committee  | OM<br>State       | Zip Code (Plus 4)                              |                |               |                  | \$<br>2,500.00 |
| Mailing City Full Na TEL-PA                         | RERS LOCAL 1174 POL ACTION C  G Address 465 ALLENTOWN DR  ALLENTOWN  The arms of Contributing Committee  | OM<br>State       | Zip Code (Plus 4)                              | 7              | 21            | 2017             | \$<br>2,500.00 |
| Mailing City Full Na TEL-PA                         | AC  G Address 465 ALLENTOWN DR  ALLENTOWN  ALLENTOWN  ALLENTOWN  AMBRIT COMMITTEE  AC  G Address 30 N 3rd St   | OM<br>State       | Zip Code (Plus 4)                              | 7              | 21            | 2017             |                |
| City Full Na TEL-PA                                 | RERS LOCAL 1174 POL ACTION C  G Address 465 ALLENTOWN DR  ALLENTOWN  Allendor Contributing Committee  AC   | OM State PA       | <b>Zip Code (Plus 4)</b> 181039121             | 7<br><b>MO</b> | 21<br>DAY     | 2017<br>YEAR     |                |
| City Full Na TEL-PA Mailing City Full Na            | ALLENTOWN  The property of the | OM State PA State | Zip Code (Plus 4) 181039121  Zip Code (Plus 4) | 7<br><b>MO</b> | 21<br>DAY     | 2017<br>YEAR     |                |
| City  Full Na TEL-PA  Mailing  City  Full Na AIR PR | AC  G Address 465 ALLENTOWN DR  ALLENTOWN  ALLENTOWN  ACC  G Address 30 N 3rd St  Harrisburg  ACC  ACC  Harrisburg  ACC  COUCTS PA POL ALLIANCE  | OM State PA State | Zip Code (Plus 4) 181039121  Zip Code (Plus 4) | 7 <b>MO</b> 7  | 21 DAY 31     | 2017 YEAR 2017   |                |
| City  Full Na TEL-PA  Mailing  City  Full Na AIR PR | ALLENTOWN  The property of the | OM State PA State | Zip Code (Plus 4) 181039121  Zip Code (Plus 4) | 7 <b>MO</b> 7  | 21 DAY 31     | 2017 YEAR 2017   |                |
| City  Full Na TEL-PA  Mailing  City  Full Na AIR PR | Address 465 ALLENTOWN DR ALLENTOWN  ALLENTOWN  AMME of Contributing Committee  AC  G Address 30 N 3rd St  Harrisburg  Amme of Contributing Committee  RODUCTS PA POL ALLIANCE  | OM State PA State | Zip Code (Plus 4) 181039121  Zip Code (Plus 4) | 7 <b>MO</b> 7  | 21 DAY 31     | 2017 YEAR 2017   | \$<br>350.00   |

|   |                    |  |                  |                  |                  | PAGE 13                    |
|---|--------------------|--|------------------|------------------|------------------|----------------------------|
| Full Name of Contributing Committee FRIENDS OF BOB DONCHEZ  | 2                  |  | мо               | DAY              | YEAR             |                            |
| Mailing Address 377 DEVONSHIR   | E DR               |  |                  |                  |                  | <b>\$</b> 350.00           |
| City BETHLEHEM  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18017      | 6                | 30               | 2017             |                            |
| Full Name of Contributing Committee PPL PEOPLE FOR GOOD GOVT (PPLE  |                    |  | МО               | DAY              | YEAR             |                            |
| Mailing Address 2 N 9TH STREET  |                    |  |                  |                  |                  | \$ 500.00                  |
| City ALLENTOWN  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18101-0000 | 4                | 6                | 2017             |                            |
| Full Name of Contributing Committee PPL PEOPLE FOR GOOD GOVT (PPLE  |                    |  | МО               | DAY              | YEAR             |                            |
| Mailing Address 2 N 9TH STREET  |                    |  | _                |                  |                  | \$ 800.00                  |
| City ALLENTOWN  | State<br>PA        | <b>Zip Code (Plus 4)</b><br>18101-0000 | 7                | 13               | 2017             |                            |
| Full Name of Contributing Committee   |                    |  |                  |                  |                  |                            |
| Full Name of Contributing Committee FIRSTENERGY PAC   | <u> </u>           |  | МО               | DAY              | YEAR             |                            |
|   | 2                  |  | МО               | DAY              | YEAR             | \$ 1,500.00                |
| FIRSTENERGY PAC   | State OH           | <b>Zip Code (Plus 4)</b> 443080000     | мо 8             | <b>DAY</b> 30    | <b>YEAR</b> 2017 | \$ 1,500.00                |
| FIRSTENERGY PAC  Mailing Address 76 S MAIN ST   | State<br>OH        |  |                  |                  |                  | \$ 1,500.00                |
| FIRSTENERGY PAC  Mailing Address 76 S MAIN ST  City AKRON  Full Name of Contributing Committee  | State<br>OH        |  | - 8<br><b>MO</b> | 30<br><b>DAY</b> | 2017<br>YEAR     | \$ 1,500.00<br>\$ 1,000.00 |
| FIRSTENERGY PAC  Mailing Address 76 S MAIN ST  City AKRON  Full Name of Contributing Committee  FIRSTENERGY PAC   | State<br>OH        |  | - 8              | 30               | 2017             |                            |
| FIRSTENERGY PAC  Mailing Address 76 S MAIN ST  City AKRON  Full Name of Contributing Committee FIRSTENERGY PAC  Mailing Address 76 S MAIN ST  | State OH State OH  | 443080000  Zip Code (Plus 4)           | - 8<br><b>MO</b> | 30<br><b>DAY</b> | 2017<br>YEAR     |                            |
| FIRSTENERGY PAC  Mailing Address 76 S MAIN ST  City AKRON  Full Name of Contributing Committee FIRSTENERGY PAC  Mailing Address 76 S MAIN ST  City AKRON  Full Name of Contributing Committee | State OH State OH  | 443080000  Zip Code (Plus 4)           | <b>MO</b>        | 30 DAY           | 2017 YEAR 2017   |                            |

| Full Name of   | f Contributing Committee  |                  |                                     |             |                |                  |                |
|--|---|------------------|-------------------------------------|-------------|----------------|------------------|----------------|
| PA REALTOR   | RS PAC  |                  |                                     | МО          | DAY            | YEAR             |                |
| Mailing Addr   | ress 500 NORTH 12TH ST  | REET             |                                     |             |                |                  | \$<br>1,500.00 |
| City LEMO  | OYNE  | State            | Zip Code (Plus 4)                   | 7           | 6              | 2017             |                |
|  |   | PA               | 17043                               |             |                |                  |                |
| Full Name of   | f Contributing Committee  |                  |                                     | мо          | DAY            | YEAR             |                |
| IBEW PAC V   | OLUNTARY FUND   |                  |                                     |             |                |                  |                |
| Mailing Addr   | 900 SEVENTH STREE   | ET NW            |                                     |             |                |                  | \$<br>1,500.00 |
| City WAS   | SHINGTON  | State            | Zip Code (Plus 4)                   | 7           | 6              | 2017             |                |
|  |   | DC               | 20001                               |             |                |                  |                |
| Full Name of   | f Contributing Committee  |                  |                                     | МО          | DAY            | YEAR             |                |
|  |   |                  |                                     |             |                |                  |                |
| Mailing Addr   | 1925 N Front St   |                  |                                     | 5           | 27             | 2017             | \$<br>1,000.00 |
| <b>City</b> Harri  | isburg  | State            | Zip Code (Plus 4)                   | ,           | 27             | 2017             |                |
|  |   | PA               | 17105                               |             |                |                  |                |
| Full Name of Contributing Committee  |   |                  |                                     |             |                |                  |                |
|  | f Contributing Committee  |                  |                                     | МО          | DAY            | YEAR             |                |
| PAA-PAC  |   |                  |                                     | МО          | DAY            | YEAR             |                |
|  |   |                  |                                     |             |                |                  | \$<br>1,500.00 |
| PAA-PAC  Mailing Addr  |   | State            | Zip Code (Plus 4)                   | <b>MO</b>   | <b>DAY</b> 9   | <b>YEAR</b> 2017 | \$<br>1,500.00 |
| PAA-PAC  Mailing Addr  | ress 1925 N Front St  | State<br>PA      | <b>Zip Code (Plus 4)</b> 17105      |             |                |                  | \$<br>1,500.00 |
| PAA-PAC  Mailing Addr  City Harri  Full Name of  | ress 1925 N Front St  | РА               |                                     |             |                |                  | \$<br>1,500.00 |
| PAA-PAC  Mailing Addr  City Harri  Full Name of  | ress 1925 N Front St isburg  F Contributing Committee  O STEAMFITTERS UNION CO  | PA<br>PE COM     |                                     | 8           | 9              | 2017             | \$<br>1,500.00 |
| PAA-PAC  Mailing Addr  City Harri  Full Name of LOCAL 0420  Mailing Addr   | ress 1925 N Front St isburg  F Contributing Committee O STEAMFITTERS UNION CO   | PA<br>PE COM     |                                     | 8           | 9              | 2017             |                |
| PAA-PAC  Mailing Addr  City Harri  Full Name of LOCAL 0420  Mailing Addr   | ress 1925 N Front St isburg  F Contributing Committee  STEAMFITTERS UNION CO  | PE COM           | 17105                               | 8<br>MO     | 9<br>DAY       | 2017<br>YEAR     |                |
| PAA-PAC  Mailing Addr  City Harri  Full Name of LOCAL 0420  Mailing Addr  City PHIL  | ress 1925 N Front St isburg  F Contributing Committee O STEAMFITTERS UNION CO   | PE COM           | 17105  Zip Code (Plus 4)            | <b>MO</b> 7 | 9 <b>DAY</b> 5 | 2017 YEAR 2017   |                |
| PAA-PAC  Mailing Addr  City Harri  Full Name of LOCAL 0420  Mailing Addr  City PHIL  | ress 1925 N Front St  isburg  F Contributing Committee  STEAMFITTERS UNION CO  ress 14420 TOWNSEND F  | PE COM           | 17105  Zip Code (Plus 4)            | 8<br>MO     | 9<br>DAY       | 2017<br>YEAR     |                |
| PAA-PAC  Mailing Addr  City Harri  Full Name of LOCAL 0420  Mailing Addr  City PHIL  | 1925 N Front St  isburg  f Contributing Committee  STEAMFITTERS UNION CO  ress 14420 TOWNSEND F  ADELPHIA  f Contributing Committee  RY FUNERAL ASSOC PAC                         | PE COM  State PA | 17105  Zip Code (Plus 4)            | <b>MO</b> 7 | 9 <b>DAY</b> 5 | 2017 YEAR 2017   |                |
| PAA-PAC  Mailing Addr  City Harri  Full Name of LOCAL 0420  Mailing Addr  City PHIL  Full Name of PA CEMETER  Mailing Addr | 1925 N Front St  isburg  F Contributing Committee  STEAMFITTERS UNION CO  Tess 14420 TOWNSEND F  ADELPHIA  F Contributing Committee  RY FUNERAL ASSOC PAC  Tess 3051 GREEN POND F | PE COM  State PA | 17105  Zip Code (Plus 4)            | <b>MO</b> 7 | 9 <b>DAY</b> 5 | 2017 YEAR 2017   | \$<br>1,500.00 |
| PAA-PAC  Mailing Addr  City Harri  Full Name of LOCAL 0420  Mailing Addr  City PHIL  Full Name of PA CEMETER  Mailing Addr | 1925 N Front St  isburg  F Contributing Committee  STEAMFITTERS UNION CO  Tess 14420 TOWNSEND F  ADELPHIA  F Contributing Committee  RY FUNERAL ASSOC PAC  Tess 3051 GREEN POND F | PE COM  State PA | <b>Zip Code (Plus 4)</b> 19154-1028 | <b>MO</b> 7 | 9 <b>DAY</b> 5 | 2017 YEAR 2017   | \$<br>1,500.00 |

