LOBBYIST

COMMITTEE 🗸

Campaign Finance Report

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

Report

CANDIDATE

| Filer Identificati Number : | on 2018 | 0259 | | | Repo | | | CAN | IDI | DATE | | COM | 4ITTEE | ✓ | LOB | BYIST | | |
|--------------------------------|---|-----------|--|------------|--------|-----|-------|-----------|-----|-------|--------|------------|----------------------|----------------|---------|-----------|----------|----------|
| Name of Filing C | ommittee, Candida | ate or Lo | obbyist: | | DONA | λHE | R, D | EAN F | RIE | NDS (|)F | | | | | | | |
| Street Address: | 710 WEDGEW | OOD RI |) | | | | | | | | | | | | | | | |
| City: | BETHLEHEM | | | | | | | State | : | PA | | | Zip Cod | ie: 18 | 017 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDA PRIMARY | Y PRE- | 2. | | 30 DA | | Р | POST- | 3. | | AMENDMENT REPORT? | | Yes | No | • | / |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDA ELECTION | Y PRE- | - 5. | | 30 DA | | Р | POST- | 6. | | TERMINA REPORT | | Yes | No | • | / |
| report type) | ANNUAL REPORT | 7. | 7. Year 2018 FILING METHO () CHECK ON | | | | | | | | PAPER | | √ | DISKE | TTE | | | |
| Name of Office S | - ought by Candidat | te: | | | | | | DATE | ΕO | F ELE | CTIC | N | District Number | Office Code | Pa | ty Code | Coun | ty |
| | | | | | | | | МО | | DAY | YI | EAR | | | DE | М | | |
| | | | | | | | | | 11 | | 6 | 2018 | | (SEE INS | TRUCTI | ONS FOR | CODES) | |
| Summary of | • | МО | DAY | YEAR | | | | МО | | DAY | Y | EAR | FO | R OFFIC | E USE | ONLY | | |
| Expenditures | from: | | 1 1 | 20 |)18 | T | 0 | | 4 | | 30 | 2018 | | | | | | |
| A. Amount Bro | ught Forward Fron | 1 Last R | eport | | | | \$ | | | | | 0.00 | | | | | | |
| B. Total Moneta | ary Contributions A | And Rec | eipts (From | Sched | dule 1 | [) | \$ | | | | 12, | 800.00 | | | | | | |
| C. Total Funds | Available (Sum Of | Lines A | and B) | | | | \$ | | | | 12, | 800.00 | | | | | | |
| D. Total Expend | ditures (From Sche | edule II | I) | | | | \$ | | | | 5,5 | 555.56 | | | | | | |
| E. Ending Cash | Balance (Subtract | Line D | From Line | C) | | | \$ | | | | 7,2 | 244.44 | | | | | | |
| F. Value Of In- | Kind Contributions | Receive | ed (From S | chedul | e II) | | \$ | | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Obligations | (From S | Schedule IV | ') | | | \$ | | | | - 2 | 200.00 | | , | | | | |
| | | | | AFF: | IDA۱ | VI٦ | ſ SE | CTIO | N | | | | | | | | | |
| | a Committee report, incl | - | _ | | | | | | | - | | _ | | f my knov | vledge | and beli | ef , tru | ie. |
| correct and comple | | _ | | | | - | | - | | | | | | | | | | _ |
| Sworn to and subs | cribed before me this day of — | | 20 | | | | | | | | 5 | Signature | of Perso | n Submitt | ing Re | oort | | |
| | Signatu | re | | | | | - | | | | | | Prin | ted Name | | | | |
| My Commission Ex | · — | | | | | | - | | | | 6- | | Ema | | | | | _ |
| | МО | D/ | | YR | ••• | _ | | | | | ea Coo | ie | Daytim | e Teleph | one Nu | mber | | Ⅎ |
| | a report of a cand that to the best of m | | | | | | | | | _ | | v provis | ions of th | a act of lu | ıne 3 1 | 937 (D I | 1222 | |
| No 320) as amende | | , kilouik | age and ben | Ci (iii) | pontic | | | ittee iit | us | | teu ui | ., p. 01.5 | | | 5,1 | 337 (I IL | . 1555 | <u> </u> |
| Sworn to and subsc | day of | | 20 | | | | | | | | | s | ignature o | of Candida | ite | | | |
| | | | | | | | • | | | | | | Printe | d Name | | | | - |
| My Commission Exp | Signature ires | | | | | | • | | • | | | | Ema | il | | | | - |
| | МО | D | AY | YR | | | | | | Area | Code | | Da | aytime Te | elepho | ne Numb | er | - |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| , - | | | | |
|--|-----------|----------|--------------|-----------|
| Name of Filing Committee or Candidate | Reporting | g Period | | |
| DONAHER, DEAN FRIENDS OF | From: | 1/1/201 | <u>8</u> To: | 4/30/2018 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reporting |) Period | (1) | \$ | 625.00 |
| 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) | | | | |
| Contributions Received From Political Committees (Part A) | _ | | \$ | 1,100.00 |
| All Other Contributions (Part B) | | | \$ | 4,575.00 |
| TOTAL for the Reporting |) Period | (2) | \$ | 5,675.00 |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 2,025.00 |
| All Other Contributions (Part D) | | | \$ | 2,000.00 |
| TOTAL for the Reporting |) Period | (3) | \$ | 4,025.00 |
| 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 | | | \$ | 10,325.00 |

