

**Print Form** 



## Commonwealth of Pennsylvania - Campaign Finance Report (Note: This report must be clear and legible, it should be typed)

Filer Identificat	ion		200	ort Filed I		Candida		2. K 31100	Committee		Labberto Terror
Number				ark X)	<b>.</b> 7	Candida	ile.		Committee		Lobbyist
Name of Filing Lobbyist	Committee, Ca	ndidate or	Luiz D. Garcia								
Street Address	ress 612 HAMILTON ST. STE 202G					E 202G					-,
City	Tou. I						Zip Code				
	ALLENTO					State	PA		Lip code	18101	
Type of Report											
1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary		h Tuesday Election		nd Friday - Election	6- 30 ( Election	Day Post on	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
	X							1			
Date Of Election (MM/DD/YYYY)		05/16/2017	Yea	r		2017	Amen	dment	П	Termination Report	
Summary of Re	ceipts and	From Date	T	To Date	e				For	Office Use Only	
Expenditures		03/27/2017		05	/04/2	017					
A. Amount Brou	ight Forward F	rom Last Report		S	0						
B. Total Moneta (From Schedule		ns and Receipts	1	5	1,79	7					
C. Total Funds A	vailable			5							
(Sum of Lines A					1,79	7					
D. Total Expend (From Schedule			1	5	1,36	7					
E. Ending Cash E			٠,	5							
(Subtract Line D	from Line C)			1	429						
F. Value of In-Ki (From Schedule		ns Received	1	5	97.7	8					A Die
G. Unpaid Debt (From Schedule		ns	- 5	5	12,20	)3					Se K
			-		_	Affidavit Se	tion				A 45
Part 1- If this is a C	ommittee repor	t, treasurer sign he	ere. If	this is a Car	ndidat	e report ca	ndidate s	ign here.			91 - 11 - 1
I swear (or affirm)	that this report,	including the attai	ched s	chedules or	n pape	er, is to the	best of m	y knowled	ge and belief ti	ue, correct and comp	
Sworn to and subs	cribed before me	e this		× ,			G	and .	Wal-		NOTABAL OHNSTON Dall Towns
Loan	1.		-	-			A.	Signature o	Redvis	itting report	E PAR SE
	Signaylire	15.10		ş I		,		,	Printed Nam	e	KA KON
My Commission ex	MO.	DAY YR.	-0.00			$\frac{c}{a}$	rea Code	_		time Telephone Num	- Ö ?
Part II. If this is a s	anart of - Can di-	datab Austria		Trans.							<u> </u>
Part II- If this is a re I swear (or affirm) amended	that to the best	of my knowledge a	nd be	littee, cand lief this pol	idate itical d	shall sign hi committee	ere. has not vi	olated any	provisions of t	he Act of June 3, 193	7 (P.L. 1333, NO.320) as
Sworn to and subs	cribed before me	e this									
day of_		20		2.4							
			-			-		Sign	ature of Candid	late	
	Signature					=			Printed Name		
My Commission ex	pires			. 2							
,	MO.	DAY YR.	•			Α	rea Code	_	Dayt	ime Telephone Numb	er

# SCHEDULE I Contributions and Receipts

**Detailed Summary Page** 

Filer Identification Number				
1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor				
Total for the reporting period	(1)	\$	1,046	
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)		I.,		
Contributions Received from Political Committees (Part A)	=_	\$	175	
All Other Contributions (Part B)		\$	575	·
Total for the reporting period	(2)	\$	1,796	
3. Contributions Over \$250.00 (From Part C and Part D)				1.
Contributions Received from Political Committees (Part C)		\$	0	
All Other Contributions (Part D)		\$	0	
Total for the reporting period	(3)	\$	0	
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E	)			
Total for the reporting period	(4)	\$	0	
Total Monetary Contributions and Receipts during this reporting period (Add and		\$	) <sup>(1)</sup>	

1,796

enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, 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.