|  |           |               |                  | FAGL I |        |
|--|-----------|---------------|------------------|--------|--------|
| Full Name of Contributing Committee  | MO        | DAY           | YEAR             |        |        |
| PA PT PAC  | МО        | DAT           | TEAR             |        |        |
| Mailing Address 4028 WATTERS LN  |           |               |                  | \$     | 350.00 |
| City GIBSONIA State Zip Code (Plus 4)  | 6         | 30            | 2017             |        |        |
| PA 15044   |           |               |                  |        |        |
| Full Name of Contributing Committee  | мо        | DAY           | YEAR             |        |        |
| POLITICAL LABOR ACTION NOW (PLAN)  |           |               |                  |        |        |
| Mailing Address 904 N 2ND ST   |           |               |                  | \$ !   | 500.00 |
| City HARRISBURG State Zip Code (Plus 4)  | 5         | 17            | 2017             |        |        |
| PA 17102-3119  |           |               |                  |        |        |
| Full Name of Contributing Committee FOOD PAC (PA FOOD MERCHANTS ASSN)  | мо        | DAY           | YEAR             |        |        |
| Mailing Address PO BOX 870   |           |               |                  | \$ !   | 500.00 |
| City CAMP HILL State Zip Code (Plus 4)   | 5         | 17            | 2017             |        |        |
| PA 170110000   |           |               |                  |        |        |
|  |           |               |                  |        |        |
| Full Name of Contributing Committee  PHARMPAC (PA PHARMACY PAC)  | МО        | DAY           | YEAR             |        |        |
|  | МО        | DAY           | YEAR             | \$ !   | 500.00 |
| PHARMPAC (PA PHARMACY PAC)  Mailing Address 508 NORTH THIRD STREET  State 7 Tip Code (Plus 4)  | <b>MO</b> | <b>DAY</b> 25 | <b>YEAR</b> 2017 | \$     | 500.00 |
| PHARMPAC (PA PHARMACY PAC)  Mailing Address 508 NORTH THIRD STREET   |           |               |                  | \$     | 500.00 |
| PHARMPAC (PA PHARMACY PAC)  Mailing Address 508 NORTH THIRD STREET  City HARRISBURG State Zip Code (Plus 4)  |           |               |                  | \$     | 500.00 |
| PHARMPAC (PA PHARMACY PAC)  Mailing Address 508 NORTH THIRD STREET  City HARRISBURG State PA 171011199  Full Name of Contributing Committee  | 5         | 25            | 2017             |        | 500.00 |
| PHARMPAC (PA PHARMACY PAC)  Mailing Address 508 NORTH THIRD STREET  City HARRISBURG State PA 171011199  Full Name of Contributing Committee PABAR PAC (PA BAR ASSN)  Mailing Address 100 SOUTH STREET  | 5         | 25            | 2017             |        |        |
| PHARMPAC (PA PHARMACY PAC)  Mailing Address 508 NORTH THIRD STREET  City HARRISBURG State PA 171011199  Full Name of Contributing Committee PABAR PAC (PA BAR ASSN)  Mailing Address 100 SOUTH STREET  | 5         | DAY           | 2017<br>YEAR     |        |        |
| PHARMPAC (PA PHARMACY PAC)  Mailing Address 508 NORTH THIRD STREET  City HARRISBURG State PA 171011199  Full Name of Contributing Committee PABAR PAC (PA BAR ASSN)  Mailing Address 100 SOUTH STREET  City HARRISBURG State Zip Code (Plus 4)   | 5         | DAY           | 2017<br>YEAR     |        |        |
| PHARMPAC (PA PHARMACY PAC)  Mailing Address 508 NORTH THIRD STREET  City HARRISBURG State PA 171011199  Full Name of Contributing Committee PABAR PAC (PA BAR ASSN)  Mailing Address 100 SOUTH STREET  City HARRISBURG State PA 171010000  Full Name of Contributing Committee                               | <b>MO</b> | 25<br>DAY 25  | 2017 YEAR 2017   | \$     |        |
| PHARMPAC (PA PHARMACY PAC)  Mailing Address 508 NORTH THIRD STREET  City HARRISBURG State PA 1710111199  Full Name of Contributing Committee PABAR PAC (PA BAR ASSN)  Mailing Address 100 SOUTH STREET  City HARRISBURG State PA 171010000  Full Name of Contributing Committee HIGHMARK PAC OF HIGHMARK INC | <b>MO</b> | 25<br>DAY 25  | 2017 YEAR 2017   | \$     | 500.00 |

|   |           |               |                  | FAGL 16                  |
|---|-----------|---------------|------------------|--------------------------|
| Full Name of Contributing Committee   |           | DAY           | VEAD             |                          |
| PA REALTORS PAC   | МО        | DAY           | YEAR             |                          |
| Mailing Address 500 NORTH 12TH STREET   |           |               |                  | <b>\$</b> 500.00         |
| City LEMOYNE State Zip Code (Plus 4)  | 5         | 2             | 2017             |                          |
| PA 17043  |           |               |                  |                          |
| Full Name of Contributing Committee   | МО        | DAY           | YEAR             |                          |
| DUANE MORRIS GOVT COM   |           |               |                  |                          |
| Mailing Address 30 SOUTH 17TH ST  |           |               |                  | \$ 500.00                |
| City PHILADELPHIA State Zip Code (Plus 4)   | 5         | 31            | 2017             |                          |
| PA 19103-4196   |           |               |                  |                          |
| Full Name of Contributing Committee   | МО        | DAY           | YEAR             |                          |
| PA ARCHITECTS PAC   | МО        | DAT           | TEAR             |                          |
| Mailing Address 208 N 3RD ST STE 400  |           |               |                  | <b>\$</b> 500.00         |
| City HARRISBURG State Zip Code (Plus 4)   | 5         | 31            | 2017             |                          |
| PA 17101-0000   |           |               |                  |                          |
| 17101-0000  |           |               |                  |                          |
| Full Name of Contributing Committee  MCNEES PAC   | МО        | DAY           | YEAR             |                          |
| Full Name of Contributing Committee   | МО        | DAY           | YEAR             | \$ 500.00                |
| Full Name of Contributing Committee  MCNEES PAC  Mailing Address 100 PINE ST PO BOX 1166  |           | <b>DAY</b> 31 | <b>YEAR</b> 2017 | \$ 500.00                |
| Full Name of Contributing Committee  MCNEES PAC  Mailing Address 100 PINE ST PO BOX 1166  |           |               |                  | \$ 500.00                |
| Full Name of Contributing Committee  MCNEES PAC  Mailing Address 100 PINE ST PO BOX 1166  City HARRISBURG State Zip Code (Plus 4)   |           |               |                  | \$ 500.00                |
| Full Name of Contributing Committee  MCNEES PAC  Mailing Address 100 PINE ST PO BOX 1166  City HARRISBURG State PA 171081166  Full Name of Contributing Committee   | 5         | 31            | 2017             | \$ 500.00<br>\$ 1,000.00 |
| Full Name of Contributing Committee  MCNEES PAC  Mailing Address 100 PINE ST PO BOX 1166  City HARRISBURG State PA 171081166  Full Name of Contributing Committee  ERIE INSURANCE PAC  Mailing Address 100 ERIE INSURANCE PLAZA   | 5         | 31            | 2017             |                          |
| Full Name of Contributing Committee  MCNEES PAC  Mailing Address 100 PINE ST PO BOX 1166  City HARRISBURG State PA 171081166  Full Name of Contributing Committee  ERIE INSURANCE PAC  Mailing Address 100 ERIE INSURANCE PLAZA   | 5         | 31<br>DAY     | 2017<br>YEAR     |                          |
| Full Name of Contributing Committee  MCNEES PAC  Mailing Address 100 PINE ST PO BOX 1166  City HARRISBURG State PA 171081166  Full Name of Contributing Committee  ERIE INSURANCE PAC  Mailing Address 100 ERIE INSURANCE PLAZA  City ERIE State Zip Code (Plus 4)  | 5         | 31<br>DAY     | 2017<br>YEAR     |                          |
| Full Name of Contributing Committee  MCNEES PAC  Mailing Address 100 PINE ST PO BOX 1166  City HARRISBURG State PA 171081166  Full Name of Contributing Committee  ERIE INSURANCE PAC  Mailing Address 100 ERIE INSURANCE PLAZA  City ERIE State Zip Code (Plus 4)  16530-0000  Full Name of Contributing Committee                   | <b>MO</b> | 31 DAY        | 2017 YEAR 2017   |                          |
| Full Name of Contributing Committee  MCNEES PAC  Mailing Address 100 PINE ST PO BOX 1166  City HARRISBURG State PA 171081166  Full Name of Contributing Committee  ERIE INSURANCE PAC  Mailing Address 100 ERIE INSURANCE PLAZA  City ERIE State Zip Code (Plus 4) 16530-0000  Full Name of Contributing Committee  PA OPTOMETRIC PAC | мо мо     | 31 DAY        | 2017 YEAR 2017   | \$ 1,000.00              |

|   |  |             |               |                  | FAGL 17                |
|---|--|-------------|---------------|------------------|------------------------|
| Full Name of Contributing Committee  VERIZON GOOD GOVT CLUB OF PA   |  | мо          | DAY           | YEAR             |                        |
| Mailing Address 417 WALNUT STREET, 1ST FL   | OOR                                    |             |               |                  | <b>\$</b> 500.00       |
| City HARRISBURG State PA  | <b>Zip Code (Plus 4)</b><br>17101-1824 | 5           | 30            | 2017             |                        |
| Full Name of Contributing Committee  EXELON CORP PAC  |  | МО          | DAY           | YEAR             |                        |
| Mailing Address 101 CONSTITUTION AVE, NW  | , STE 400 EAST                         |             |               |                  | <b>\$</b> 1,000.00     |
| City WASHINGTON State DC  | <b>Zip Code (Plus 4)</b> 20001         | 5           | 30            | 2017             |                        |
| Full Name of Contributing Committee CAPITAL BLUE PAC  |  | МО          | DAY           | YEAR             |                        |
| Mailing Address PO BOX 60710  |  |             |               |                  | <b>\$</b> 500.00       |
| City HARRISBURG State PA  | <b>Zip Code (Plus 4)</b><br>17106-0710 | 5           | 30            | 2017             |                        |
|   |  |             |               |                  |                        |
| Full Name of Contributing Committee  NISOURCE INC PAC   |  | МО          | DAY           | YEAR             |                        |
| <del>-</del>  |  | МО          | DAY           | YEAR             | \$ 500.00              |
| NISOURCE INC PAC  | <b>Zip Code (Plus 4)</b> 432150000     | <b>MO</b> 4 | <b>DAY</b> 29 | <b>YEAR</b> 2017 | \$ 500.00              |
| NISOURCE INC PAC  Mailing Address 200 CIVIC CENTER DR  City COLUMBUS State  |  |             |               |                  | \$ 500.00              |
| NISOURCE INC PAC  Mailing Address 200 CIVIC CENTER DR  City COLUMBUS State OH  Full Name of Contributing Committee  |  | 4 MO        | 29<br>DAY     | 2017<br>YEAR     | \$ 500.00<br>\$ 500.00 |
| Mailing Address 200 CIVIC CENTER DR  City COLUMBUS  State OH  Full Name of Contributing Committee  APSCUF/CAP(ASSN PA ST COL/UNIV FACL)   |  | 4           | 29            | 2017             |                        |
| Mailing Address 200 CIVIC CENTER DR  City COLUMBUS  Full Name of Contributing Committee  APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG  State                               | 432150000<br>Zip Code (Plus 4)         | 4 MO        | 29<br>DAY     | 2017<br>YEAR     |                        |
| Mailing Address 200 CIVIC CENTER DR  City COLUMBUS  Full Name of Contributing Committee  APSCUF/CAP(ASSN PA ST COL/UNIV FACL)  Mailing Address 319 N FRONT ST  City HARRISBURG  Full Name of Contributing Committee | 432150000<br>Zip Code (Plus 4)         | <b>MO</b> 5 | 29 DAY        | 2017 YEAR 2017   |                        |