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 Ca | ndidate | | Reporting | Period | | | |
|--|--------------------|-------------------------|-------------|--------|----------------|----|-----------|
| DONAHER, DEAN FRIENDS OF | | | From: | 1/1/20 |) <u>18</u> To | : | 4/30/2018 |
| | | | | DATE | | | AMOUNT |
| Full Name of Contributing Commit | | | МО | DAY | YEAR | | |
| Mailing Address 944 N. 19Th | H ST | | | | | \$ | 100.00 |
| City ALLENTOWN | State PA | Zip Code (Plus 18104 | 2 | 10 | 2018 | | |
| Full Name of Contributing Committee FRIENDS OF BOB DONCHEZ PAC | | | | DAY | YEAR | | |
| Mailing Address 377 DEVON | SHIRE DR. | | | | | \$ | 250.00 |
| City BETHLEHEM | State PA | Zip Code (Plus 18017 | 4) 2 | 14 | 2018 | | |
| Full Name of Contributing Commit | | | МО | DAY | YEAR | | |
| Mailing Address 34 W ELIZA | BETH AVE. | | | | | \$ | 250.00 |
| City BETHLEHEM | State PA | Zip Code (Plus 18018 | 4) 2 | 15 | 2018 | | |
| Full Name of Contributing Commit ROOFERS LOCAL 30 POLITICAL A | | CATIONAL | МО | DAY | YEAR | | |
| C'A- | ESDALE AVE. | Zip Code (Plus | 4) 2 | 27 | 2018 | \$ | 250.00 |
| PHILADELPHIA | PA | 19135 | | | | | |
| Full Name of Contributing Commit FRIENDS OF BRYAN CALLAHAN | tee | | МО | DAY | YEAR | | |
| Mailing Address 633 MAIN S | T. | | | | | \$ | 250.00 |
| City BETHLEHEM | State PA | Zip Code (Plus 18018 | 4) | 9 | 2018 | | |
| | | I | | L | L | | |

PAGE TOTAL

1,100.00

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

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 Pe | eriod | | | | |
|---|--------------------|-----------------------------------|------|-----------|--------------|---------|------------|-----------|--|
| DONAHER, DEAN FRIENDS OF | | | Froi | m: | <u>1/1/2</u> | 2018 To |) : | 4/30/2018 | |
| | | | | | DATE | | | AMOUNT | |
| Full Name of Contributor MICHAEL HARRINGTON | | | | МО | DAY | YEAR | | | |
| Mailing Address 4555 DOLORES LN. | | | | | | | \$ | 75.00 | |
| City BETHLEHEM | State PA | Zip Code (Plus 4) 18017 | | 2 | 15 | 2018 | | | |
| Full Name of Contributor BILL STAPLES | | | | | DAY | YEAR | | | |
| Mailing Address 345 BEAVER RUN D | R. | | | | | | \$ | 100.00 | |
| City NAZARETH | State PA | Zip Code (Plus 4) | | 1 | 14 | 2018 | | | |
| Full Name of Contributor ROBERT AND JENNIFER RUYAK | | | | МО | DAY | YEAR | | | |
| Mailing Address 770 BARCLAY DR. | | | | | | | \$ | 100.00 | |
| City BETHLEHEM | State PA | Zip Code (Plus 4) 18017 | | 1 | 31 | 2018 | | | |
| Full Name of Contributor JOHN MACKENCHNIE AND JANET WAXN | IONSKY | | | МО | DAY | YEAR | | | |
| Mailing Address 440 WEDGEWOOD | RD | | | | | | \$ | 100.00 | |
| City BETHLEHEM | State PA | Zip Code (Plus 4) 18017 | | 2 | 2 | 2018 | | | |
| Full Name of Contributor JOSEPH AND SANDRA GRIBBIN | | | | МО | DAY | YEAR | | | |
| Mailing Address 1622 MARK TWAIN | CIR. | | | | | | \$ | 100.00 | |
| City BETHLEHEM | State PA | Zip Code (Plus 4) 18017 | | 2 | 8 | 2018 | | | |