Filer Iden	ntification Numb	er						
, iid iucii		OTI .						
								Amount
Full Nam	ne of Contribu	- 1				Date [MM/DD/YYYY]	\$	475.65
Committee	itee	Steven R	amos			04/05/2017		175.65
House #		Street Address				Date [MM/DD/YYYY]	\$	
	431		N. 19th St					
City	All .	1	State	Zip Code		Date [MM/DD/YYYY]	\$	
	Allentown		PA		18102			
	ne of Contribu	ting		(*)		Date [MM/DD/YYYY]	\$	
Commit	tee							
House #		Street Address				Date [MM/DD/YYYY]	\$	
							1	
City			State	Zip Code		Date [MM/DD/YYYY]	\$	
				_p code		Date [MM/DO/1111]	1	
Full Nam	ne of Contribu	ting				Date [MM/DD/YYYY]	\$	
Committ	tee						1	
House #		Street Address				Date [MM/DD/YYYY]	\$	
						Date [WWW/DD/1111]	۶	
City			State	71- 6-4-				
City			State	Zip Code		Date [MM/DD/YYYY]	\$	
Full Nam	ne of Contribu	ting				Date [MM/DD/YYYY]	\$	
Committ						Date [miny DD) 1111]	1	
House #		Street Address				Date [MM/DD/YYYY]	\$	
City			State	Zip Code		Date [MM/DD/YYYY]	\$	
							1	
Full Nam	ne of Contribu	ting				Date [MM/DD/YYYY]	\$	
Committ	tee	-				Date (MM/DD/1111)	7	
House #		Street Address				Date (See Inches	1	
		Street Address				Date [MM/DD/YYYY]	\$	
City			CAnt - I	Two and				
City			State	Zip Code		Date [MM/DD/YYYY]	\$	
Full Nam	ne of Contribu	ting				Date [MM/DD/YYYY]	É	
Committ						Date [WW/DD/TTYY]	\$	
House #		Street Address				Date [MM/DD/YYYY]	\$	
						sere (minipo) ( ) (	1	
City			State	Zip Code	1	Date [MM/DD/YYYY]	-	
,			State	zip code		Date [WW/DD/1111]	\$	
			10	T. Control of the con	1		11	L.

## PART B All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

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

Filer Identification Number:	