|   |           |               |                  | FAGL 18                |
|---|-----------|---------------|------------------|------------------------|
| Full Name of Contributing Committee PA CHAMBER OF BUSINESS & INDUSTRY   | МО        | DAY           | YEAR             |                        |
| Mailing Address 1 COMMERCE SQ, 417 WALNUT ST  |           |               |                  | \$ 500.00              |
| City         HARRISBURG         State         Zip Code (Plus 4)           PA         171010000  | 6         | 7             | 2017             |                        |
| Full Name of Contributing Committee  CALPINE CORPORATION PAC  | МО        | DAY           | YEAR             |                        |
| Mailing Address 4160 DUBLIN BLVD, STE 100   |           |               |                  | <b>\$</b> 500.00       |
| City DUBLIN  CA  Zip Code (Plus 4)  94568   | 8         | 17            | 2017             |                        |
| Full Name of Contributing Committee  ECKERT SEAMANS PA GOVT PAC   | МО        | DAY           | YEAR             |                        |
| Mailing Address 600 GRANT ST 44TH FL  |           |               |                  | <b>\$</b> 500.00       |
| City         PITTSBURGH         State         Zip Code (Plus 4)           PA         152190000  | 5         | 31            | 2017             |                        |
|   |           |               |                  |                        |
| Full Name of Contributing Committee  PA COALITION OF NURSE PRACTITIONERS PAC  | МО        | DAY           | YEAR             |                        |
|   | МО        | DAY           | YEAR             | \$ 500.00              |
| PA COALITION OF NURSE PRACTITIONERS PAC   | <b>мо</b> | <b>DAY</b> 31 | <b>YEAR</b> 2017 | \$ 500.00              |
| PA COALITION OF NURSE PRACTITIONERS PAC  Mailing Address 2400 ARDMORE BLVD, STE 302  City PITTSBURGH State Zip Code (Plus 4)  |           |               |                  | \$ 500.00              |
| PA COALITION OF NURSE PRACTITIONERS PAC  Mailing Address 2400 ARDMORE BLVD, STE 302  City PITTSBURGH State PA 15221  Full Name of Contributing Committee  | 5         | 31<br>DAY     | 2017             | \$ 500.00<br>\$ 500.00 |
| PA COALITION OF NURSE PRACTITIONERS PAC  Mailing Address 2400 ARDMORE BLVD, STE 302  City PITTSBURGH State PA 15221  Full Name of Contributing Committee  PA VIDEO GAMING ASSOCIATION PAC (PAVGA PAC)   | 5         | 31            | 2017             |                        |
| PA COALITION OF NURSE PRACTITIONERS PAC  Mailing Address 2400 ARDMORE BLVD, STE 302  City PITTSBURGH State PA VIDEO GAMING ASSOCIATION PAC (PAVGA PAC)  Mailing Address 200 NORTH THIRD STREET SUITE 1500  City HARRISBURG State Zip Code (Plus 4)  | мо        | 31<br>DAY     | 2017<br>YEAR     |                        |
| PA COALITION OF NURSE PRACTITIONERS PAC  Mailing Address 2400 ARDMORE BLVD, STE 302  City PITTSBURGH State PA VIDEO GAMING ASSOCIATION PAC (PAVGA PAC)  Mailing Address 200 NORTH THIRD STREET SUITE 1500  City HARRISBURG State PA VIDEO GAMING ASSOCIATION PAC (PAVGA PAC)  Full Name of Contributing Committee | <b>MO</b> | 31 DAY 5      | 2017 YEAR 2017   |                        |

| Full Name of Contributing Committee GGR INC PAC (GMEREK GOV RELATION | NS)                |                                       | мо | DAY | YEAR |                    |
|--|--------------------|---------------------------------------|----|-----|------|--------------------|
| Mailing Address 212 LOCUST STREE                                     | ET, SUITE 300      |                                       |    |     |      | <b>\$</b> 500.00   |
| City HARRISBURG  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 17101        | 6  | 8   | 2017 |                    |
| Full Name of Contributing Committee UGI State PAC                    |                    |                                       | МО | DAY | YEAR |                    |
| Mailing Address 2525 N 11th  |                    |                                       |    |     |      | \$ 800.00          |
| <b>City</b> Reading  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19612     | 8  | 30  | 2017 |                    |
| Full Name of Contributing Committee DISPAC (DISTRIBUTORS PAC)        |                    |                                       | МО | DAY | YEAR |                    |
| Mailing Address 230 SOUTH BROAD                                      | ST STE 903         |                                       |    |     |      | <b>\$</b> 1,000.00 |
| City PHILADELPHIA  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191020000 | 8  | 16  | 2017 |                    |

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

**PAGE TOTAL \$** 52,150.00

## 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               |       |     |              | Rep             | orting Pe | riod         |                |                       |          |          |  |
|---|-------|-----|--------------|-----------------|-----------|--------------|----------------|-----------------------|----------|----------|--|
| BOSCOLA, LISA FRIENDS OF                            |       |     |              | Fron            | n:        | <u>1/1/2</u> | 017 <b>T</b> o | To: <u>10/23/2017</u> |          | 23/2017  |  |
|   |       |     |              |                 | D.A       | ATE          |                |                       | AMOUNT   |          |  |
| Full Name of Contributor Carl Deiter                |       |     |              |                 | мо        | DAY          | YEAR           |                       |          |          |  |
| Mailing 1226 Stefko BLVD                            |       |     |              |                 |           |              |                | \$                    |          | 1,000.00 |  |
| City BEthlehem                                      | State | Zij | p Code (Plus | ; 4)            | 8         | 16           | 2017           | '                     |          |          |  |
| 22  | PA    | 18  | 3017         |                 |           |              |                |                       |          |          |  |
| Employer Name Deiter Family Partners                | ship  |     |              |                 | Occupat   | cion (       | )wners         | •                     |          |          |  |
| Employer Mailing Address/Principal Plac<br>Business | e of  |     | City         |                 |           | State        |                | Zip                   | Code (Pl | ıs 4)    |  |
| 1226 Stefko Blvd                                    |       |     | Bethlehe     | m               |           | PA           |                | 18                    | 017      |          |  |
| Full Name of Contributor Frederick Ronca            |       |     |              |                 | МО        | DAY          | YEAR           |                       |          |          |  |
| Mailing 179 Mikron Rd                               |       |     |              |                 |           |              |                | \$                    |          | 2,500.00 |  |
| City Bethlehem                                      | State | Zij | p Code (Plus | <del>• 4)</del> | 9         | 8            | 2017           | '                     |          |          |  |
|   | PA    | 18  | 8020         |                 |           |              |                |                       |          |          |  |
| Employer Name MF Ronca and Sons                     |       |     |              |                 | Occupat   | ion          | )wner          |                       |          |          |  |
| Employer Mailing Address/Principal Plac<br>Business | e of  |     | City         |                 |           | State        |                | Zip                   | Code (Pl | us 4)    |  |
| 179 Mikron  |       |     | Behlehen     | n               |           | PA           |                | 18                    | 020      |          |  |
| Full Name of Contributor                            |       |     |              |                 |           | DAY          | VEAD           |                       |          |          |  |
| Joseph Guano  |       |     |              |                 | МО        | DAY          | YEAR           |                       |          |          |  |
| Mailing 11 Gibson Cir                               |       |     |              |                 |           |              |                | \$                    |          | 350.00   |  |
| City Perkasie                                       | State | Zij | p Code (Plus | i 4)            | 7         | 19           | 2017           | '                     |          |          |  |
|   | PA    | 18  | 3944         |                 |           |              |                |                       |          |          |  |
| Employer Name None                                  |       |     |              |                 | Occupat   | ion R        | etired         |                       |          |          |  |
| Employer Mailing Address/Principal Plac<br>Business | e of  |     | City         |                 | •         | State        |                | Zip                   | Code (Pl | us 4)    |  |
| None  |       |     | None         |                 |           | PA           |                | 189                   | 944      |          |  |

| Full Name of Contributor  CArl Hoffman   |                 |                      |                     | мо          | DAY               | YEAR             |                      |               |
|--|-----------------|----------------------|---------------------|-------------|-------------------|------------------|----------------------|---------------|
| Mailing 1617 Berkshire Ln  |                 |                      |                     |             |                   |                  | <u> </u>             |               |
| Address  |                 |                      |                     | 7           | 19                | 2017             | <b>\$</b>            | 2,500.00      |
| <b>City</b> Harrisburg   | State           |                      | de (Plus 4)         | ,           | 19                | 2017             |                      |               |
|  | PA              | 17111                |                     |             |                   |                  |                      |               |
| Employer Name Prime Care   |                 |                      |                     | Occupat     | ion<br>E          | xecutive         | e                    |               |
| Employer Mailing Address/Principal Place<br>Business   | e of            | С                    | ity                 |             | State             |                  | Zip Code (P          | lus 4)        |
| 3940 Locust Ln   |                 | Н                    | larrisburg          |             | PA                |                  | 17109                |               |
| Full Name of Contributor   |                 |                      |                     | мо          | DAY               | YEAR             |                      |               |
| Anna Stofko  |                 |                      |                     |             |                   |                  |                      |               |
| Mailing 1954 Greenleaf St<br>Address   |                 |                      |                     |             |                   |                  | \$                   | 650.00        |
| City BEthlehem   | State           | Zip Co               | de (Plus 4)         | 7           | 3                 | 2017             |                      |               |
|  | PA              | 18017                | ,                   |             |                   |                  |                      |               |
| Employer Name None   | 1               |                      |                     | Occupat     | <b>ion</b>        | etired           | •                    |               |
| Employer Mailing Address/Principal Place   | e of            | С                    | ity                 |             | State             |                  | Zip Code (P          | lus 4)        |
| <b>Business</b> None   |                 | l <sub>N</sub>       | lone                |             | PA                |                  | 18017                |               |
|  |                 | <u> </u>             |                     |             | 1                 |                  | 1001                 |               |
| Full Name of Contributor Guy Saxton  |                 |                      |                     | мо          | DAY               | YEAR             |                      |               |
| *  |                 |                      |                     |             |                   |                  | Ц                    |               |
| Mailing 3015 Green Pond Rd Address   |                 |                      |                     |             |                   |                  | \$                   | 1,500.00      |
| City Easton  | State           | Zip Co               | de (Plus 4)         | 7           | 28                | 2017             |                      |               |
|  | PA              | 18045                | i                   |             |                   |                  |                      |               |
| Employer Name Self   |                 |                      |                     | Occupat     | ion               |                  | 1                    |               |
| 1  |                 |                      |                     |             | S                 | elf Emp          | loyed                |               |
| Employer Mailing Address/Principal Place   | e of            | C                    | ity                 |             | State             | elf Emp          | loyed Zip Code (P    | lus 4)        |
| Employer Mailing Address/Principal Plac<br>Business<br>3015 Green Pond Rd  | e of            |                      | <b>ity</b><br>aston |             | S                 | elf Emp          |                      | lus 4)        |
| Business 3015 Green Pond Rd  Full Name of Contributor  | e of            |                      |                     | мо          | State             |                  | Zip Code (P          | lus 4)        |
| Business 3015 Green Pond Rd  | e of            |                      |                     | МО          | State PA          | YEAR             | Zip Code (P          | lus 4)        |
| Business 3015 Green Pond Rd  Full Name of Contributor  | e of            |                      |                     |             | State PA  DAY     | YEAR             | Zip Code (P          | <b>450.00</b> |
| Business 3015 Green Pond Rd  Full Name of Contributor Thomas Lubben  Mailing 2109 Bally Dr   | e of            | E                    |                     | <b>MO</b> 7 | State PA          |                  | Zip Code (P          |               |
| Business 3015 Green Pond Rd  Full Name of Contributor Thomas Lubben  Mailing Address 2109 Bally Dr   |                 | E                    | de (Plus 4)         |             | State PA  DAY     | YEAR             | Zip Code (P          |               |
| Business 3015 Green Pond Rd  Full Name of Contributor Thomas Lubben  Mailing Address 2109 Bally Dr   | State           | Zip Coo              | de (Plus 4)         |             | State PA  DAY  28 | YEAR             | Zip Code (P          |               |
| Business 3015 Green Pond Rd  Full Name of Contributor Thomas Lubben  Mailing Address 2109 Bally Dr  City Northampton  Employer Name TLC Arts  Employer Mailing Address/Principal Place | <b>State</b> PA | <b>Zip Co</b> 18067  | de (Plus 4)         | 7           | State PA  DAY  28 | <b>YEAR</b> 2017 | Zip Code (P          | 450.00        |
| Business 3015 Green Pond Rd  Full Name of Contributor Thomas Lubben  Mailing Address 2109 Bally Dr  City Northampton  Employer Name TLC Arts   | <b>State</b> PA | <b>Zip Coo</b> 18067 | de (Plus 4)         | 7           | State PA  DAY  28 | <b>YEAR</b> 2017 | zip Code (P<br>18045 | 450.00        |