| | | | | | | FAGL 6 |
|---|---|---------------------------------|-----------|---------------|------------------|------------------------|
| Full Name of Contributor | | | | | | |
| KATHLEEN & JAMES HALI | KINS | | МО | DAY | YEAR | |
| Mailing Address 968 RAINE | BOW DR. | | | | | \$ 100.00 |
| City BETHLEHEM | State | Zip Code (Plus 4) | 2 | 9 | 2018 | |
| | PA | 18017 | | | | |
| Full Name of Contributor JOSEPH FILASETA | | | МО | DAY | YEAR | |
| Mailing Address 470 MACA | State 7in Code (Plus 4) | | | | | \$ 100.00 |
| City BETHLEHEM | State | Zip Code (Plus 4) | 2 | 11 | 2018 | |
| - BETTIELTIEN | PA | 18017 | | | | |
| Full Name of Contributor MICHAEL AND AMY FACCINET | то | · | МО | DAY | YEAR | |
| Mailing Address 3222 MAR | CHANT DR. | | | | | \$ 100.00 |
| City BETHLEHEM | State | Zip Code (Plus 4) | 2 | 12 | 2018 | |
| | PA | 18017 | | | | |
| | | | | | | |
| Full Name of Contributor ALAN BOSCH | <u> </u> | | мо | DAY | YEAR | |
| ALAN BOSCH | INGHAM DR. | | МО | DAY | YEAR | \$ 100.00 |
| ALAN BOSCH Mailing Address 206 BUCK | INGHAM DR. | Zip Code (Plus 4) | мо 2 | DAY 15 | YEAR 2018 | \$ 100.00 |
| ALAN BOSCH Mailing Address 206 BUCK | | Zip Code (Plus 4) 18017 | | | | \$ 100.00 |
| ALAN BOSCH Mailing Address 206 BUCK | State PA | | | | | \$ 100.00 |
| ALAN BOSCH Mailing Address 206 BUCK City BETHLEHEM Full Name of Contributor | State PA | | 2 | 15 | 2018 | \$ 100.00 \$ 100.00 |
| ALAN BOSCH Mailing Address 206 BUCK City BETHLEHEM Full Name of Contributor JOHN AND ELIZABETH LYCHAI Mailing Address 2608 UNIO | State PA | | 2 | 15 | 2018 | |
| ALAN BOSCH Mailing Address 206 BUCK City BETHLEHEM Full Name of Contributor JOHN AND ELIZABETH LYCHAI | State PA K ON CRT. | 18017 | - 2 MO | DAY | 2018 YEAR | |
| ALAN BOSCH Mailing Address 206 BUCK City BETHLEHEM Full Name of Contributor JOHN AND ELIZABETH LYCHAI Mailing Address 2608 UNIO | State PA CON CRT. State | 18017 Zip Code (Plus 4) | - 2 MO | DAY | 2018 YEAR | |
| ALAN BOSCH Mailing Address 206 BUCK City BETHLEHEM Full Name of Contributor JOHN AND ELIZABETH LYCHAI Mailing Address 2608 UNIO City BETHLEHEM Full Name of Contributor CLYDE THOMAS | State PA CON CRT. State | 18017 Zip Code (Plus 4) | мо 2 | 15 DAY | 2018 YEAR 2018 | |
| ALAN BOSCH Mailing Address 206 BUCK City BETHLEHEM Full Name of Contributor JOHN AND ELIZABETH LYCHAI Mailing Address 2608 UNIO City BETHLEHEM Full Name of Contributor CLYDE THOMAS Mailing Address 315 HAMII | State PA CON CRT. State PA | 18017 Zip Code (Plus 4) | мо 2 | 15 DAY | 2018 YEAR 2018 | \$ 100.00 |
| ALAN BOSCH Mailing Address 206 BUCK City BETHLEHEM Full Name of Contributor JOHN AND ELIZABETH LYCHAI Mailing Address 2608 UNIO City BETHLEHEM Full Name of Contributor CLYDE THOMAS | State PA CON CRT. State PA LTON AVE. | 18017 Zip Code (Plus 4) 18017 | мо | 15 DAY 15 | 2018 YEAR 2018 | \$ 100.00 |

| | | | | | | | FAGL | |
|--|--|--------------------|---------------------------------|-------------|---------------|------------------|------|--------|
| Full Name of Conti | ributor | | | | | | | |
| NANCY AND ROBE | ERT TOPPING | | | МО | DAY | YEAR | | |
| Mailing Address | 734 FIRE LN. | | | | | | \$ | 100.00 |
| City BETHLEHE | M | State | Zip Code (Plus 4) | 2 | 15 | 2018 | | |
| | | PA | 18015 | | | | | |
| Full Name of Contr | ributor | | | МО | DAY | YEAR | | |
| Mailing Address | The second secon | | | | | | \$ | 100.00 |
| City BETHLEHE | | State | Zip Code (Plus 4) | 2 | 15 | 2018 | | |
| - DETTILLITE | 1 | PA | 18020 | | | | | |
| Full Name of Contr ROCHELLE KAPLA | r ibutor N AND ROBERT ELBRI | іСН | | мо | DAY | YEAR | | |
| Mailing Address | 3153 MASTERS HIL | L RD. | | | | | \$ | 100.00 |
| City FOGELSVI | IIF | State | Zip Code (Plus 4) | 2 | 15 | 2018 | | |
| 10022011 | | PA | 18015 | | | | | |
| Full Name of Contributor | | | | | | | | |
| | ributor ATHRYN MCCLARIN | | | МО | DAY | YEAR | | |
| | | | | МО | | YEAR | \$ | 100.00 |
| ROBERT & amp; K | ATHRYN MCCLARIN 1211 LORAIN AVE. | State | Zip Code (Plus 4) | MO 2 | DAY 15 | YEAR 2018 | \$ | 100.00 |
| ROBERT & amp; K | ATHRYN MCCLARIN 1211 LORAIN AVE. | State PA | Zip Code (Plus 4) 18018 | | | | \$ | 100.00 |
| ROBERT & amp; K | ATHRYN MCCLARIN 1211 LORAIN AVE. | | | | | | \$ | 100.00 |
| ROBERT & DEPTH ROBERT | ATHRYN MCCLARIN 1211 LORAIN AVE. | | | 2 | DAY | 2018 | \$ | 100.00 |
| ROBERT & Amp; K Mailing Address City BETHLEHE Full Name of Contro CATHY WIRTH Mailing Address | ATHRYN MCCLARIN 1211 LORAIN AVE. M ributor 4604 SMITH DR. | | | 2 | 15 | 2018 | | |
| ROBERT & Amp; K Mailing Address City BETHLEHE Full Name of Contro CATHY WIRTH Mailing Address | ATHRYN MCCLARIN 1211 LORAIN AVE. M ributor 4604 SMITH DR. | PA | 18018 | мо | DAY | 2018 YEAR | | |
| ROBERT & Amp; K Mailing Address City BETHLEHE Full Name of Contro CATHY WIRTH Mailing Address | ATHRYN MCCLARIN 1211 LORAIN AVE. M ributor 4604 SMITH DR. | PA | 18018 Zip Code (Plus 4) | мо | DAY | 2018 YEAR | | |
| ROBERT & DETAILED FULL Name of Control City BETHLEHE Full Name of Control CATHY WIRTH Mailing Address City BETHLEHE Full Name of Control Full Name of Control | ATHRYN MCCLARIN 1211 LORAIN AVE. M ributor 4604 SMITH DR. | State PA | 18018 Zip Code (Plus 4) | м о | 15 DAY | 2018 YEAR 2018 | | |
| ROBERT & Amp; K Mailing Address City BETHLEHE Full Name of Control CATHY WIRTH Mailing Address City BETHLEHE Full Name of Control MOLLIE SANTEE Mailing Address | ATHRYN MCCLARIN 1211 LORAIN AVE. IM ributor 4604 SMITH DR. IM ributor 1251 BIAFORE AVE | State PA | 18018 Zip Code (Plus 4) | м о | 15 DAY | 2018 YEAR 2018 | \$ | 100.00 |
| ROBERT & Amp; K. Mailing Address City BETHLEHE Full Name of Control CATHY WIRTH Mailing Address City BETHLEHE Full Name of Control MOLLIE SANTEE Mailing Address | ATHRYN MCCLARIN 1211 LORAIN AVE. IM ributor 4604 SMITH DR. IM ributor 1251 BIAFORE AVE | State PA | 18018 Zip Code (Plus 4) 18017 | мо | 15 DAY | 2018 YEAR 2018 | \$ | 100.00 |