	ame of Contr	ibutor						Deta (8484/DD 0000)	TA	
			Kevin Westga	ate				Date [MM/DD/YYYY]	\$	93.8
House	. # 1	les						4/15/2017	Į,	33.0
	1714	Str	eet Address	W. Greenlea	f St			Date [MM/DD/YYYY]	\$	
City	Allentown			State	PA	Zip Code	18104	Date [MM/DD/YYYY]	\$	
Full Na	me of Contr	ibutor					1	Date [MM/DD/YYYY]	\$	
			Stephen Geh	ringer				03/27/2017		93.8
House	2940	Str	eet Address	West Highlar	nd Stret			Date [MM/DD/YYYY]	\$	
City	Allentown			State	PA	Zip Code	18104	Date [MM/DD/YYYY]	\$	
Full Na	me of Contr	ibutor			-			Date [MM/DD/YYYY]	\$	
			Kevin Westga	te				03/26/2017		93.8
louse	1714	Str	eet Address	W. Greenlea	St.			Date [MM/DD/YYYY]	\$	
City	Allentown			State	PA	Zip Code		Date [MM/DD/YYYY]	\$	
				. 101	ľ^		18104			
Full Na	ame of Contri	ibutor			<u> </u>		18104	Date [MM/DD/YYYY]	\$	
Full Na	ame of Contri	ibutor	Jeffrey Antho	ny	<u> </u>		18104	Date [MM/DD/YYYY] 03/26/2017	\$	93.8
		1	eet Address	ny West Mosser			18104		\$	93.8
louse	#	1	eet Address			Zip Code	18104	03/26/2017		93.8
louse	2334	Str	eet Address	West Mosser	Street	Zip Code		03/26/2017  Date [MM/DD/YYYY]	\$	93.8
louse	# 2334 Allentown	Str	eet Address	West Mosser State	Street	Zip Code		03/26/2017  Date [MM/DD/YYYY]  Date [MM/DD/YYYY]	\$	93.8
louse City	# 2334 Allentown	Str	eet Address Kevin Westga	West Mosser State	Street	Zip Code		Date [MM/DD/YYYY]  Date [MM/DD/YYYY]  Date [MM/DD/YYYY]	\$	
louse Ity Full Na louse	# 2334 Allentown	Str	eet Address Kevin Westga	State  State	Street	Zip Code		03/26/2017  Date [MM/DD/YYYY]  Date [MM/DD/YYYY]  Date [MM/DD/YYYY]  04/24/2017	\$	
louse Ilty Full Na louse	# 2334 Allentown me of Contri	Str	Kevin Westga	State te  W. Greenleaf	Street PA St.		18104	Date [MM/DD/YYYY]  Date [MM/DD/YYYY]  Date [MM/DD/YYYY]  04/24/2017  Date [MM/DD/YYYY]	\$ \$	
House Tity House Tity	Allentown  Total  Allentown  Allentown  Allentown  Allentown  Total  Allentown	Str	eet Address Kevin Westga	State te  W. Greenleaf	Street PA St.		18104	Date [MM/DD/YYYY]  Date [MM/DD/YYYY]  Date [MM/DD/YYYY]  04/24/2017  Date [MM/DD/YYYY]  Date [MM/DD/YYYY]	\$ \$	
House City Full Na House	Allentown  Total  Allentown  Allentown  Allentown  Allentown  Total  Allentown	Stre	Kevin Westga	State te  W. Greenleaf	Street PA St.		18104	Date [MM/DD/YYYY]  Date [MM/DD/YYYY]  Date [MM/DD/YYYY]  04/24/2017  Date [MM/DD/YYYY]  Date [MM/DD/YYYY]	\$ \$	100

#### 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 over \$250.00 in the reporting period.

Full Name of					7-2-1	
Contributing Co	ommittee			Date [MM/DD/YYYY]	\$	
House #	Street Addre	ess		Date [MM/DD/YYYY]	\$	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of				Date [MM/DD/YYYY]	\$	
Contributing Co	ommittee			Date (MM) DD/ ((1)		
House #	Street Addre	ess		Date [MM/DD/YYYY]	\$	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Co	ommittee			Date [MM/DD/YYYY]	\$	
House #	Street Addre	255		Date [MM/DD/YYYY]	\$	
City	See A London	State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Co	ommittee			Date [MM/DD/YYYY]	\$	
House #	Street Addre	ss		Date [MM/DD/YYYY]	\$	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Co	mmittee		Actuation	Date [MM/DD/YYYY]	\$	
House #	Street Addre	ss		Date [MM/DD/YYYY]	\$	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Co	ommittee			Date [MM/DD/YYYY]	\$	
House #	Street Addre	ss		Date [MM/DD/YYYY]	\$	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
		1000000			100	

## PART D All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part C)

Full Name of Contribut	tor			Date [MM/DD/YYYY]	\$
House #					
nouse #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Employer Name	- 124			Occupation	6
Employer Mailing Add Principal Place of Busin				U.S. H. S.	
Full Name of Contribut	or			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Employer Name				Occupation	
Employer Mailing Add Principal Place of Busin				(1 - 4	
Full Name of Contribut				Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Employer Name	131/3/6			Occupation	
Employer Malling Addr Principal Place of Busin	ess / less				
Full Name of Contribut	or			Date [MM/DD/YYYY]	\$
House#	Street Address			Date [MM/DD/YYYY]	\$
City	T left.	State	Zip Code	Date [MM/DD/YYYY]	\$
Employer Name	117116		4412	Occupation	
Employer Mailing Addr Principal Place of Busin	ess /				

#### PART E

### **Other Receipts**

REFUNDS, INTREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Piret Identification (				
Full Name				1
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	on .			
Full Name	803			
House #	Street Address	-		
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	n			
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	n			I.
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	n			
Full Name	0.46			
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	in			
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	on .	in in		A STATE OF THE STA