| Full Name of Cont            | tributor                |          |     |                  | мо      | DAY         | YEAR     |             |          |
|------------------------------|-------------------------|----------|-----|------------------|---------|-------------|----------|-------------|----------|
| Mailing                      |                         |          |     |                  |         |             |          | 4           |          |
| Address                      | 13191 Crossroads Par    | kway     |     |                  |         |             |          | \$          | 2,500.00 |
| City City of In              | dustry                  | State    | Zij | Code (Plus 4)    | 7       | 26          | 2017     |             |          |
|                              |                         | CA       | 91  | .746             |         |             |          |             |          |
| Employer Name                | 13191 Crossroads        |          |     |                  | Occupat | ion M       | lagestic | Realty      |          |
| Employer Mailing<br>Business | Address/Principal Place | e of     |     | City             | ı       | State       |          | Zip Code (P | lus 4)   |
| City of Industry             |                         |          |     | City of Industry |         | CA          |          | 91746       |          |
| Full Name of Cont            | ributor                 |          |     |                  |         | DAY         | VEAD     |             |          |
| Stephen Salvagg              | io                      |          |     |                  | МО      | DAY         | YEAR     |             |          |
| Mailing<br>Address           | 3713 Carrington Cit     |          |     |                  |         |             |          | \$          | 1,500.00 |
| City Easton                  |                         | State    | Zij | Code (Plus 4)    | 7       | 26          | 2017     |             |          |
|                              |                         | PA       | 18  | 3042             |         |             |          |             |          |
| Employer Name                | Selvaggio Heating & F   | Plumbing |     |                  | Occupat | i <b>on</b> | )wner    | •           |          |
| Employer Mailing<br>Business | Address/Principal Place | e of     |     | City             |         | State       |          | Zip Code (P | lus 4)   |
| 623 Municipal Dr             |                         |          |     | Nazareth         |         | PA          |          | 18064       |          |
| Full Name of Cont            | ributor                 |          |     |                  |         |             |          |             |          |
| KL GATES                     |                         |          |     |                  | МО      | DAY         | YEAR     |             |          |
| Mailing<br>Address           | 210 SIXTH Ave           |          |     |                  |         |             |          | \$          | 500.00   |
| <b>City</b> Pittsburgl       | 1                       | State    | Zij | Code (Plus 4)    | 6       | 30          | 2017     |             |          |
|                              |                         | PA       | 15  | 5222             |         |             |          |             |          |
| Employer Name                | KL Gates LLP            | ,        |     |                  | Occupat | i <b>on</b> | )wner    | •           |          |
| Employer Mailing<br>Business | Address/Principal Place | e of     |     | City             |         | State       |          | Zip Code (P | lus 4)   |
| 210 Sixth                    |                         |          |     | Pittsburgh       |         | PA          |          | 16222       |          |
| Full Name of Cont            | ributor                 |          |     |                  | мо      | DAY         | YEAR     |             |          |
| Charles Chrin                |                         |          |     |                  | МО      | DAI         | ILAK     |             |          |
| Mailing<br>Address           | 2841 Norton Ave         |          |     |                  |         |             |          | \$          | 1,500.00 |
| City Easton                  |                         | State    | Zij | Code (Plus 4)    | 7       | 10          | 2017     |             |          |
|                              |                         | PA       | 18  | 3045             |         |             |          |             |          |
| Employer Name                | Chrin Industries        |          |     |                  | Occupat | i <b>on</b> | )wner    |             |          |
| Employer Mailing<br>Business | Address/Principal Plac  | e of     |     | City             | I       | State       |          | Zip Code (P | lus 4)   |
| 2841 Norton Ave              |                         |          |     | Easton           |         | PA          |          | 18042       |          |
|                              |                         |          |     |                  |         | ı           |          |             |          |

| Full Name of Contributor                            |       |     |               | мо       | DAY         | YEAR    |                   |        |
|---|-------|-----|---------------|----------|-------------|---------|-------------------|--------|
| Carlos Tavares                                      |       |     |               |          |             |         | Ц                 |        |
| Mailing 430 hemlock                                 |       |     |               | _        |             |         | \$ 1,500          | 0.00   |
| City Nazareth                                       | State | Zip | Code (Plus 4) | 7        | 10          | 2017    |                   |        |
|   | PA    | 18  | 064           |          |             |         |                   |        |
| Employer Name Joao & Bradley                        |       |     |               | Occupat  | ion E       | xecutiv | e                 |        |
| Employer Mailing Address/Principal Plac<br>Business | e of  |     | City          |          | State       |         | Zip Code (Plus 4) |        |
| 4211 Tracy Lane                                     |       |     | BEthlehem     |          | PA          |         | 18020             |        |
| Full Name of Contributor                            |       |     |               |          |             |         |                   |        |
| Mark Pepitone                                       |       |     |               | МО       | DAY         | YEAR    |                   |        |
| Mailing 2285 Schoenersville I                       | Rd    |     |               |          |             |         | <b>\$</b> 2,500   | 0.00   |
| City Bethlehem                                      | State | Zip | Code (Plus 4) | 6        | 22          | 2017    |                   |        |
|   | PA    | 18  | 017           |          |             |         |                   |        |
| Employer Name Westgate Mall                         |       |     |               | Occupat  | ion C       | )wner   |                   |        |
| Employer Mailing Address/Principal Plac<br>Business | e of  |     | City          | <u> </u> | State       | T       | Zip Code (Plus 4) |        |
| 2285 Schoenersville Rd                              |       |     | Bethlehem     |          | PA          |         | 18017             |        |
| Full Name of Contributor                            |       |     |               |          | DAY         | YEAR    |                   |        |
| Joseph Uliana                                       |       |     |               | МО       | DAT         | TEAR    |                   |        |
| Mailing 2571 Baglyos Circle                         |       |     |               |          |             |         |                   | 500.00 |
| City Bethlehem                                      | State | Zip | Code (Plus 4) | 5        | 25          | 2017    |                   |        |
|   | PA    | 18  | 020           |          |             |         |                   |        |
| Employer Name JM Uliana & Associate                 | es    |     |               | Occupat  | i <b>on</b> | residen | t                 |        |
| Employer Mailing Address/Principal Plac<br>Business | e of  |     | City          |          | State       |         | Zip Code (Plus 4) |        |
| 2571 Baglyos  |       |     | BEthlehem     |          | PA          |         | 18020             |        |
| Full Name of Contributor                            |       |     |               | МО       | DAY         | YEAR    |                   |        |
| Joseph Uliana                                       |       |     |               |          |             |         | Ц                 |        |
| Mailing 2571 Baglyos Circle Address                 |       |     |               | ] [      | 30          | 2017    | \$ 1,000          | 0.00   |
| <b>City</b> Bethlehem                               | State |     | Code (Plus 4) | 6        | 30          | 2017    |                   |        |
|   | PA    | 18  | 020           |          |             |         |                   |        |
| Employer Name JM Uliana & Associate                 | 2S    |     |               | Occupat  | i <b>on</b> | residen | t                 |        |
| Employer Mailing Address/Principal Plac<br>Business | e of  |     | City          |          | State       |         | Zip Code (Plus 4) |        |
| 2571 Baglyos  |       |     | BEthlehem     |          | PA          |         | 18020             |        |
|   |       |     |               |          |             |         |                   |        |