| | | | | PAGE | |
|---|-----------|---------------|------------------|------|--------|
| Full Name of Contributor LOUIS CHOMO | мо | DAY | YEAR | | |
| Mailing Address 4090 SUNCREST LN. | | | | \$ | 100.00 |
| City BETHLEHEM State Zip Code (Plus 4) PA 18020 | 2 | 23 | 2018 | | |
| Full Name of Contributor RALPH (CHIP) AREND | МО | DAY | YEAR | | |
| Mailing Address 480 WEDGEWOOD RD | | | | \$ | 100.00 |
| City BETHLEHEM State Zip Code (Plus 4) PA 18017 | 2 | 26 | 2018 | | |
| Full Name of Contributor MARIE BACHMAN | МО | DAY | YEAR | | |
| Mailing Address 113 MICHAEL CRT. | | | | \$ | 100.00 |
| City NORTHAMPTON State Zip Code (Plus 4) PA 18017 | 3 | 4 | 2018 | | |
| · · · · · · · · · · · · · · · · · · · | | | | | |
| Full Name of Contributor KATHY KOSTEM | мо | DAY | YEAR | | |
| | МО | | | \$ | 100.00 |
| KATHY KOSTEM | MO | DAY 10 | YEAR 2018 | \$ | 100.00 |
| Mailing Address 3520 CHIPPENDALE City BETHLEHEM State Zip Code (Plus 4) | | | | \$ | 100.00 |
| KATHY KOSTEM Mailing Address 3520 CHIPPENDALE City BETHLEHEM State PA 18017 Full Name of Contributor | мо | 10 | 2018 YEAR | \$ | 100.00 |
| Mailing Address 3520 CHIPPENDALE City BETHLEHEM State PA 18017 Full Name of Contributor MARILYN AND TOM DULUSIO | 3 | 10 | 2018 | | |
| Mailing Address 3520 CHIPPENDALE City BETHLEHEM State PA 18017 Full Name of Contributor MARILYN AND TOM DULUSIO Mailing Address 1360 SYCAMORE AVE, 31 City BETHLEHEM State Zip Code (Plus 4) 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | мо | 10 | 2018 YEAR | | |
| Mailing Address 3520 CHIPPENDALE City BETHLEHEM State PA 18017 Full Name of Contributor MARILYN AND TOM DULUSIO Mailing Address 1360 SYCAMORE AVE, 31 City BETHLEHEM State PA 18017 Full Name of Contributor | мо 1 | 10 DAY 29 | 2018 YEAR 2018 | | |

| | | | | FAGE 9 |
|---|------------|---------------|------------------|------------------------|
| Full Name of Contributor | | | | |
| LISA LYNCH | МО | DAY | YEAR | |
| Mailing Address 4510 VIRGINIA DR. | | | | \$ 100.00 |
| City BETHLEHEM State Zip Code (Plus 4) | 2 | 9 | 2018 | |
| PA 18017 | | | | |
| Full Name of Contributor PETE DARLINGTON | мо | DAY | YEAR | |
| Mailing Address 4315 JACKSON VILLE RD | | | | \$ 100.00 |
| City BETHLEHEM State Zip Code (Plus 4) | 2 | 11 | 2018 | |
| PA 18017 | | | | |
| Full Name of Contributor DAVID PORTER | мо | DAY | YEAR | |
| Mailing Address 390 WEDGEWOOD RD | | | | \$ 100.00 |
| City BETHLEHEM State Zip Code (Plus 4) | 2 | 13 | 2018 | |
| l l | | | l | |
| PA 18017 | | | | |
| Full Name of Contributor PATRICK LARKIN | МО | DAY | YEAR | |
| Full Name of Contributor | мо | DAY | | \$ 100.00 |
| Full Name of Contributor PATRICK LARKIN Mailing Address 4310 CROSSWINDS DR. | MO | DAY 19 | YEAR 2018 | \$ 100.00 |
| Full Name of Contributor PATRICK LARKIN Mailing Address 4310 CROSSWINDS DR. | | | | \$ 100.00 |
| Full Name of Contributor PATRICK LARKIN Mailing Address 4310 CROSSWINDS DR. City EASTON State Zip Code (Plus 4) | | | | \$ 100.00 |
| Full Name of Contributor PATRICK LARKIN Mailing Address 4310 CROSSWINDS DR. City EASTON State Zip Code (Plus 4) 18045 Full Name of Contributor | 2 | 19 | 2018 YEAR | \$ 100.00 \$ 100.00 |
| Full Name of Contributor PATRICK LARKIN Mailing Address 4310 CROSSWINDS DR. City EASTON State Zip Code (Plus 4) 18045 Full Name of Contributor DIANE DONAHER Mailing Address 1830 MARE RD | 2 | 19 | 2018 | |
| Full Name of Contributor PATRICK LARKIN Mailing Address 4310 CROSSWINDS DR. City EASTON State Zip Code (Plus 4) 18045 Full Name of Contributor DIANE DONAHER Mailing Address 1830 MARE RD | - 2 MO | 19 | 2018 YEAR | |
| Full Name of Contributor PATRICK LARKIN Mailing Address 4310 CROSSWINDS DR. City EASTON State PA 18045 Full Name of Contributor DIANE DONAHER Mailing Address 1830 MARE RD City WARRINGTON State Zip Code (Plus 4) Zip Code (Plus 4) 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | - 2 MO | 19 | 2018 YEAR | |
| Full Name of Contributor PATRICK LARKIN Mailing Address 4310 CROSSWINDS DR. City EASTON Full Name of Contributor DIANE DONAHER Mailing Address 1830 MARE RD City WARRINGTON State PA Zip Code (Plus 4) 18045 Zip Code (Plus 4) 18045 Full Name of Contributor PA 18976 | м о | 19 DAY | 2018 YEAR 2018 | |
| Full Name of Contributor PATRICK LARKIN Mailing Address 4310 CROSSWINDS DR. City EASTON State PA I8045 Full Name of Contributor DIANE DONAHER Mailing Address 1830 MARE RD City WARRINGTON State PA I8976 Full Name of Contributor PA I8976 | м о | 19 DAY | 2018 YEAR 2018 | \$ 100.00 |