#### SCHEDULE II

## **IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECIEVED**

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD DETAILED SUMMARY PAGE

Filer Identification Number:		
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$5	50.00 C	OR LESS PER CONTRIBUTOR
TOTAL for the reporting period (1)	I s I	20
2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250	).00 (FI	ROM PART F)
TOTAL for the reporting period (2)	\$	77.78
3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FRO	M PAR	TG)
TOTAL for the reporting period (3)	\$	0
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F)	- 11	97.78

#### SCHEDULE II PART F

### **In-Kind Contributions Received**

VALUE OF \$50.01 TO \$250

Filer Identification Number:				-	
Full Name of Contributor			Date [MM/DD/YYYY]	\$	1
Staci Lu	ton		3/31/2017		77.78
House # Street Addr	S. Fountain Street A	spt. 4	Date [MM/DD/YYYY]	\$	
City	State PA	Zip Code	Date [MM/DD/YYYY]	\$	
Description of Contribution	In kind donatio	on of Bracelets		Ш	
Full Name of Contributor	1		Date [MM/DD/YYYY]	\$	T
Ed Whit	e		04/20/2017		20
House # Street Addr	W. Highland St.		Date [MM/DD/YYYY]	\$	
City	State PA	Zip Code	Date [MM/DD/YYYY]	\$	
Description of Contribution	In kind donation	on of Flyers		-	
Full Name of Contributor			Date [MM/DD/YYYY]	\$	
House # Street Addr	ess		Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$	
Description of Contribution		1878			
Full Name of Contributor			Date [MM/DD/YYYY]	\$	
House # Street Addr	ress		Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$	
Description of Contribution					
Full Name of Contributor			Date [MM/DD/YYYY]	\$	
House # Street Addr	ress		Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$	

Description of Contribution

### SCHEDULE II

#### Part G

### **In-Kind Contributions Received**

VALUE OVER \$250

Full Name of Cor	ntributor			Date [MM/DD/YYYY]	\$
	7.2				
House #	Street Address			Date [MM/DD/YYYY]	\$
300					
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Employer Name	L. C. Land			Occupation	
Employer Mailin	g Address / Principal			Description	
Place of Business				of	
		100		Contribution	
Full Name of Cor	ntributor			Date [MM/DD/YYYY]	\$
	7 77 - 27				
House #	Street Address			Date [MM/DD/YYYY]	\$
78.7					
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Employer Name	THE BEAT			Occupation	(15)
Employer Mailin	g Address / Principal				
Place of Business				<b>Description</b> of	
	72.652340.00			Contribution	
Full Name of Cor	ntributor			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
79-1					
Employer Name	S			Occupation	
THE REST	a Address 10-111				
employer Mailin Place of Business	g Address / Principal			<b>Description</b> of	
				Contribution	
Full Name of Cor	ntributor			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
Oty		State	Zip Code	Date [MM/DD/YYYY]	\$
			The code	Para fiaual/pp/11111	
Employer Name				Occupation	Ta-
	- Address (D.)			(Will Distribute)	
Employer Malling Place of Business	g Address / Principal			Description of	
	The state of the s	1.00		Contribution	

# Statement of Expenditures

Filer Identification Number:	