| Full Name of Contributor<br>Sean Boyle   |                 |                              | мо          | DAY               | YEAR             |                |          |
|--|-----------------|------------------------------|-------------|-------------------|------------------|----------------|----------|
| Mailing 1209 Housman   |                 |                              |             |                   |                  | ╽,             | F00 00   |
| Address  |                 |                              | 7           | 13                | 2017             | \$ 1           | ,500.00  |
| <b>City</b> Allentown  |                 | Zip Code (Plus 4)            |             | 13                | 2017             |                |          |
|  | PA              | 18104                        |             |                   |                  |                |          |
| Employer Name Boyle Construction   |                 |                              | Occupat     | tion              | )wner            |                |          |
| Employer Mailing Address/Principal Plac<br>Business  | e of            | City                         |             | State             |                  | Zip Code (Plus | 4)       |
| 1209 Housman   |                 | Alletown                     |             | PA                |                  | 18104          |          |
| Full Name of Contributor   |                 |                              |             |                   |                  |                |          |
| Roseanne Stofko  |                 |                              | МО          | DAY               | YEAR             |                |          |
| Mailing 4082 Freemansburg  |                 |                              |             |                   |                  | <b>-</b><br>\$ | 500.00   |
| City Easton  | State           | Zip Code (Plus 4)            | 7           | 31                | 2017             |                |          |
| Luston   | PA              | 18045                        |             |                   |                  |                |          |
|  |                 |                              | Occupat     | ion               |                  | 1              |          |
| Employer Name None   |                 |                              | Оссиран     | R                 | etired           |                |          |
| Employer Mailing Address/Principal Plac<br>Business  | e of            | City                         | •           | State             |                  | Zip Code (Plus | 4)       |
| None   |                 | None                         |             | PA                |                  | 18045          |          |
| Full Name of Contributor   |                 |                              |             | DAY               | YEAR             |                |          |
| Michael Tuskes   |                 |                              | МО          | DAI               | ILAK             |                |          |
| Mailing Address 3621 Westwood Dr   |                 |                              |             |                   |                  | <b>\$</b> 1    | ,250.00  |
| City Easton  | State           | Zip Code (Plus 4)            | 7           | 31                | 2017             |                |          |
|  | PA              | 18045                        |             |                   |                  |                |          |
| Employer Name Tuskes Homes   |                 |                              | Occupat     | ion               |                  | 1              |          |
|  |                 |                              |             | C                 | )wner            |                |          |
| Employer Mailing Address/Principal Plac<br>Rusiness  | e of            | City                         |             | State             | )wner            | Zip Code (Plus | 4)       |
| Employer Mailing Address/Principal Plac<br>Business<br>4511 Falmer   | e of            | <b>City</b><br>BEthelhem     |             |                   | owner            | Zip Code (Plus | 4)       |
| Business   | e of            |                              |             | State PA          |                  |                | 4)       |
| <b>Business</b> 4511 Falmer  | e of            |                              | мо          | State             | YEAR             |                | 4)       |
| Business 4511 Falmer  Full Name of Contributor   | e of            |                              | мо          | State PA  DAY     | YEAR             | \$ 1           | 4)       |
| Business 4511 Falmer  Full Name of Contributor Charles Tuskes  Mailing 4511 Falmer   |                 |                              |             | State PA          |                  | \$ 1           |          |
| Full Name of Contributor Charles Tuskes  Mailing Address  4511 Falmer  | State           | BEthelhem                    | мо          | State PA  DAY     | YEAR             | \$ 1           |          |
| Full Name of Contributor Charles Tuskes  Mailing Address  4511 Falmer  | State           | BEthelhem  Zip Code (Plus 4) | мо          | State PA  DAY     | YEAR             | \$ 1           |          |
| Business 4511 Falmer  Full Name of Contributor Charles Tuskes  Mailing Address  City Bethlehem  Employer Name Tuskes Homes  Employer Mailing Address/Principal Place | <b>State</b> PA | BEthelhem  Zip Code (Plus 4) | <b>MO</b> 7 | State PA  DAY     | <b>YEAR</b> 2017 | \$ 1           | .,250.00 |
| Full Name of Contributor Charles Tuskes  Mailing 4511 Falmer  City Bethlehem  Employer Name Tuskes Homes   | <b>State</b> PA | Zip Code (Plus 4) 18020      | <b>MO</b> 7 | State PA  DAY  31 | <b>YEAR</b> 2017 | \$ 1           | .,250.00 |

|                                    |                        |       |                 |                 |         |           |         |             | _0       |
|------------------------------------|------------------------|-------|-----------------|-----------------|---------|-----------|---------|-------------|----------|
| Full Name of Con<br>Gregory Dudkin | tributor               |       |                 |                 | МО      | DAY       | YEAR    |             |          |
| Mailing                            |                        |       |                 |                 |         |           |         | 4           |          |
| Address                            | 208 Spruce             |       |                 |                 |         |           |         | \$          | 500.00   |
| <b>City</b> Philadelp              | hia                    | State | Zij             | p Code (Plus 4) | 7       | 31        | 2017    |             |          |
|                                    |                        | PA    | 19              | 9106            |         |           |         |             |          |
| Employer Name                      | PPL                    |       |                 |                 | Occupat | ion<br>E  | xecutiv | e           |          |
| Employer Mailing<br>Business       | Address/Principal Plac | e of  |                 | City            |         | State     |         | Zip Code (I | Plus 4)  |
| Hamilton St                        |                        |       |                 | Allentown       |         | PA        |         | 18105       |          |
| Full Name of Con                   | tributor               |       |                 | •               |         |           |         |             |          |
| Ronald Check Jr                    |                        |       |                 |                 | МО      | DAY       | YEAR    |             |          |
| Mailing<br>Address                 | 7171 Airport Rd        |       |                 |                 |         |           |         | \$          | 2,500.00 |
| City Bath                          |                        | State | Zi <sub>l</sub> | p Code (Plus 4) | 9       | 28        | 2017    |             |          |
|                                    |                        | PA    | 18              | 8014            |         |           |         |             |          |
| Employer Name                      | Grace Industries       |       |                 |                 | Occupat | cion C    | )wner   | 1           |          |
| Employer Mailing<br>Business       | Address/Principal Plac | e of  |                 | City            |         | State     |         | Zip Code (I | Plus 4)  |
| 7171 Airport                       |                        |       |                 | Bath            |         | PA        |         | 18015       |          |
| Full Name of Con                   | tributor               |       |                 |                 | мо      | DAY       | YEAR    |             |          |
| Dennis Benner                      |                        |       |                 |                 | МО      | אלו       | ILAK    |             |          |
| Mailing<br>Address                 | 2005 Cityline Rd       |       |                 |                 |         |           |         | \$          | 2,500.00 |
| <b>City</b> Bethlehe               | m                      | State | Zij             | p Code (Plus 4) | 8       | 21        | 2017    |             |          |
|                                    |                        | PA    | 18              | 3017            |         |           |         |             |          |
| Employer Name                      | Self Employed          |       |                 |                 | Occupat | ion<br>L  | awyer   |             |          |
| Employer Mailing<br>Business       | Address/Principal Plac | e of  |                 | City            |         | State     |         | Zip Code (I | Plus 4)  |
| 2005 City Line ro                  | d                      |       |                 | Bethlehem       |         | PA        |         | 18017       |          |
| Full Name of Con                   | tributor               |       |                 |                 | мо      | DAY       | YEAR    |             |          |
| Louis Pektor                       |                        |       |                 |                 |         |           |         | Ц           |          |
| Mailing<br>Address                 | 559 Main St            |       |                 |                 |         | 24        | 2017    | \$          | 2,500.00 |
| <b>City</b> Bethlehe               | m                      | State |                 | p Code (Plus 4) | 8       | 24        | 2017    |             |          |
|                                    |                        | PA    | 18              | 3018            |         |           |         |             |          |
| Employer Name                      | Ashley Development     |       |                 |                 | Occupat | cion<br>S | elf Emp | loyed       |          |
| Employer Mailing<br>Business       | Address/Principal Plac | e of  |                 | City            |         | State     |         | Zip Code (I | Plus 4)  |
| 559 Main St                        |                        |       |                 | Bethlehem       |         | PA        |         | 18017       |          |
|                                    |                        |       |                 | 1               |         |           | ı       |             |          |

| Full Name of Contributor Daniel Hood                 |                    |        |                 | мо       | DAY         | YEAR    |                  |          |
|--|--------------------|--------|-----------------|----------|-------------|---------|------------------|----------|
| Mailing 4380 Eisenhower Dr                           |                    |        |                 |          |             |         | <u> </u><br>  \$ | 1,000.00 |
| City REthlehem                                       | State              | Zip    | Code (Plus 4)   | 8        | 21          | 2017    |                  |          |
| BEthlehem  | PA                 |        | 020             |          |             |         |                  |          |
| Employer Name Self                                   | ·                  |        |                 | Occupat  | ion S       | eLF EMI | PLOYED           |          |
| Employer Mailing Address/Principal Place<br>Business | e of               |        | City            |          | State       |         | Zip Code (       | Plus 4)  |
| 4380 Eisenhower                                      |                    |        | Bethlehem       |          | PA          |         | 18020            |          |
| Full Name of Contributor John McGeehan               |                    |        |                 | МО       | DAY         | YEAR    |                  |          |
| Mailing 375 13th Ave                                 |                    |        |                 |          | 2.1         | 2017    | \$               | 500.00   |
| <b>City</b> BEthlehem                                | <b>State</b><br>PA |        | O Code (Plus 4) | 8        | 31          | 2017    |                  |          |
| Employer Name None                                   |                    |        |                 | Occupat  | i <b>on</b> | etired  | .I.              |          |
| Employer Mailing Address/Principal Place<br>Business | e of               |        | City            |          | State       |         | Zip Code (       | Plus 4)  |
| None   |                    |        | None            |          | PA          |         | 18018            |          |
| Full Name of Contributor Abe Attiyeh                 |                    |        |                 | мо       | DAY         | YEAR    |                  |          |
| Mailing 1177 6th St                                  |                    |        |                 |          |             |         | <br> <br>  \$    | 1,000.00 |
|  | <b>State</b> PA    |        | OCode (Plus 4)  | 8        | 31          | 2017    |                  | ,        |
| Employer Name Whitehall Manor                        |                    |        |                 | Occupat  | i <b>on</b> | elf EMP | LOYED            |          |
| Employer Mailing Address/Principal Place<br>Business | e of               |        | City            |          | State       |         | Zip Code (       | Plus 4)  |
| 1177 6th St  |                    |        | Whitehall       |          | PA          |         | 18052            |          |
| Full Name of Contributor Larry Holmes                |                    |        |                 | мо       | DAY         | YEAR    |                  |          |
| Mailing 896 Sheridan Dr<br>Address                   |                    |        |                 |          |             |         | <b>\$</b>        | 500.00   |
| City Easton  | <b>State</b> PA    |        | O Code (Plus 4) | 8        | 25          | 2017    |                  |          |
| Employer Name Retired                                |                    |        |                 | Occupat  | ion<br>R    | etired  | <u> </u>         |          |
| Employer Mailing Address/Principal Place<br>Business | e of               | $\Box$ | City            | <u>I</u> | State       |         | Zip Code (       | Plus 4)  |
| NA   |                    |        | NA              |          | PA          |         | 18042            |          |

|                                 |                       |                     |       |                     |         |              |        |          | PAGE 2/    |
|---------------------------------|-----------------------|---------------------|-------|---------------------|---------|--------------|--------|----------|------------|
| Full Name of Contri             |                       |                     |       |                     | мо      | DAY          | YEAR   |          |            |
| Raymond LaHoud 6                | esq                   |                     |       |                     |         |              |        |          |            |
| Mailing<br>Address              | 711 Knollcroft St     |                     |       |                     |         |              |        | \$       | 2,500.00   |
| City Easton                     |                       | State               | Zi    | p Code (Plus 4)     | 8       | 24           | 2017   | 7        |            |
|                                 |                       | PA                  | 18    | 3045                |         |              |        |          |            |
| Employer Name N                 | lorris McLaughlin     |                     |       |                     | Occupat | ion<br>L     | awyer  | •        |            |
| Employer Mailing Ad<br>Business | ddress/Principal Plac | e of                |       | City                |         | State        |        | Zip Code | e (Plus 4) |
| Hamilton St                     |                       |                     |       | Allentown           |         | PA           |        | 18105    |            |
| Full Name of Contri             | butor                 |                     |       |                     | МО      | DAY          | YEAR   |          |            |
| NICK BROWN                      |                       |                     |       |                     | MO      | DAT          | ILAK   |          |            |
| Mailing 4<br>Address            | 3 FAIRWAY AVE         |                     |       |                     |         |              |        | \$       | 500.00     |
| City NORTHFIEL                  | _D                    | State               | Zi    | p Code (Plus 4)     | 8       | 22           | 2017   | 7        |            |
|                                 |                       | NJ                  | 08    | 3225                |         |              |        |          |            |
| Employer Name                   | IICK BROWN            |                     |       |                     | Occupat | c <b>ion</b> | ELF EM | 1PLOYED  |            |
| Employer Mailing Ad<br>Business | ddress/Principal Plac | e of                |       | City                | 1       | State        |        | Zip Code | e (Plus 4) |
| 43 FAIRWAY                      |                       |                     |       | NORTHFIELD          |         | NJ           |        | 18225    |            |
| Enter Grand Total               | l of Part C on Sche   | dule T. Detailed Si | ımr   | nary Page Section   | on 3    |              |        | P        | AGE TOTAL  |
| Liitei Gianu 10ta               | i di Part C dii Stile | uule 1, Detalleu St | 41111 | iiai y raye, sectio | JII J.  |              |        | ¢        | 20.050.00  |