| Full Na | ame of Contributor | | | | | | | |
|--|---|-----------------------|-----------------------------------|-----------|--------------|------------------|-----------|--------|
| GEOR | GE AND KAREN BOKSAN | | | МО | DAY | YEAR | | |
| Mailin | g Address 3513 DRIFTWOOD | PL. | | | | | \$ | 150.00 |
| City | BETHLEHEM | State | Zip Code (Plus 4) | | | | | |
| | DETILETE! | PA | 18020 | | | | | |
| l | ame of Contributor ORY ZEBROWSKI | | | МО | DAY | YEAR | | |
| Mailin | g Address 23 DEWBERRY AVE | = | | | | | \$ | 150.00 |
| City | DETUI EUEM | State | Zip Code (Plus 4) | 3 | 5 | 2018 | | |
| | BETHLEHEM | PA | 18017 | | | | | |
| l | ame of Contributor LEEN FULMER | | МО | DAY | YEAR | | | |
| Mailin | g Address 2713 DELI'S RD | | | | | | \$ | 200.00 |
| City | DANIELSVILLE | State | Zip Code (Plus 4) | 4 | 19 | 2018 | | |
| | 27.0,1222 | PA | 18038 | | | | | |
| Full Name of Contributor | | | | | | | | |
| l | DONAHER | | | мо | DAY | YEAR | | |
| DEAN | | RD | | МО | DAY | YEAR | \$ | 200.00 |
| DEAN | DONAHER g Address 710 WEDGEWOOD | RD State | Zip Code (Plus 4) | MO | DAY 3 | YEAR 2018 | \$ | 200.00 |
| DEAN Mailin | DONAHER | | Zip Code (Plus 4) 18017 | | | | \$ | 200.00 |
| Mailing City Full Na | DONAHER g Address 710 WEDGEWOOD | State | | | | | \$ | 200.00 |
| Mailing City Full Na | DONAHER g Address 710 WEDGEWOOD BETHLEHEM ame of Contributor | State | | 1 | 3 | 2018 | \$ | 200.00 |
| DEAN Mailing City Full Na LARRY Mailing | p Address 710 WEDGEWOOD BETHLEHEM The same of Contributor AND MARGE OBERLY The same of Address 154 ATTAS RD. | State | | 1 | 3 | 2018 | | |
| Mailing City Full Na | DONAHER g Address 710 WEDGEWOOD BETHLEHEM ame of Contributor AND MARGE OBERLY | State PA | 18017 | 1 МО | DAY | 2018 YEAR | | |
| DEAN Mailing City Full Na LARRY Mailing City | g Address 710 WEDGEWOOD BETHLEHEM ame of Contributor AND MARGE OBERLY g Address 154 ATTAS RD. NORTHAMPTON | State PA State | 18017 Zip Code (Plus 4) | 1 МО | DAY | 2018 YEAR | | |
| City Full Na LARRY Mailing City Full Na ROBIN | DONAHER g Address 710 WEDGEWOOD BETHLEHEM ame of Contributor AND MARGE OBERLY g Address 154 ATTAS RD. NORTHAMPTON ame of Contributor AND GWEN BRESLIN | State PA State | 18017 Zip Code (Plus 4) | - 1 MO | 3 DAY 3 | 2018 YEAR 2018 | | |
| City Full Na LARRY Mailing City Full Na ROBIN | g Address 710 WEDGEWOOD BETHLEHEM ame of Contributor AND MARGE OBERLY g Address 154 ATTAS RD. NORTHAMPTON | State PA State PA | 18017 Zip Code (Plus 4) | 1 MO | 3 DAY | 2018 YEAR 2018 | | |
| City Full Na LARRY Mailing City Full Na ROBIN | DONAHER g Address 710 WEDGEWOOD BETHLEHEM ame of Contributor AND MARGE OBERLY g Address 154 ATTAS RD. NORTHAMPTON ame of Contributor I AND GWEN BRESLIN | State PA State PA | 18017 Zip Code (Plus 4) | - 1 MO | 3 DAY 3 | 2018 YEAR 2018 | \$ | 250.00 |
| Full Na LARRY Mailing City Full Na ROBIN Mailing | g Address 710 WEDGEWOOD BETHLEHEM The ame of Contributor AND MARGE OBERLY G Address 154 ATTAS RD. NORTHAMPTON The ame of Contributor AND GWEN BRESLIN G Address 100 W. MACADA R | State PA State PA D | 18017 Zip Code (Plus 4) 18067 | 1 MO | 3 DAY | 2018 YEAR 2018 | \$ | 250.00 |