To W	hom Paid						Date [MM/DD/YYYY]	Ē	1	
		Tuk Law Offices					04/06/2017	\$	125	
House # Street Address										
	612	Street Address W.		St. Suite 2020	5		Description of Expenditure			
City	Allentown		State	PA	Zip Code	18101	Creation of Corporate Organ	izati	on	
To W	hom Paid	L8J Media LLC					Date [MM/DD/YYYY]	\$	200	
							04/21/2017	300		
House	3013	Street Address Kle	ein St.				Description of Expenditure			
City	Allentown		State	PA	Zip Code	18101	Policy Videos			
To W	hom Paid	T. I. I Offi					Date [MM/DD/YYYY]	\$		
		Tuk Law Offices					04/06/2017		300	
House# 612 Street Address W.		Hamilton St. Suite 202G				Description of Expenditure				
City	Allentown	· · · · · · · · · · · · · · · · · · ·	State	PA	Zip Code	18101	Attorney Fees			
To W	nom Paid	Vard Sign Wholesele					Date [MM/DD/YYYY]	\$		
1 1 (1		Yard Sign Wholesale					04/11/2017	13	450	
House	1813	Street Address E.	Colonial Dr				Description of Expenditure			
City	Orlando		State	FL	Zip Code	32803	Yard Signs for Campaign			
To W	nom Paid	Weeman's Grocosy Ste					Date [MM/DD/YYYY]	\$		
		Wegman's Grocery Store					04/24/2017	65.92		
House# 3900 Street Address Tilgh		ghman St			Description of Expenditure					
City	Allentown		State	PA	Zip Code	18104	Drinks for Fundraiser			
To Whom Paid					Date [MM/DD/YYYY]	\$				
361		Giant Food Stores					04/24/2017	81.14		
House	7150	Street Address Ha	milton Blvd	t			Description of Expenditure			
City	Trexlertown		State	PA	Zip Code	18087	Supplies for Fundraiser			
To W	nom Paid	Fine Wine and Good S	nicito	d.			Date [MM/DD/YYYY]	\$		
15			Pilits				04/24/2017		45.54	
House	6900	Street Address	amilton BL	VD.			Description of Expendit	ure		
City	Trexlertown		State	PA	Zip Code	18087	Drinks for Fundraiser			
To W	nom Paid						Date [MM/DD/YYYY]	\$		
House	#	Street Address				Description of Expenditure				
Cla.			Et 1	1	File			ш		
City			State		Zīp Code					

#### SCHEDULE IV

### **Statement of Unpaid Debts**

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

	Tuk Law Off	íces			Outstanding Bal	ance of Deb
fouse # 612	Street Address	W. Hamilton St. Suite 202G		E DEBT INCURRED MM/DD/YYYY]	\$	
				03/28/2017		
lty	Allentown	Allentown		Code 18101	12,203.44	12,203.44
escription of D	ebt LitIgation R	E: Petition Challenge				
ame of Credito	100				Outstanding Bal	ance of Deb
ouse #	Street Address			E DEBT INCURRED MM/DD/YYYY]	\$	
ity		State		Zip Code		
escription of D	ebt			· · · · · · · · · · · · · · · · · · ·		
ame of Credito	THE STATE OF				Outstanding Bal	ance of Deb
louse #	Street Address			E DEBT INCURRED MM/DD/YYYY]	\$	
îty	534	State		Zip Code		
escription of D	ebt	,				
lame of Credito	1388				Outstanding Bal	ance of Deb
ouse #	Street Address		Control of the contro	E DEBT INCURRED MM/DD/YYYY]	5	
ity		State	5	Zip		
escription of D	ebt	Life.		Code		
	r				Outstanding Ba	ance of Deb
lame of Credito	Street Address			E DEBT INCURRED MM/DD/YYYY]	\$	
louse #		State	U	Zip		
ouse #	ebt	State		Zip Code		
ouse # lity	Territor	State		Zip Code	Outstanding Ba	lance of Deb
lame of Credito louse # lescription of Delame of Credito louse #	Territor		DAT	ZIP Code  E DEBT INCURRED MM/DD/YYYY]	Outstanding Bal	lance of Deb

#### PENNSYLVANIA CAMPAIGN FINANCE REPORT

This Report must be typed or printed legibly in blue or black ink.

#### INSTRUCTIONS

This form is intended for the use of candidates, political committees and contributing lobbyists who are required to disclose contributions and expenditures. Candidates must file separate reports when they make expenditures or receive contributions on their own benalf and separate from their campaign committee. A candidate's report discloses contributions received and expenditures made individually by the candidate. A contributing lobbyist's report discloses only expenditures the lobbyist personally made to influence the outcome of a candidate's election.