\$ 38,950.00

## 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 Car | ndidate              |                | Report  | ing Perio | od  |      |    |           |
|---------------------------------|----------------------|----------------|---------|-----------|-----|------|----|-----------|
|                                 |                      |                | From:   |           |     | To:  |    |           |
|                                 |                      |                |         | D         | ATE |      | A  | MOUNT     |
| Full Name                       |                      |                |         | МО        | DAY | YEAR |    |           |
| Mailing Address                 |                      |                |         |           |     |      | \$ | 0.00      |
| City                            | State                | Zip Code (     | Plus 4) |           |     |      |    |           |
| Receipt Description             | ·                    | ·              |         |           |     |      |    |           |
| Enter Grand Total of Part E on  | Schedule T. Detailed | d Summary Page | Section | 4         |     |      | P  | AGE TOTAL |
|                                 | 2, <b>200</b> 0000   |                | 22300   |           |     |      | \$ | 0.00      |

#### **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  | Reporting Period |                            |            |
|--|------------------|----------------------------|------------|
| BOSCOLA, LISA FRIENDS OF   | From:            | <u>1/1/2017</u> <b>To:</b> | 10/23/2017 |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P  | PER CONTRIBUTOR  |                            |            |
| TOTAL for the Reporting Pe   | eriod (1)        | \$                         | 0.00       |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR   | T F)             |                            |            |
| TOTAL for the Reporting Pe   | eriod (2)        | \$                         | 0.00       |
| 3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)   |                  |                            |            |
| TOTAL for the Reporting Pe   | eriod (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, |                  | \$                         | 0.00       |

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

| Name of Filing Committee or Candida | ate                 |                       | Reporting | g Period     |       |     |            |
|-------------------------------------|---------------------|-----------------------|-----------|--------------|-------|-----|------------|
|                                     |                     |                       | From:     |              |       | To: |            |
|                                     |                     |                       |           | DATE         |       |     | AMOUNT     |
| Full Name of Contributor            |                     |                       | МО        | DAY          | YEAR  |     |            |
| Mailing Address                     |                     |                       | MO DAY    |              |       | \$  | 0.00       |
| City                                | State               | Zip Code (Plus 4)     |           |              |       |     |            |
| Description of Contribution:        |                     |                       |           |              |       |     |            |
| Enter Grand Total of Part F on So   | chedule II In-Vir   | nd Contributions Deta | iled Sum  | mary Pag     |       |     | DACE TOTAL |
| Section 2.                          | iledule 11, 111-Kii | id Contributions Deta | neu Sum   | illial y Pag | , je, |     | PAGE TOTAL |
|                                     |                     |                       |           |              |       | \$  | 0.00       |

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

| Name of Filing Committee or Candidat                          | e          |         |            |         | Re    | porting F | Period    |        |       |                        |
|---|------------|---------|------------|---------|-------|-----------|-----------|--------|-------|------------------------|
|   |            |         |            |         | Fro   | om:       |           | To:    |       |                        |
|   |            |         |            |         |       |           | DATE      |        |       | AMOUNT                 |
| Full Name of Contributor                                      |            |         |            |         |       | мо        | DAY       | YEAR   |       |                        |
| Mailing Address   |            |         |            |         |       |           |           |        | \$    | 0.00                   |
| City  | State      |         | Zip Code(F | Plus 4) |       |           |           |        |       |                        |
| Employer of Contributor                                       | -1         |         | •          |         |       | Occupa    | tion      |        |       |                        |
| Employer Mailing Address/Principal Pl<br>Business             | ace of     | City    |            | State   |       | Zip<br>4) | Code(Plus | Descri | ption | of Contribution        |
| Enter Grand Total of Part G on So<br>Summary Page, Section 3. | hedule II, | In-Kind | Contributi | ons De  | taile | ed        |           |        |       | <b>PAGE TOTAL</b> 0.00 |

## SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Ca                  | andidate           |                                   | Reporti                    | ng Period             |           |          |            |
|---|--------------------|-----------------------------------|----------------------------|-----------------------|-----------|----------|------------|
| BOSCOLA, LISA FRIENDS OF                        |                    |                                   | From                       | 1/                    | 1/2017    | То:      | 10/23/2017 |
|   |                    |                                   |                            | DATE                  |           |          | AMOUNT     |
| <b>To Whom Paid</b><br>McNeill for PA           |                    |                                   | МО                         | DAY                   | YEAR      |          |            |
| Mailing Address 3163 Front                      | Str                |                                   | 10                         | 20                    | 2017      | \$       | 250.00     |
| <b>City</b> Whitehall                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18052 | <b>Descrip</b><br>Donation | otion of Exp          | penditure |          |            |
| <b>To Whom Paid</b><br>Friends of Tara Zarinski |                    |                                   | мо                         | DAY                   | YEAR      |          |            |
| Mailing Address 1510 Ciara                      | Drive              |                                   | 10                         | 20                    | 2017      | \$       | 100.00     |
| <b>City</b> BEthlehem                           | State<br>PA        | <b>Zip Code (Plus 4)</b><br>18017 | <b>Descrip</b> Donation    | otion of Exp          | penditure |          |            |
| <b>To Whom Paid</b> Citizens for McClure        |                    |                                   | мо                         | DAY                   | YEAR      |          |            |
| Mailing Address 4110 Scher                      | man Blvd           |                                   | 10                         | 20                    | 2017      | \$<br>\$ | 500.00     |
| <b>City</b> BEthlehem                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18020 | <b>Descrip</b> Donation    | otion of Exp          | enditure  |          |            |
| <b>To Whom Paid</b> Keystone State Distributing | ·                  | ·                                 | мо                         | DAY                   | YEAR      |          |            |
| Mailing Address PO Box 149                      | 7                  |                                   | 10                         | 17                    | 2017      | \$       | 1,140.00   |
| <b>City</b> BEthlehem                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18016 | <b>Descrip</b><br>Parade   | otion of Exp<br>Candy | enditure  |          |            |
| <b>To Whom Paid</b> Keystone State Distributing |                    |                                   | мо                         | DAY                   | YEAR      |          |            |
| Mailing Address                                 |                    |                                   |                            |                       |           | 1        |            |
| Mailing Address PO Box 149                      | 7                  |                                   | 10                         | 4                     | 2017      | \$       | 798.00     |

18016

PARADE CANDY

PA

|   |                    |                                   |    |                          |           | PA | GE 33     |
|---|--------------------|-----------------------------------|----|--------------------------|-----------|----|-----------|
| <b>To Whom Paid</b> Keystone State Distributing |                    |                                   | МО | DAY                      | YEAR      |    |           |
| Mailing Address PO Box 1497                     |                    |                                   | 10 | 17                       | 2017      | \$ | 1,026.00  |
| <b>City</b> BEthlehem                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18016 |    | otion of Exp<br>E CANDY  | penditure |    |           |
| <b>To Whom Paid</b> Keystone State Distributing |                    |                                   | МО | DAY                      | YEAR      |    |           |
| Mailing Address PO Box 1497                     |                    |                                   | 10 | 20                       | 2017      | \$ | 291.00    |
| <b>City</b> BEthlehem                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 18016    |    | otion of Exp<br>E CANDY  | penditure |    |           |
| <b>To Whom Paid</b><br>Advantage PEP            |                    |                                   | мо | DAY                      | YEAR      |    |           |
| Mailing Address 2285 Schoeners                  | ville Rd           |                                   | 6  | 15                       | 2017      | \$ | 2,224.00  |
| <b>City</b> Bethlehem                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18017 |    | otion of Exp             |           |    | bursement |
| <b>To Whom Paid</b><br>Advantage PEP            |                    |                                   | МО | DAY                      | YEAR      |    |           |
| Mailing Address 2285 Schoeners                  | ville Rd           |                                   | 4  | 27                       | 2017      | \$ | 1,141.22  |
| <b>City</b> Bethlehem                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18017 |    | otion of Exp<br>Expenses | penditure |    |           |
| <b>To Whom Paid</b><br>Advantage PEP            |                    |                                   | МО | DAY                      | YEAR      |    |           |
| Mailing Address 2285 Schoeners                  | ville Rd           |                                   | 3  | 1                        | 2017      | \$ | 1,000.00  |
| <b>City</b> Bethlehem                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 18017    | 1  | otion of Exp             |           |    | LTING     |
| <b>To Whom Paid</b><br>Advantage PEP            |                    |                                   | мо | DAY                      | YEAR      |    |           |
|   | 5.1                |                                   | 7  | 13                       | 2017      | \$ | 1 446 50  |
| Mailing Address 2285 Schoeners                  | ville Rd           |                                   |    |                          |           |    | 1,446.50  |

|   |                    |                                   |                                   |                                |                             | P/        |          |
|---|--------------------|-----------------------------------|-----------------------------------|--------------------------------|-----------------------------|-----------|----------|
| <b>To Whom Paid</b><br>Advantage PEP  |                    |                                   | МО                                | DAY                            | YEAR                        |           |          |
| Mailing Address 2285 Schoener   | rsville Rd         |                                   | 2                                 | 7                              | 2017                        | \$        | 2,000.00 |
| <b>City</b> Bethlehem   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18017 | 1                                 | otion of Exp<br>eb 2017 F      |                             |           |          |
| <b>To Whom Paid</b><br>Advantage PEP  |                    |                                   | МО                                | DAY                            | YEAR                        |           |          |
| Mailing Address 2285 Schoener   | rsville Rd         |                                   | 9                                 | 20                             | 2017                        | \$        | 2,000.00 |
| <b>City</b> Bethlehem   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18017 | 1                                 | otion of Exp                   |                             |           |          |
| <b>To Whom Paid</b> Patti's Petals  |                    |                                   | МО                                | DAY                            | YEAR                        |           |          |
| Mailing Address 215 E 3rd St  |                    |                                   | 5                                 | 8                              | 2017                        | \$        | 86.92    |
| <b>City</b> BEthlehem   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18015 | <b>Descrip</b><br>Flowers         | otion of Exp                   | enditure                    |           |          |
| <b>To Whom Paid</b> Patti's Petals  |                    |                                   | МО                                | DAY                            | YEAR                        |           |          |
|   |                    |                                   |                                   |                                |                             |           |          |
| Mailing Address 215 E 3rd St  |                    |                                   | 9                                 | 11                             | 2017                        | \$        | 92.75    |
| Mailing Address 215 E 3rd St  City BEthlehem  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 18015    |                                   | otion of Exp                   |                             | <b>\$</b> | 92.75    |
| 213 E 314 31  |                    |                                   | Descrip                           | otion of Exp                   |                             | \$        | 92.75    |
| City BEthlehem  To Whom Paid  |                    |                                   | <b>Descrip</b><br>FLOWE           | otion of Exp                   | penditure                   | \$        | 92.75    |
| City BEthlehem  To Whom Paid Patti's Petals   |                    |                                   | Descrip<br>FLOWE  MO  10  Descrip | RS  DAY                        | YEAR 2017 Denditure         | \$        |          |
| City BEthlehem  To Whom Paid Patti's Petals  Mailing Address 215 E 3rd St                               | PA State           | 18015  Zip Code (Plus 4)          | Descrip<br>FLOWE  MO  10  Descrip | DAY  3  otion of Exp           | YEAR 2017 Denditure         | \$        |          |
| City BEthlehem  To Whom Paid Patti's Petals  Mailing Address 215 E 3rd St  City BEthlehem  To Whom Paid | PA State           | 18015  Zip Code (Plus 4)          | MO  10  Descrip MCNEIL            | DAY  3  btion of Exp  L FUNERA | YEAR 2017 Denditure L FLOWE | \$        |          |