| Full Name of Contributor GEORGE MOWRER Mailing Address | | | | DAY | YEAR | |
|--|----------------------------------|--|-----------|-----|------|-----------|
| Mailing Address 4513 VIRGINIA DR. | | | | 1 | | \$ 250.00 |
| City BETHELEHEM | State Zip Code (Plus 4) PA 18017 | | | | 2018 | |
| Full Name of Contributor ANTHONY VILLANI | | | | | | |
| | | | МО | DAY | YEAR | |
| | | | MO | DAY | | \$ 250.00 |

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

PAGE TOTAL \$ 4,575.00

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 | | | | |
|--|----------------------|--------------------------|-------------|--------|----------------|------|----|------------------|
| DONAHER, DEAN FRIENDS OF | | | From: | 1/ | <u>/1/2018</u> | То: | 4 | <u>1/30/2018</u> |
| | | | | DA | TE | | Α | MOUNT |
| Full Name of Contributing Committee ASBESTOS WORKERS PAC | | | | МО | DAY | YEAR | | |
| Mailing Address 9602 M.L. KING HW | (| | | | | | \$ | 500.00 |
| City _{LANHAM} | State MD | Zip Code 20706 | e (Plus 4) | 1 | 23 | 2018 | 3 | |
| Full Name of Contributing Committee STEAMFITTERS LOCAL UNION NO. 420 EDUCATION | COMMITTEE ON POLI | TICAL | | МО | DAY | YEAR | | |
| Mailing Address 14420 TOWNSEND R | D STE A | | | | | | \$ | 1,500.00 |
| City PHILADELPHIA | State PA | Zip Code 19154 | e (Plus 4) | 3 | 16 | 2018 | 3 | |
| Full Name of Contributing Committee IBEW LOCAL UNION #375 POLITICAL A | ACTION COMMITTEE | | | МО | DAY | YEAR | | |
| Mailing Address 1201 W. LIBERTY ST | | | | | | | \$ | 2,500.00 |
| City ALLENTOWN | State PA | Zip Code 18102 | e (Plus 4) | 3 | 8 | 2018 | 3 | |
| | | | | | | | | PAGE TOTAL |
| Enter Grand Total of Part C on Scheo | lule I, Detailed Sum | mary Pa | ige, Sectio | n 3. | | | \$ | 4,500.00 |

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.)

| | amo of Eiling Committee or Candidate | | | | | | | | | |
|---|--------------------------------------|-----|------------|------|--------------------|------------|---------------|--------------|--------------|----------|
| Name of Filing Committee or Candidate | | | | Rep | orting Pe | riod | | | | |
| DONAHER, DEAN FRIENDS OF | | | | Fron | n: | 1/1/2 | <u>018</u> To |) : | 4/30/2018 | <u>3</u> |
| | | | | | DA | ATE | | | AMOUNT | |
| Full Name of Contributor ROGER STERN | | | | | мо | DAY | YEAR | | | |
| Mailing 685 WEDGEWOOD RD |) | | | | | | | \$ | 500 | 0.00 |
| City BETHLEHEM | State | Zip | Code (Plus | 4) | 2 | 24 | 2018 | | | |
| | PA 18017 | | | | | | | | | |
| mployer Name _{N/A} | | | | | Occupat | ion R | RETIREC |) | | |
| Employer Mailing Address/Principal Place of City Business | | | | | State | | Zip Co | ode (Plus 4) | | |
| Business N/A | | | | | | | | | | |
| Full Name of Contributor PETER KURILOFF | | | | | МО | DAY | YEAR | | | |
| Mailing 826 ADDISON ST. | | | | | | | | \$ | 500 | 0.00 |
| City PHILADELPHIA | State | Zip | Code (Plus | 4) | 3 | 17 | 2018 | | | |
| | PA | 191 | 147 | | | | | | | |
| Employer Name UNIVERSITY OF POEN | NSYLVANIA | | | | Occupation PROFESS | | | | | |
| Employer Mailing Address/Principal Place Business | e of | | City | | State Zip Co | | | ode (Plus 4) | | |
| 3415 WALNUT ST. | | | PHILADE | LPIA | | PA | | 1910 | 04 | |
| Full Name of Contributor | | | | | | | | | | |
| JEFFERY AND NOREEN MOHLER | | | | | МО | DAY | YEAR | | | |
| Mailing 750 WEDGEWOOD RD |) | | | | | | | \$ | 1,000 | 0.00 |
| City BETHLEHEM | State | Zip | Code (Plus | 4) | 2 | 7 | 2018 | | | |
| | PA | 180 | 017 | | | | | | | |
| Employer Name N/A | | | | | Occupat | ion R | RETIRED |) | | |
| Employer Mailing Address/Principal Plac Business | e of | | City | | • | State | | Zip Co | ode (Plus 4) | |
| N/A | | | | | | | | | | |