Candidates and their authorized political committees file reports in the office where their nomination documents are filed. If the candidate's resides are filed with the Secretary of the Commonwealth, a copy of the reports filed by the candidate and the authorized committee must be filed with the County Board of Elections in the county in which the candidate resides.

#### REPORT COVER PAGE

The Report Cover Page identifies the flor, the type of report and what reporting period is covered. It also summarizes the detailed contribution and expenditure sections from the body of the report.

Filer Identification Number — This number is assigned by the Bureau of Commissions, Elections and Legislation to candidates and committees who register and file with the Secretary of the Commonwealth. A candidate's filer identification number is assigned by the Bureau when the candidate files nomination potitions. A political committee or lobbyist filer identification number is assigned when the committee or lobby stifles registration documents in the Bureau.

Report Filed By - Please Indicate which type of filer you are by checking the appropriate box on the cover page.

Name of Filing Committee, Candidate or Lobbyist, Street Address, City, State, Zip Code - Pease enter appropriate name and address.

Type of Report - Please place an "X" by the applicable report type

Amondment Report — Check "Yes" only if the report is being filed to correct, add to, or in some way change a report that has already been filed.

Termination Report: Check "Yes" only if the filer has no cash balance, no unpaid debts or obligations, and wishes to cease operation. Contributing lobbyists may file a termination report if they do not anticipate making further contributions to influence the outcome of a candidate's election.

Filing Method Indicate whether the complete report is filed on paper, or if the report is filed by diskette accompanied by the signed and notarized cover sheet.

Name of Office Sought - If filed by a candidate or candidate's committee, indicate office sought.

Date of Election - If this is a pre- or post-primary/election report, indicate the date of the primary or election,

District Number - If filed by a candidate or candidate's committee, indicate district in which candidate is seeking office.

Office Code, Party Code and County Code - If filed by candidate or candidate's committee, refer to code charts at the back of this report form. Enter the corresponding code letters for the office sought and the political party of the candidate; enter the corresponding code number for the county of residence of the candidate. Candidates for local offices who file only with the County Board of Elections should enter Office Code OTH for Other Offices.

Summary of Receipts and Expenditures | Enter the appropriate dates of the reporting period covered.

Amount Brought Forward From Last Report (Item A). The balance, if any, as of the first day of the reporting period. For committees, it is the amount reported as the ending cash balance on the previous report filed, if any.

Items B through G - See detailed instructions on each corresponding schedule.

Affidavit Section - Must be sworn to by the filer acknowledging the accuracy of the report (Part I). On reports filed by a candidate's authorized committee, the candidate must sign an additional affidavit (Part II).

Page Number - Calculate the total number of pages in the completed report and indicate on top of cover page. Subsequent pages should be righthered consecutively.

Reports Filed on Diskette: The cover page must accompany all filings, including diskette filings. Diskette filings must also meet the technical specifications of the Department. These specifications are available at www.dos.state.pa.us or by contacting the Bureau.

#### SCHEDULE I

#### CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page - provides a summary of all monetary contributions and receipts during the reporting period.

Item 1. Uniterwized Contributions and Receipts represents the total amount of contributions and receipts of \$50.00 or less in the aggregate per contributor received during the reporting period. Items 2, 3 and 4: Enter the total for each section from the corresponding schedules in the report (Part A, Part B, Part C, Part D and Part E).

Enter the total from Schedule I on the Report Cover Page, Item B.

Definition of Contribution: Any payment, gift, subscription, assessment, contract, payment for services, dues, loan, forbearance, advance or deposit of money or any valuable thing, to a candidate or political committee made for the ourpose of influencing any election in this Commonwealth or for paying debts incurred by or for a candidate or committee before or after any election. "Contribution" shall also include the purchase of tickets for events such as dinners, luncheons, rallies and other fund-raising events; the granting of discounts or rebates by television and radio stations and newspapers not extended on an equal basis to all candidates for the same office; and any payments provided for the benefit of any candidate, including any payments for the services of any person serving as an agent of a candidate or committee by a person other than the candidate or committee or a person whose expenditures the candidate or committee must report under the act. The word "contribution" includes any receipt or use of anything of value received by a political committee from another political committee and also includes any return on investments by a political committee. (See 25 P.S. § 324.1)

#### Instructions for Reporting Contributions

The aggregate total of contributions from an individual contributor within a reporting period determines which part of the report form should be used to disclose a contribution or receipt. The form is designed to list the dates and amounts of as many as three separate contributions from the same source in one line item.