| To Whom Paid  |                       |                    |                                |                               |                               |                       |     |                |
|---|-----------------------|--------------------|--------------------------------|-------------------------------|-------------------------------|-----------------------|-----|----------------|
| Hilton  |                       |                    |                                | мо                            | DAY                           | YEAR                  |     |                |
| Mailing Address   | 1 2nd St              |                    |                                | 4                             | 27                            | 2017                  | \$  | 1,000.00       |
| <b>City</b> harrisburg                                    | ]                     | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 17101 |                               | tion of Exp                   |                       |     |                |
| To Whom Paid<br>Easton UNICO                              |                       |                    |                                | мо                            | DAY                           | YEAR                  |     |                |
| Mailing Address   | 2120 EUGNE ST         |                    |                                | 4                             | 17                            | 2017                  | \$  | 50.00          |
| City EASTON   |                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 18045 | <b>Descrip</b><br>DUES        | tion of Exp                   | enditure              |     |                |
| To Whom Paid<br>LIBERTY HIGH SC                           | CHOOL FOOTBALL        |                    |                                | мо                            | DAY                           | YEAR                  |     |                |
| Mailing Address   | 3913 HOLLO RD         |                    |                                | 3                             | 21                            | 2017                  | \$  | 100.00         |
| City EASTON   |                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 18045 | <b>Descrip</b><br>PROGR       | otion of Exp                  | enditure              |     |                |
| To Whom Paid<br>TEH FLOWER CAR                            | RT                    |                    |                                | мо                            | DAY                           | YEAR                  |     |                |
|   |                       |                    |                                |                               |                               |                       |     |                |
| Mailing Address   | 377 NULTON AVE        |                    |                                | 3                             | 15                            | 2017                  | \$  | 83.74          |
| Mailing Address  City BETHLEHE                            |                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 18018 | Descrip                       | 15  tion of Exp               | enditure              |     | 83.74          |
| O'les   | ΕM                    |                    |                                | Descrip                       | tion of Exp                   | enditure              |     | 83.74          |
| City BETHLEHE   | ΕM                    |                    |                                | <b>Descrip</b><br>SYMPA       | THY FLOW                      | penditure<br>ERS DELC |     | 83.74<br>78.44 |
| City BETHLEHE  To Whom Paid TEH FLOWER CAR                | RT  377 NULTON AVE    |                    |                                | Descrip SYMPA  MO  6  Descrip | THY FLOW                      | year 2017             | DNG |                |
| To Whom Paid TEH FLOWER CAR Mailing Address               | RT  377 NULTON AVE EM | PA State           | 18018  Zip Code (Plus 4)       | Descrip SYMPA  MO  6  Descrip | DAY  30                       | year 2017             | DNG |                |
| To Whom Paid TEH FLOWER CAR Mailing Address City BETHLEHE | RT  377 NULTON AVE EM | PA State           | 18018  Zip Code (Plus 4)       | MO  6  Descrip Funeral        | DAY  30  Stion of Exp Flowers | year 2017 penditure   | DNG |                |

| To Whom Paid HONORARY FIRST DEFENDERS  Mailing Address 216 N 39TH ST  City ALLENTOWN  State PA IS104  PA Description of Expenditure SPONSOR  To Whom Paid UPPER MILFORD JOINT ENVIR COMMITTEE  Mailing Address 5671 CEHSTNUT ST  City OLD ZIONSVILLE  State PA IS1068  Zip Code (Plus 4) Description of Expenditure SPONSOR  Description of Expenditure SPONSOR  To Whom Paid PA IS1068  To Whom Paid PA IS1068 | 183.00 |          | 2017<br>penditure   | 24 otion of Exp                   | 3                              |                          |             | DEFENDERS         | o Whom Paid   |
|---|--------|----------|---------------------|-----------------------------------|--------------------------------|--------------------------|-------------|-------------------|---|
| City ALLENTOWN  State PA  18104  Description of Expenditure SPONSOR  To Whom Paid UPPER MILFORD JOINT ENVIR COMMITTEE  Mo DAY  YEAR  City OLD ZIONSVILLE  State PA  18068  Zip Code (Plus 4) 18068  Description of Expenditure SPONSOR  4 2017  \$  Description of Expenditure SPONSOR  To Whom Paid  Description of Expenditure SPONSORSHIP FOR SHREDDER   |        |          | penditure           | tion of Exp                       |                                |                          |             |                   | ONORARY FIRST   |
| To Whom Paid UPPER MILFORD JOINT ENVIR COMMITTEE  Mailing Address 5671 CEHSTNUT ST  City OLD ZIONSVILLE  State PA  18104  SPONSOR  MO  DAY  YEAR  4 4 2017  \$  City OLD ZIONSVILLE  PA  Description of Expenditure SPONSORSHIP FOR SHREDDER  To Whom Paid  MO  DAY  YEAR  VEAR  VEAR  AND  DAY  YEAR  VEAR  VEAR  Description of Expenditure SPONSORSHIP FOR SHREDDER  | 183.00 | <b>*</b> |                     |                                   | Descrip                        |                          |             | 216 N 39TH ST     | lailing Address   |
| UPPER MILFORD JOINT ENVIR COMMITTEE  Mo DAY YEAR  Mailing Address 5671 CEHSTNUT ST  4 4 2017 \$  City OLD ZIONSVILLE  PA Zip Code (Plus 4) Description of Expenditure SPONSORSHIP FOR SHREDDER  To Whom Paid  MO DAY YEAR   | 183.00 | \$       | YEAR                |                                   |                                |                          |             | VN                | i <b>ity</b> Allentow   |
| City OLD ZIONSVILLE  State PA  18068    Description of Expenditure SPONSORSHIP FOR SHREDDER  To Whom Paid  MO DAY YEAR  | 183.00 | \$       | $\overline{}$       | DAY                               | МО                             |                          | ree         | OINT ENVIR COMMIT |   |
| To Whom Paid  PA  18068  PA  18068  SPONSORSHIP FOR SHREDDER  MO  DAY  YEAR   |        |          | 2017                | 4                                 | 4                              |                          |             | 5671 CEHSTNUT ST  | lailing Address   |
| MO   DAY   YEAR   |        | DER      |                     |                                   |                                |                          |             | SVILLE            | ity OLD ZIONS   |
| EVSFORTS HALL OF FAMIL  |        |          | YEAR                | DAY                               | МО                             |                          |             | DF FAME           | o Whom Paid<br>VSPORTS HALL O   |
| Mailing Address 1922 HIGHLAND ST  3 21 2017 \$  | 50.00  | \$       | 2017                | 21                                | 3                              |                          |             | 1922 HIGHLAND ST  | lailing Address   |
| City ALLENTOWN State Zip Code (Plus 4) Description of Expenditure AD  |        |          | enditure            | otion of Exp                      |                                |                          |             | VN                | i <b>ity</b> ALLENTOW   |
| To Whom Paid STAPLES MO DAY YEAR  |        |          | YEAR                | DAY                               | МО                             |                          |             |                   |   |
| Mailing Address CATasauqua 6 6 2017 \$  | 90.00  | \$       | 2017                | 6                                 | 6                              |                          |             |                   |   |
|   |        |          |                     |                                   | 6                              |                          |             | CATasauqua        | lailing Address   |
| City bethlehe  State PA  Zip Code (Plus 4) Description of Expenditure Senior Fair Supplies  |        |          |                     |                                   | Descrip                        |                          |             | CATasauqua        |   |
| Description of Expenditure  |        |          | ies                 | Fair Suppli                       | <b>Descrip</b><br>Senior       |                          |             | CATasauqua        | ity bethlehe<br>o Whom Paid   |
| To Whom Paid  PA  18017  Senior Fair Supplies  MO  DAY  YEAR  | 100.00 | <br>\$   | YEAR                | DAY                               | Descrip<br>Senior              |                          |             |                   | bethlehe  o Whom Paid ethlehem YWCA   |
| To Whom Paid Bethlehem YWCA  MO DAY  YEAR  Mailing Address  | 100.00 | \$       | YEAR 2017           | DAY  17  ption of Exp             | Descrip Senior  MO  3  Descrip | 18017  Zip Code (Plus 4) | PA<br>State | 3895 Adler Place  | o Whom Paid<br>ethlehem YWCA  |
| To Whom Paid Bethlehem YWCA  Mailing Address 3895 Adler Place  State  PA 18017  Senior Fair Supplies  MO DAY YEAR  17 2017 \$  City Bethlehem  State  Zip Code (Plus 4)  Description of Expenditure   | 100.00 | \$       | YEAR 2017 penditure | DAY  17  ption of Exp             | MO  3  Descrip Awards          | 18017  Zip Code (Plus 4) | PA<br>State | 3895 Adler Place  | o Whom Paid ethlehem YWCA lailing Address ity Bethlehem                           |
| To Whom Paid Bethlehem YWCA  Mailing Address 3895 Adler Place  State PA 2ip Code (Plus 4) 18015  To Whom Paid   | 50.00  |          | YEAR 2017 Denditure | DAY  17  ption of Exp Dinner  DAY | MO  3  Descrip Awards          | 18017  Zip Code (Plus 4) | PA<br>State | 3895 Adler Place  | o Whom Paid ethlehem YWCA lailing Address ity Bethlehem o Whom Paid ethlehem YWCA |