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

PAGE TOTAL

\$ 2,000.00

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 Candidate | | | Reporting Period | | | | | | |
|---------------------------------------|------------------------|------------------|------------------|----|-----|------|----|-----------|--|
| | | | From: | | | To: | | | |
| | | | | D | ATE | | А | MOUNT | |
| Full Name | | | | МО | DAY | YEAR | | | |
| Mailing Address | | | | | | | \$ | 0.00 | |
| City | State | Zip Code (| Plus 4) | | | | | | |
| Receipt Description | | - | | | | | | | |
| Enter Grand Total of Part E o | n Schedule I. Detailed | l Summary Page | Section | 4 | | | P. | AGE TOTAL | |
| Enter Grand Fotol of Fart E | Jenedale I, Detance | . Janimary rage, | Section | | | | \$ | 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 | | | | | | | | |
|--|------------------|----------------------------|-----------|--|--|--|--|--|--|
| DONAHER, DEAN FRIENDS OF | From: | <u>1/1/2018</u> To: | 4/30/2018 | | | | | | |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR | | | | | | | | | |
| TOTAL for the Reporting Pe | eriod (1) | \$ | 0.00 | | | | | | |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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, 1 | | \$ | 0.00 | | | | | | |

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Candidate | | | | Reporting Period | | | | | |
|---------------------------------------|---------------------|-----------------------|----------|------------------|-------|-----------|------------|--|--|
| | | | From: | | | To: | | | |
| | | | | DATE | | | AMOUNT | | |
| Full Name of Contributor | | | МО | DAY | YEAR | | | | |
| Mailing Address | | | | | | \$ | 0.00 | | |
| City | State | Zip Code (Plus 4) | | | | | | | |
| Description of Contribution: | | | | | | | | | |
| Enter Grand Total of Part F on So | shedule II. In-Kir | nd Contributions Data | ilad Sum | mary Pag | | | DACE TOTAL | | |
| Section 2. | Aleudie II, III-Kii | ia Contributions Deta | neu Sum | iliai y Pag | , je, | | PAGE TOTAL | | |
| | | | | | | \$ | 0.00 | | |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | | | | Reporting Period | | | | | | |
|---|-------|------|------------|------------------|-----|---------------------|-------|-----------------------------|------|--------|
| | | | | | Fro | om: | | To: | | |
| | | | | | • | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 0.00 | |
| City | State | | Zip Code(I | Plus 4) | | | | | | |
| Employer of Contributor | | | | | | Occupa | ition | | • | |
| Employer Mailing Address/Principal Place of Business | | City | State | | | Zip Code(Plus 4) | | Description of Contribution | | |
| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. | | | | | | | | PAGE TOTAL 0.00 | | |

STATEMENT OF EXPENDITURES

| Name of Filing Committee or C | Candidate | | Reporting Period | | | | | | |
|--|--------------------|-----------------------------------|--|--------------|-----------|-----------|-----------|--|--|
| DONAHER, DEAN FRIENDS O | F | | From | <u>1/</u> | 1/2018 | То: | 4/30/2018 | | |
| | | | | DATE | | AMOUNT | | | |
| To Whom Paid LV PRINT CENTER | | | мо | DAY | YEAR | | | | |
| Mailing Address 1701 UNION BLVD. STE 114 | | | | 13 | 2018 | \$ | 111.30 | | |
| City ALLENTOWN | State PA | Zip Code (Plus 4) 18109 | Descrip WINDO | CARDS | | | | | |
| To Whom Paid HANOVERVILLE ROAD HOUSE | · | · | МО | DAY | YEAR | | | | |
| Mailing Address 5001 HANOVERVILLE RD | | | | 6 | 2018 | \$ | 764.02 | | |
| City BETHLEHEM | State PA | Zip Code (Plus 4) 18017 | Description of Expenditure FOOD EXPENSE FOR FUNDRAISER | | | | | | |
| To Whom Paid LHS THEATRE | | | мо | DAY | YEAR | | | | |
| Mailing Address 1115 LIDE | N ST. | | 2 | 22 | 2018 | \$ | 75.00 | | |
| City BETHLEHEM | State PA | Zip Code (Plus 4) 18018 | Descrip PROGR | otion of Exp | penditure | | | | |
| To Whom Paid FREEDOM HIGH SCHOOL THE | ATRE COMPANY | · | МО | DAY | YEAR | | | | |
| Mailing Address 859 NICHO | DLAS ST. | | 2 | 22 | 2018 | \$ | 50.00 | | |
| City BETHLEHEM | State PA | Zip Code (Plus 4) 18017 | Descrip PROGR | otion of Exp | penditure | | | | |
| To Whom Paid LV PRINT CENTER | | | МО | DAY | YEAR | | | | |
| Mailing Address UNION BLV | /D. STE 114 | | 2 | 23 | 2018 | \$ | 291.50 | | |
| City ALLENTOWN | State | Zip Code (Plus 4) | Descrip | otion of Exp | penditure | | | | |

18109

PALM CARDS

PA

| | | | | | | PAG | GE 20 |
|--|-----------------|-------------------|--|-------------|----------|-----------|----------|
| To Whom Paid OPTION8 | | | МО | DAY | YEAR | | |
| Mailing Address 4741 COM | NCORD CIR. | | 2 | 26 | 2018 | \$ | 625.00 |
| City EASTON | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| 2.0.0.1 | PA | 18045 | 1 | kamp; PAL | | | |
| To Whom Paid LV PRINT CENTER | | | МО | DAY | YEAR | | |
| Mailing Address 1701 UNION BLVD. STE 114 | | | | 27 | 2018 | \$ | 84.80 |
| City ALLENTOWN | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| /IEEE/II/OWI | PA | 18109 | | SS CARDS | | | |
| To Whom Paid LIHIGH VALLEY LABOR COUN | NCIL | | МО | DAY | YEAR | | |
| Mailing Address 3031 WA | TTON RD # C300 | | 2 | 27 | 2018 | \$ | 250.00 |
| City PLYMOWTH MEETING | State | Zip Code (Plus 4) | Description of Expenditure 2 TICKETS & Description of Expenditure AWARD CEREMONY | | | | |
| | PA | 19462 | | | | | ANNUAL |
| To Whom Paid LV PRINT CENTER | | | мо | DAY | YEAR | | |
| Mailing Address 1701 UNI | ON BLVD STE 114 | | 3 6 2018 \$ | | | | 376.30 |
| City ALLENTOWN | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| - | PA | 18109 | 1 | | | NESS CARI |) |
| To Whom Paid MCNEILL FOR STATE REP | | | МО | DAY | YEAR | | |
| Mailing Address 1080 SCH | IADT AVE | | 3 | 16 | 2018 | \$ | 50.00 |
| City WHITEHALL | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | PA | 18052 | DONAT | - | | | |
| To Whom Paid JEFF WARREN | | | МО | DAY | YEAR | | |
| Mailing Address 1159 BLA | IR RD | | 4 | 7 | 2018 | \$ | 1,000.00 |
| City BETHLEHEM | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | PA | 18017 | САМРА | IGN CONS | ULTANT | | |

