# **Campaign Finance Report**

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

Filer Identificat Number :	ion 2022	0260			Report Filed E		CANDI	DATE		СОМІ	MITTEE	✓	LOBE	BYIST	
	Committee, Candid	ate or L	obbyist:			-	TO ELECT	ROBER	<b>λ</b> Τ Ε.	SMITH	JR.				
			-					_			_				
Street Address:															
City:	ALLENTOWN						State:	PA	PA		Zip Code: 18		8109		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	PRIMARY					POST- 3.			AMENDN REPORT		Yes	No	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.				30 D ELEC	AY CTION	POST- 6.			TERMIN REPORT		Yes	No	$\checkmark$
report type)	ANNUAL REPORT	7.	<b>Year</b> 2024				NG METH				PAPER		$\checkmark$	DISKE	TTE
Name of Office	Sought by Candida	te:					DATE C	)F ELE	СТІО	N	District Number	Office	Par	ty Code	County Code
							мо	DAY	YE	AR	Number	coue	REP		39
							11		5	2024		(SEE INS	TRUCTIO	ONS FOR	CODES)
Summary of	Receipts and	мо	DAY	YEAR	1		мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY	
Expenditure	s from:		3 5	20	024 <b>T</b>	0	4	ł	8	2024					
A. Amount Bro	ought Forward From	n Last R	eport			\$	5		2,4	56.79					
B. Total Monet	tary Contributions	And Rec	eipts (Fron	n Sche	dule I)	4	\$		1	.00.00					
C. Total Funds	Available (Sum Of	f Lines A	and B)			\$	\$		2,5	56.79					
D. Total Exper	nditures (From Sch	edule II	I)			\$	\$		2	66.61					
E. Ending Casl	h Balance (Subtrac	t Line D	From Line	C)			5		2,2	90.18					
F. Value Of In	-Kind Contributions	s Receiv	ed (From S	chedu	le II)	4	\$			0.00	1				
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)		4	\$			0.00					
				AFF	IDAVI	T SI	ECTION								
	is a Committee rep														
I swear (or affirm correct and comp	ı) that this report, incl lete.	luding the	e attached sc	hedules	s filed on	paper	or by elect	tronic m	edium,	, are to f	the best o	of my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me this dav of	5	20						s	ignature	e of Perso	n Submitt	ing Rep	oort	
						-									
	Signatu	re				_					Prir	ited Name			
My Commission E	xpires MO		AY	YR		_			ea Cod		Ema	nil ne Teleph			
											Daytin	le relepti			
	s a report of a cand ) that to the best of n							-		v provis	ions of th	e act of lu	ine 3 10	937 (P I	1333
No 320) as amend	led.				Pennoal					, p. 0113					,
Sworn to and subs	cribed before me this day of		20							s	ignature	of Candida	ite		
						_					Printe	ed Name			
My Commission Ex	Signature pires					_					Ema	nil			
						_									
	мо	D	AY	YR				Area	Code		D	aytime Te	elephon	e Numb	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** COMMITTE TO ELECT ROBERT E. SMITH JR. From: <u>3/5/2024</u> **To:** 4/8/2024 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 100.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 100.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 100.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

## 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 Candidat	Name of Filing Committee or Candidate			Reporting Period					
				From:			То:		
					DATE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	4)						
								PAGE TOTAL	
			_						
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Se							\$	0.00	

PART B ALL OTHER CONTRIBUTIONS \$50.01 TO \$250.00 Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part A)								
Name of Filing Committee or Candid	ite		Rep	porting P	eriod			
COMMITTE TO ELECT ROBERT E. SM	1ITH JR.		Fro	m:	<u>2024</u> <b>To:</b>		<u>4/8/2024</u>	
					DATE			AMOUNT
Full Name of Contributor JOSEPH MAHER				мо	DAY	YEAR		
Mailing Address							\$	100.00
City EMMAUS	State	Zip Code (Plus 4	•)	2	21	2024		
	PA	18049						
								PAGE TOTAL
Enter Grand Total of Part A on	Schedule I,	Detailed Summary Pa	ge, S	ection 2	-		\$	100.00

## 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	J Period				
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR	\$	0.00
Mailing Address							<b>]</b> *	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

## PART D ALL OTHER CONTRIBUTIONS

### OVER \$250.00

### Use this Part to itemize all other contributions with an aggregate value of

over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate			Reporting Period					
			Fron	n:		Τά	):	
				D/	ATE		A	MOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	ion			
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Cod	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Sectio	on 3.			P. \$	<b>AGE TOTAL</b> 0.00

## PART E **OTHER RECEIPTS**

**REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.** Use this Part to report refunds received, interest earned, returned checks and

## prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate			Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (	Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	Section	4.			\$		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.** C

Detailed	Summary	Page
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Name of Filing Committee or Candidate	<b>Reporting Period</b>		
COMMITTE TO ELECT ROBERT E. SMITH JR.	From:	<u>3/5/2024</u> <b>то:</b>	<u>4/8/2024</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	「 F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, I		\$	0.00

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate			Reporting Period					
			From:			То:			
				DATE			AMOUNT		
Full Name of Contributor			мо	DAY	YEAR				
Mailing Address		_				<b>7</b> \$		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:			1						
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,		PAGE TOTA	AL.	
						\$		0.00	

### SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Period		
				From:			
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupa	ation		
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	d			<b>PAGE TOTAL</b> 0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
COMMITTE TO ELECT ROBERT E. SMIT	Ή JR.		From	<u>3/!</u>	<u>5/2024</u>	То:	<u>4/8/2024</u>	
				DATE			AMOUNT	
To Whom Paid			мо	DAY	YEAR			
COMMONWEALTH OF PENNSYLVANIA								
Mailing Address			2	5	2024	\$	25.89	
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
	РА	17120	PETITIC	NS FILING	6 FEE &ai	mp; MO	FEE	
To Whom Paid			мо	DAY	YEAR			
LEHIGH COUNTY REPUBLICAN COMMIT	TEE							
Mailing Address			2	13	2024	\$	100.00	
City ALLENTOWN State Zip Code (Plus 4)			Descrip	tion of Exp	enditure			
	РА	18104	LINCOL	N BREAKF	AST			
To Whom Paid			мо	DAY	YEAR			
RUMBLE UP								
Mailing Address			2	22	2024	\$	90.72	
City WASHINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	DC	20006	TEXT M	ESSAGING	AD			
To Whom Paid			мо	DAY	YEAR			
GRUND SAULDD SCH# 18 (GERMAN LO	DDGE)							
Mailing Address			3	12	2024	\$	50.00	
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
			AD					
							PAGE TOTAL	
Enter Grand Total of Expenditures	on Page 1, Report C	over Page, Item D	).			\$	266.61	

9/1/2025 2:26:15 PM