Contributions and receipts of \$50 or lass, per contributor, during the reporting period, need not be itemized on the report. The cotol amount of all unitemized contributions should appear on Schedule I, Contributions and Receipts Detailed Summary Page, Line 1. A record must be kept of the receipt dates of contributions and the names and addresses of each person from whom a contribution of over \$10 has been received.

Contributions and receipts over \$50 to \$250 - report the name of the contributor, mailing address, amount and date received on Schedule I, Part A, "Contributions Received from Political Committees," or Part B "All Other Contributions."

Contributions and receipts over \$250 - report the name of the contributor, mailing address, occupation, employer's name and address amount and date received on Schedule I, Part C, "Contributions Received from Political Committees," or Part D, "All Other Contributions."

Receipts - Use Part E, "Other Receipts" to report all other monetary receipts or income; e.g. refunds received, interest income, returned checks and prior expenditures that were returned to the filer during the reporting period.

Address In all Parts a complete address, including zip code, must be provided. Space is provided for the Zip Code Plus Four The State block should be completed with the U.S. Postal Service's standard two-letter abbreviation, such as PA for Pennsylvania.

Date - all date blocks in the report must be completed with eight digits. For instance, March 24, 2000 would appear as 03 24 2000.

Total - of each Part should be transferred to the appropriate section on the Schedule I, "Contributions and Receipts Detailed Summary Page" (Page 2 of the report form).

Occupation and Employer - Part D, which ests individuals who have contributed over \$250, also requires the occupation and name and address of the employer of the contributor. Report the principal place of ousness of any contributor who is self-employed.

#### SCHEDULE II

#### IN-KIND CONTRIBUTIONS RECEIVED

Detailed Summary Page - provides a summary of all in-kind contributions and valuable things received during the reporting period

Item 1 Unitemized In-Kind Contributions Received represents the total value of in-kind contributions of \$50.00 or less, in the aggregate per contributor, received during the reporting period.

items 2 and 3: Enter the total for each section from the corresponding schodules in the report (Part F and Part G).

Enter the page total on Page 1, Report Cover Page, Item F.

Part F and Part G - Use these Parts to itemize in kind contributions from individuals or political committees according to the dollar value of the contribution. The form is designed to list the dates and amounts of as many as three separate in kind contributions from the same source in one line item. The amount is equal to the current market value of the item or service contributed.

Totals of Parts F and G should be transferred to the appropriate section on the Schedule II Detailed Summary Page.

#### SCHEDULE III

#### **EXPENDITURES**

Definition of Expenditure: The payment, distribution, loan or advancement of money or any valuable thing by a candidate, political committee or other person for the purpose of influencing the outcome of an election; the payment, distribution, loan, advance or transfer of money or other valuable thing between or among political committees; the providing of a service or other valuable thing for the purpose of influencing the outcome of a nomination or election of any person to any public office to be voted for in this Commonwealth; or the payment or providing of money or other valuable thing by any person other than a candidate or political committee, to compensate any person for services rendered to a candidate or political committee. (See 25 P.S. §3241)

#### Instructions for Reporting Expenditures

Pursuant to state law, the Statement of Expenditures requires the filer to report the purposes for which funds were expended, the name and address of the entity to whom the expenditure was made, and the amount and date of each expenditure.

Vouchers for all expenditures over \$25.00 must be retained by the candidate or committee treasurer and shall be available for public inspection or copying. Filers are not required to submit vouchers with reports; however, vouchers must be retained for a period of three years.

