

Commonwealth of Pennsylvania  
**CAMPAIGN FINANCE REPORT**

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

Filer Identification Number: <input type="checkbox"/>		Report Filed By: <input type="checkbox"/>		CANDIDATE <sup>1.</sup>		COMMITTEE <sup>2.</sup> <input checked="" type="checkbox"/>		LOBBYIST <sup>3.</sup>		
Name of Filing Committee, Candidate or Lobbyist: Pungo For Allentown										
Street Address: 1838 Chew Street										
City: Allentown				State: PA		Zip Code: 18104 - 5524				
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY <sup>1.</sup>		2ND FRIDAY PRE-PRIMARY <sup>2.</sup> <input checked="" type="checkbox"/>		30 DAY POST PRIMARY <sup>3.</sup>		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>			
	6TH TUESDAY PRE-ELECTION <sup>4.</sup>		2ND FRIDAY PRE-ELECTION <sup>5.</sup>		30 DAY POST ELECTION <sup>6.</sup>		TERMINATION REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>			
	ANNUAL REPORT <sup>7.</sup>		YEAR: 2025		FILING METHOD ( ) CHECK ONE <input type="checkbox"/>		PAPER: <input checked="" type="checkbox"/> DISKETTE <input type="checkbox"/>			
Name of Office Sought by Candidate: Allentown City Council				DATE OF ELECTION MO. DAY YEAR 05 20 2025			District Number	Office Code OTH	Party Code DEM	County Code 39
(SEE INSTRUCTIONS FOR CODES)										
Summary of Receipts and Expenditures from: <input type="checkbox"/>			MO. DAY YEAR 02 01 2025			To MO. DAY YEAR 05 05 2025			FOR OFFICE USE ONLY	
A. Amount Brought Forward From Last Report				\$		0.00				
B. Total Monetary Contributions and Receipts (From Schedule I)				\$		17,760.00				
C. Total Funds Available (Sum of Lines A and B)				\$		17,760.00				
D. Total Expenditures (From Schedule III)				\$		9,135.40				
E. Ending Cash Balance (Subtract Line D from Line C)				\$		8,624.60				
F. Value of In-Kind Contributions Received (From Schedule II)				\$		0.00				
G. Unpaid Debts and Obligations (From Schedule IV)				\$		42.56				

**AFFIDAVIT OF ELECTION**

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules, papers, computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 8th day of May 2025

Walter G. Shipman  
 Signature

My commission expires August 28 2027  
 MO. DAY YR.

[Signature]  
 Signature of Person Submitting Report  
JONAS SHIPMAN  
 Printed Name

610 597-0407  
 Area Code Daytime Telephone Number

Notary Public  
 Susan G. Shipman, Notary Public  
 Lehigh County  
 Commission Expires August 28, 2027  
 Commission Number 1438117

**PART II - If this is a report of a Candidate's Authorized Committee, candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, No. 320) as amended.

Sworn to and subscribed before me this 8th day of May 2025

Walter G. Shipman  
 Signature

My commission expires August 28 2027  
 MO. DAY YR.

[Signature]  
 Signature of Candidate  
CRISTIAN PUNGO-POLLIN  
 Printed Name

484 350-9596  
 Area Code Daytime Telephone Number

Notary Public  
 Susan G. Shipman, Notary Public  
 Lehigh County  
 Commission Expires August 28, 2027  
 Commission Number 1381117

**CONTRIBUTIONS AND RECEIPTS****Detailed Summary Page**

Name of Filing Committee or Candidate Pungo For Allentown	Reporting Period From 02/01/2025 To 05/05/2025
--------------------------------------------------------------	---------------------------------------------------

<b>1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR</b>	
TOTAL for the Reporting Period (1)	\$ 110.00

<b>2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)</b>	
Contributions Received from Political Committees (Part A)	\$ 0.00
All Other Contributions (Part B)	\$ 650.00
TOTAL for the Reporting Period (2)	\$ 650.00

<b>3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)</b>	
Contributions Received from Political Committees (Part C)	\$ 10,500.00
All Other Contributions (Part D)	\$ 6,500.00
TOTAL for the Reporting Period (3)	\$ 17,000.00

<b>4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)</b>	
TOTAL for the Reporting Period (4)	\$ 0.00

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	\$ 17,760.00
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PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate <b>Pungo For Allentown</b>	Reporting Period From <b>02/01/2025</b> To <b>05/05/2025</b>
---------------------------------------------------------------------	-----------------------------------------------------------------