|   |                    |                                   |                               |  |                                    | P/        |                 |  |
|---|--------------------|-----------------------------------|-------------------------------|--|------------------------------------|-----------|-----------------|--|
| <b>To Whom Paid</b><br>Bethlehem YWCA   | мо                 | DAY                               | YEAR                          |  |                                    |           |                 |  |
| Mailing Address 3895 Adler  | 8                  | 8                                 | 2017                          | \$   | 90.00                              |           |                 |  |
| City Bethlehem State Zip Code (Plus 4) PA 18015   |                    |                                   |                               | Description of Expenditure  Luncheon           |                                    |           |                 |  |
|   | Lunche             | 011                               |                               |  |                                    |           |                 |  |
| To Whom Paid Notre Dame School  |                    |                                   |                               | DAY  | YEAR                               |           |                 |  |
| Mailing Address Wm Penn Hwy   |                    |                                   | 3                             | 24   | 2017                               | \$        | 100.00          |  |
| City Easton   | State              | Zip Code (Plus 4)                 | Description of Expenditure    |  |                                    |           |                 |  |
|   | PA                 | 18045                             | Ave maria Dinner              |  |                                    |           |                 |  |
| <b>To Whom Paid</b> Notre Dame School   |                    |                                   | МО                            | DAY  | YEAR                               |           |                 |  |
| Mailing Address Wm Penn H   | Hwy                |                                   | 2 7 2017 \$ 2                 |  |                                    |           |                 |  |
| City Easton   | State              | Zip Code (Plus 4)                 | Description of Expenditure    |  |                                    |           |                 |  |
|   | 18045              | MINITHON SPONSOR                  |                               |  |                                    |           |                 |  |
| <b>To Whom Paid</b><br>VErizon  |                    |                                   | мо                            | DAY  | YEAR                               |           |                 |  |
| Mailing Address NA  |                    |                                   |                               |  |                                    | _         |                 |  |
| Mailing Address NA  |                    |                                   | 6                             | 30   | 2017                               | \$        | 95.00           |  |
| Mailing Address NA  City NA   | State              | Zip Code (Plus 4)                 | <u> </u>                      | 30<br>otion of Exp                             |                                    | <b>\$</b> | 95.00           |  |
| IVA   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18045 | <u> </u>                      | otion of Exp                                   |                                    | <b>\$</b> | 95.00           |  |
| IVA   |                    |                                   | Descrip                       | otion of Exp                                   |                                    | \$        | 95.00           |  |
| City NA  To Whom Paid   | PA                 |                                   | <b>Descrip</b><br>Cell Fee    | otion of Expes                                 | penditure                          | \$        | 95.00<br>150.00 |  |
| City NA  To Whom Paid ArtsQuest   | PA                 |                                   | Descrip<br>Cell Fee           | DAY  | YEAR 2017                          |           |                 |  |
| City NA  To Whom Paid ArtsQuest  Mailing Address 101 FOUND  | PA DERS WAY        | 18045                             | Descrip Cell Fee MO 6 Descrip | DAY  | YEAR 2017 Denditure                |           |                 |  |
| City NA  To Whom Paid ArtsQuest  Mailing Address 101 FOUND  | DERS WAY           | 18045  Zip Code (Plus 4)          | Descrip Cell Fee MO 6 Descrip | DAY  8  ation of Exp                           | YEAR 2017 Denditure                |           |                 |  |
| City NA  To Whom Paid ArtsQuest  Mailing Address 101 FOUND  City BETHLEHEM  To Whom Paid DAVINCI SCIENCE CENTER | DERS WAY           | 18045  Zip Code (Plus 4)          | MO  6  Descrip SILVER         | DAY  8  btion of Exp  8  ction of Exp  MEMBERS | YEAR 2017 Denditure SHIP           |           |                 |  |
| City NA  To Whom Paid ArtsQuest  Mailing Address 101 FOUND  City BETHLEHEM  To Whom Paid DAVINCI SCIENCE CENTER | DERS WAY  State PA | 18045  Zip Code (Plus 4)          | MO 6 Descrip SILVER           | DAY  8 btion of Exp MEMBERS                    | YEAR 2017 Denditure SHIP YEAR 2017 | \$        | 150.00          |  |

|  |   |                                       |   |                                    |   |        | PAGE 38         |  |  |  |
|--|---|---------------------------------------|---|------------------------------------|---|--------|-----------------|--|--|--|
| <b>To Whom Paid</b> MILLER KEYSTONE BLOOD CENTER   | МО  | DAY                                   | YEAR                                      |                                    |   |        |                 |  |  |  |
| Mailing Address 1464 VALLEY CENT   | 2   | 15                                    | 2017                                      | \$                                 | 175.00  |        |                 |  |  |  |
| City BETHLEHEM   | HLEHEM State Zip Code (Plus 4) PA 18017         |                                       |   |                                    | Description of Expenditure FUNDRAISER SPONSOR |        |                 |  |  |  |
| To Whom Paid LV LABOR COUNCIL  |   |                                       |   | DAY                                | YEAR  |        |                 |  |  |  |
| Mailing Address PO BOX 20226   |   |                                       |   | 16                                 | 2017  | \$     | 100.00          |  |  |  |
| City LEHIGH VALLEY   | IGH VALLEY  State  PA  Zip Code (Plus 4)  18002 |                                       |   |                                    | Description of Expenditure  LABOR DINNER      |        |                 |  |  |  |
| To Whom Paid<br>NCYFDF   |   |                                       | МО  | DAY                                | YEAR  |        |                 |  |  |  |
| Mailing Address PO BOX 462   |   |                                       | 1   | 23                                 | \$  | 100.00 |                 |  |  |  |
| City STOCKERTOWN   | State<br>PA                                     | <b>Zip Code (Plus 4)</b> 18083        | Description of Expenditure FUNDRAISER AD  |                                    |   |        |                 |  |  |  |
| To Whom Paid Freedom High School Football Program  |   |                                       |   |                                    |   |        |                 |  |  |  |
|  | า   |                                       | МО  | DAY                                | YEAR  |        |                 |  |  |  |
|  | 1   |                                       | <b>мо</b>                                 | 20                                 | <b>YEAR</b> 2017                              | \$     | 125.00          |  |  |  |
| Freedom High School Football Program   | State PA  | <b>Zip Code (Plus 4)</b> 18020        | 9   | 20<br>otion of Exp                 | 2017  | \$     | 125.00          |  |  |  |
| Freedom High School Football Program  Mailing Address Chester Ave  | State   |                                       | 9<br>Descrip                              | 20<br>otion of Exp                 | 2017  | \$     | 125.00          |  |  |  |
| Freedom High School Football Program  Mailing Address Chester Ave  City Bethlehem  To Whom Paid Jack Frost Parade  | State   | 18020                                 | 9  Descrip Boostel                        | 20<br>otion of Exp<br>r Ad         | 2017<br>penditure                             | \$     | 125.00<br>25.00 |  |  |  |
| Freedom High School Football Program  Mailing Address Chester Ave  City Bethlehem  To Whom Paid Jack Frost Parade  | State<br>PA                                     | 18020                                 | 9  Descrip Boostel  MO                    | 20 DAY  DAY  2 Otion of Exp        | 2017 penditure  YEAR  2017                    |        |                 |  |  |  |
| Freedom High School Football Program  Mailing Address Chester Ave  City Bethlehem  To Whom Paid Jack Frost Parade  Mailing Address Unknown mailing a                   | State PA address. checked interest              | 18020  net as well  Zip Code (Plus 4) | 9  Descrip Booster  MO  10  Descrip       | 20 DAY  DAY  2 Otion of Exp        | 2017 penditure  YEAR  2017                    |        |                 |  |  |  |
| Freedom High School Football Program  Mailing Address Chester Ave  City Bethlehem  To Whom Paid Jack Frost Parade  Mailing Address Unknown mailing a  City Northampton | State PA address. checked interest              | 18020  net as well  Zip Code (Plus 4) | 9  Description Mo  10  Description Parade | 20 DAY  DAY  2 Dition of Exp Entry | 2017  Penditure  YEAR  2017  Penditure        |        |                 |  |  |  |

|   |                   |       |                   |                                  |  |          | PAGE          | 39     |  |  |
|---|-------------------|-------|-------------------|----------------------------------|--|----------|---------------|--------|--|--|
| To Whom Paid  JC Bloom Design           |                   |       |                   |                                  | DAY  | YEAR     |               |        |  |  |
| Mailing Address 418 Rosetto Ave         |                   |       |                   |                                  | 2  | 2017     | \$            | 177.55 |  |  |
| City Rosetto                            |                   | State | Zip Code (Plus 4) | Descrin                          | tion of Exr                                | enditure |               |        |  |  |
| Rosetto                                 | PA 18013          |       |                   |                                  | Description of Expenditure Funeral Flowers |          |               |        |  |  |
| To Whom Paid Portugese American Club    |                   |       |                   | МО                               | DAY  | YEAR     |               |        |  |  |
| Mailing Address 337 Brodhead Ave        |                   |       | 6                 | 23                               | 2017                                       | \$       | 360.00        |        |  |  |
| <b>City</b> BEthlehe                    | <br>m             | State | Zip Code (Plus 4) | Description of Expenditure       |  |          |               |        |  |  |
| Betmene                                 |                   | PA    | 18015             | Golf Outing Sponsorship          |  |          |               |        |  |  |
| <b>To Whom Paid</b><br>Glendon Borough  | 1                 |       |                   | МО                               | DAY  | YEAR     |               |        |  |  |
| Mailing Address                         | 24 Franklin St    |       |                   | 8 25 2017 <b>\$</b>              |  |          |               |        |  |  |
| <b>City</b> Glendon                     |                   | State | Zip Code (Plus 4) | Description of Expenditure       |  |          |               |        |  |  |
| PA 18042                                |                   |       |                   | Ad 150th Anniversary Celebration |  |          |               |        |  |  |
| <b>To Whom Paid</b><br>EADC             |                   |       |                   | МО                               | DAY  | YEAR     |               |        |  |  |
| Mailing Address                         | S Larry Holmes Dr |       |                   | 9                                | 11   | 2017     | \$            | 150.00 |  |  |
| City Easton                             |                   | State | Zip Code (Plus 4) | Descrip                          | tion of Exp                                | enditure |               |        |  |  |
|   |                   | PA    | 18042             | Sponsorship                      |  |          |               |        |  |  |
| <b>To Whom Paid</b><br>Meghan Lago      |                   |       |                   | МО                               | DAY  | YEAR     |               |        |  |  |
| Mailing Address 1864 Ferry St           |                   |       | 8                 | 22                               | 2017                                       | \$       | 239.25        |        |  |  |
| City Easton                             |                   | State | Zip Code (Plus 4) | Descrip                          | tion of Exp                                | enditure |               |        |  |  |
|   |                   | PA    | 18042             |                                  |  |          | ed for Golf O | uting  |  |  |
| <b>To Whom Paid</b><br>Personalized Boo | oks for Children  |       |                   | МО                               | DAY  | YEAR     |               |        |  |  |
| Mailing Address                         | 2334 South Church | St    |                   | 8                                | 22   | 2017     | \$            | 568.00 |  |  |
| <b>City</b> Allentown                   | า                 | State | Zip Code (Plus 4) | Description of Expenditure       |  |          |               |        |  |  |
| PA 18103                                |                   |       |                   | Books Sponsorship                |  |          |               |        |  |  |

| To Whom Paid Friends of Ron Heckman         |   |                                   |                                      | DAY                                 | YEAR                                 |    |            |  |  |
|---|---|-----------------------------------|--------------------------------------|-------------------------------------|--------------------------------------|----|------------|--|--|
| Mailing Address 2104 Hu                     | 8   | 8                                 | 2017                                 | \$                                  | 100.00                               |    |            |  |  |
| CityBethlehemStateZip Code (Plus 4)PA18017  |   |                                   |                                      | Description of Expenditure Donation |                                      |    |            |  |  |
| <b>To Whom Paid</b><br>Lori for Northampton |   |                                   | МО                                   | DAY                                 | YEAR                                 |    |            |  |  |
| Mailing Address PO Box 3                    | 358   |                                   | 10                                   | 20                                  | 2017                                 | \$ | 100.00     |  |  |
| <b>City</b> Hellertown                      | Hellertown State Zip Code (Plus 4) PA 18015 |                                   |                                      |                                     | Description of Expenditure  Donation |    |            |  |  |
| To Whom Paid<br>SDCC                        |   |                                   | МО                                   | DAY                                 | YEAR                                 |    |            |  |  |
| Mailing Address PO box 59358                |   |                                   | 6                                    | 6                                   | 2017                                 | \$ | 5,000.00   |  |  |
| <b>City</b> Phila                           | <b>State</b><br>PA                          | <b>Zip Code (Plus 4)</b><br>19102 | Description of Expenditure  Donation |                                     |                                      |    |            |  |  |
| Enter Grand Total of Exp                    | anditures on Page 1. Po                     | nort Cover Page Item D            | •                                    |                                     |                                      |    | PAGE TOTAL |  |  |
| Enter Grand Total of Expe                   | enditures on Page 1, Re                     | port cover rage, Item D           | •                                    |                                     |                                      | \$ | 24,633.96  |  |  |