Transactions between a candidate and his/her committee should be recorded on both the candidate's and committee's reports. For example, if a candidate contributes to or loans the committee money, the amount should appear on the candidate's report as an expenditure and on the committee's report as a receipt. A loan must also be reported by the recipient on the Statement of Unpaid Debts (Schedule IV).

#### SCHEDULE IV

#### STATEMENT OF UNPAID DEBTS

All unpaid debts and obligations which are outstanding at the end of the reporting period must be reported. If a debt is incurred in one reporting period and not repaid, every report filed must continue to show the outstanding debt, even though there was no activity during the current reporting period.

A dabt owed to an individual may be forgiven. A copy of the letter of forgiveness from the individual to the committee must accompany the report filed by the committee in the reporting period in which the dabt was forgiven. A dobt that is forgiven is considered a contribution to the committee. Such contributions from corporations or unincorporated associations are prohibited by the Election Code.

#### REPORT FILING DEADLINES

Sixth Tuesday Pre-Election - Reporting period closes 50 days prior to election day. Filed only by candidates for Statewide office and political committees/lobbyists supporting such candidates.

Second Friday Pre Election - Reporting period closes 15 days prior to election day. Filed by all candidates for nomination or election and political committees lobbyists supporting such candidates.

Thirty Day Post-Election - Reporting period closes 20 days after election day. File 30 days after election day. Filed by all candidates for nomination or election and political committees/lobbyists supporting such candidates.

Annual Report - Reporting period closes December 31. File by January 31 of the year following the reporting period. Filed by all candidates for nomination or election, political committees and contributing lobbyists.

Political committees required to file pre-election reports must also file post-election reports.

Postmarks - are acceptable as proof of timely filing where report is sent by first class mail and postmarked by the U.S. Postal Service no later than the day prior to the filing deadline.

Late filing fee - A late filing fee of \$10.00 for each day or part of the day (excluding Saturdays, Sundays and holidays) that the report is overdue, plus an additional fee of \$10.00 for the first six days that a report is overdue will be assessed.

#### County Code Table:

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01	Adams	24	Elk	47	Montour
02	Allegheny	25	Erie	48	Northampton
03	Armstrong	26	Fayette	49	Northumberland
04	Beaver	27	Franklin	50	Perry
05	Bedford	28	Forest	51	Philadelphia
06	Berks	29	Fulton	52	Pike
07	9lair	30	Greene	53	Potter
80	Bradford	31	Huntingdon	54	Schuylkill
09	Bucks	32	Indiana	55	Snyder
10	Butler	33	Jafferson	56	Somerset
11	Cambria	34	Juniata	57	Sullivan
12	Cameron	35	Lackawanna	58	Susquehanna
13	Carbon	36	Lancaster	59	Tioga
14	Centre	37	Lawrence	60	Union
15	Chester	38	Lebanon	61	Venango
16	Clarion	39	Lehigh	62	Warren
17	Clearfie'd	40	Luzerne	63	Washington
18	Clinton	41	Lycoming	64	Wayne
19	Columbia	42	McKean	65	Westmoreland
20	Crawford	43	Mercer	66	Wyoming
21	Cumberland	44	Mifflin	67	York
22	Dauphin	45	Monroe		
23	Delaware	46	Montgomery		

#### Party Code Table:

REP	Republican Party
DEM	Democratic Party
CST	Constitutional Party
LIB	Libertarian Party
REF	Reform Party
HIO	Other

#### Office Code Table:

UTTICE	Code Table:
GOV	Governor
LTG	Lieutenant Governor
ATT	Attorney General
AUD	Auditor General
TRE	State Treasurer
SPM	Justice of the Supreme Court
SPR	Judge of the Superior Court
CCJ	Judge of the Commonwealth Court
STS	Senator in the General Assembly
STH	Representative in the General
	Assembly
CP.J	Judge of the Court of Common Pleas
MCJ	Judge of the Municipal Court
TCJ	Judge of the Traffic Court
HTO	Other (Candidates for local offices
	who file only with the County
	Board of Elections)