| To Whom Paid LV PRINT CENTER Mo DAY YEAR Mailing Address 1701 UNION BLVD STE 114 \$ | |
|---|--------|
| Mailing Address 1701 UNION BLVD STF 114 | |
| | 106.00 |
| City ALLENTOWN State Zip Code (Plus 4) Description of Expenditure PA 18109 BUTTONS | |
| To Whom Paid COMMITTEE TO ELECT MIKE STACK MO DAY YEAR | |
| Mailing Address PO BOX 292 4 10 2018 | 75.00 |
| City NEWTOWN State Zip Code (Plus 4) Description of Expenditure PA 18940 DONATION | |
| To Whom Paid NORTHAMPTON DEMOCRATIC COMMITTEE MO DAY YEAR | |
| Mailing Address 35369 OAKLAND RD 4 18 2018 \$ | 20.00 |
| City BETHLEHEM State Zip Code (Plus 4) Description of Expenditure | CKET |
| PA 18020 PULSE OF THE PRIMARY EVENT TIC | ZNLI |
| To Whom Paid WAWA | |
| To Whom Paid MO DAY YEAR | 50.00 |
| To Whom Paid MO DAY YEAR Mailing Address | |
| To Whom Paid WAWA Mailing Address 3300 SCHOENERSVILLE RD State Zip Code (Plus 4) Description of Expenditure | |
| To Whom Paid WAWA Mo DAY YEAR Mo DAY YEAR Mo DAY YEAR A 27 2018 \$ City BETHLEHEM State PA 18017 To Whom Paid Mo DAY YEAR A 27 2018 \$ Mo DAY YEAR A 27 2018 \$ Mo DAY YEAR | |
| To Whom Paid WAWA Mailing Address 3300 SCHOENERSVILLE RD State PA 18017 To Whom Paid TOM WOLF FOR GOVERNOR MO DAY YEAR 4 27 2018 \$ Description of Expenditure GAS EXPENSE To Whom Paid TOM WOLF FOR GOVERNOR MO DAY YEAR | 50.00 |
| To Whom Paid WAWA Mailing Address 3300 SCHOENERSVILLE RD State PA 18017 To Whom Paid TOM WOLF FOR GOVERNOR Mailing Address PO BOX 22454 City PHILADELPHIA State PA 27 2018 State PA 27 2018 State PA 27 2018 State PA 27 2018 \$ \$ City PHILADELPHIA State PA 27 2018 \$ \$ City PHILADELPHIA Description of Expenditure GAS EXPENSE \$ \$ \$ \$ City PHILADELPHIA Description of Expenditure City PHILADELPHIA Description of Expenditure City PHILADELPHIA | 50.00 |
| To Whom Paid WAWA Mailing Address 3300 SCHOENERSVILLE RD State PA 18017 To Whom Paid TOM WOLF FOR GOVERNOR Mo DAY YEAR State PA 219 Code (Plus 4) 18017 Mo DAY YEAR To Whom Paid TOM WOLF FOR GOVERNOR City PHILADELPHIA State PA 19110 To Whom Paid TOM Paid | 50.00 |

| To Whom Paid ACT BLUE | | | мо | DAY | YEAR | | | |
|--------------------------------|-----------------------|--------------------------------|---|-----|------|----|----------------------------|--|
| Mailing Address 366 SUMMER ST. | | | | 30 | 2018 | \$ | 26.64 | |
| City SOMERVILLE | State MA | Zip Code (Plus 4) 02144 | Description of Expenditure ACTBLUE TRANSACTION FEES | | | | | |
| Enter Grand Total of Expen | ditures on Page 1, Re | port Cover Page, Item D | • | | | \$ | PAGE TOTAL 5,555.56 | |
| | | | | | , | | | |
| | | | | | | | | |

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

| Name of Filing Committee or Candidate | | | | ng Period | | | |
|---------------------------------------|-----------------------|--------------------|----------|-----------|------------|------|--------------------------------|
| DONAHER, DEAN FRIENDS (| DF | | From: | | 1/1/2018 | То: | 4/30/2018 |
| | | | | | DATE | | Outstanding Balance of Debt |
| Name of Creditor DEAN DONANER | | | | мо | DAY | YEAR | |
| Mailing Address 710 WE | EDGEWOOD RD | | | 1 | 3 | 2018 | \$ 200.00 |
| City BETHLEHEM | State | Zip Code (Pl | us 4) | Descrip | tion of De | bt | |
| | PA | 18017 | | LOAN | | | |
| | • | • | | • | | | PAGE TOTAL |
| Enter Grand Total of U | npaid Debts on Page 1 | ., Report Cover Pa | ge, Item | ı G. | | | \$ 200.00 |
| | | | | | | _ | |