			DATE			AMOUNT
			MO.	DAY	YEAR	
Full Name of Contributing Committee						\$
Mailing Address						\$
City	State	Zip Code (Plus 4)				\$
		-				
Full Name of Contributing Committee						\$
Mailing Address						\$
City	State	Zip Code (Plus 4)				\$
		-				
Full Name of Contributing Committee						\$
Mailing Address						\$
City	State	Zip Code (Plus 4)				\$
		-				
Full Name of Contributing Committee						\$
Mailing Address						\$
City	State	Zip Code (Plus 4)				\$
		-				
Full Name of Contributing Committee						\$
Mailing Address						\$
City	State	Zip Code (Plus 4)				\$
		-				
Full Name of Contributing Committee						\$
Mailing Address						\$
City	State	Zip Code (Plus 4)				\$
		-				
Full Name of Contributing Committee						\$
Mailing Address						\$
City	State	Zip Code (Plus 4)				\$
		-				
Full Name of Contributing Committee						\$
Mailing Address						\$
City	State	Zip Code (Plus 4)				\$
		-				

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

PAGE TOTAL	0.00
\$	0.00

# 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 Candidate <b>Pungo For Allentown</b>	Reporting Period From <b>02/01/2025</b> To <b>05/05/2025</b>
---------------------------------------------------------------------	-----------------------------------------------------------------

				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributor <b>Alan Tjeltveit</b>				2	25	2025	\$ 100.00
Mailing Address <b>124 S Madison Street</b>				MO.	DAY	YEAR	\$
City <b>Allentown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18102 -</b>		MO.	DAY	YEAR	\$
Full Name of Contributor <b>Eric R Weiss</b>				2	26	2025	\$ 100.00
Mailing Address <b>404 S Blount Street 106</b>				MO.	DAY	YEAR	\$
City <b>Madison</b>	State <b>WI</b>	Zip Code (Plus 4) <b>53703 -</b>		MO.	DAY	YEAR	\$
Full Name of Contributor <b>Debora Roberson</b>				2	27	2025	\$ 250.00
Mailing Address <b>2930 West Liberty Street</b>				MO.	DAY	YEAR	\$
City <b>Allentown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18104 -</b>		MO.	DAY	YEAR	\$
Full Name of Contributor <b>Jeff Glaizer</b>				3	18	2025	\$ 100.00
Mailing Address <b>2915 Parkway Blvd</b>				MO.	DAY	YEAR	\$
City <b>Allentown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18104 -</b>		MO.	DAY	YEAR	\$
Full Name of Contributor <b>Gwin Krouse</b>				4	10	2025	\$ 100.00
Mailing Address <b>2812 Crest Avenue South</b>				MO.	DAY	YEAR	\$
City <b>Allentown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18104 -</b>		MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.	<b>PAGE TOTAL</b> \$ 650.00
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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.

Name of Filing Committee or Candidate <b>Pungo For Allentown</b>	Reporting Period From <u>02/01/2025</u> To <u>05/05/2025</u>
---------------------------------------------------------------------	-----------------------------------------------------------------

	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributing Committee <b>Lehigh Valley Association of Realtors</b>	3	25	2025	\$ 5,000.00
Mailing Address <b>10 South Commerce Way</b>	MO.	DAY	YEAR	\$
City <b>Bethlehem</b>	MO.	DAY	YEAR	\$
State <b>PA</b>				
Zip Code (Plus 4) <b>18017 -</b>				
Full Name of Contributing Committee <b>Friends of Nick Miller</b>	4	09	2025	\$ 2,500.00
Mailing Address <b>PO BOX 1799</b>	MO.	DAY	YEAR	\$ 1,000.00
City <b>Allentown</b>	MO.	DAY	YEAR	\$
State <b>PA</b>				
Zip Code (Plus 4) <b>18105 -</b>				
Full Name of Contributing Committee <b>Allentown Firefighters IAFF Local 302</b>	4	10	2025	\$ 1,000.00
Mailing Address <b>723 West Chew Street, Suite 302</b>	MO.	DAY	YEAR	\$
City <b>Allentown</b>	MO.	DAY	YEAR	\$
State <b>PA</b>				
Zip Code (Plus 4) <b>18102 -</b>				
Full Name of Contributing Committee <b>Friends of Peter Schweyer</b>	4	12	2025	\$ 250.00
Mailing Address <b>PO BOX 4364</b>	MO.	DAY	YEAR	\$ 750.00
City <b>Allentown</b>	MO.	DAY	YEAR	\$
State <b>PA</b>				
Zip Code (Plus 4) <b>18105 -</b>				
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4) <b>-</b>				
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4) <b>-</b>				
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4) <b>-</b>				

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

PAGE TOTAL	\$ 10,500.00
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**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 <b>Pungo For Allentown</b>	Reporting Period From <b>02/01/2025</b> To <b>05/05/2025</b>
---------------------------------------------------------------------	-----------------------------------------------------------------

				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributor <b>Eric &amp; Tara Gerencser</b>				4	1	2025	\$ 2,500.00
Mailing Address <b>160 Baron Road</b>				MO.	DAY	YEAR	\$
City <b>Wind Gap</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18091 -</b>		MO.	DAY	YEAR	\$
Employer Name <b>J.L. Ulrich Co</b>				Occupation <b>Construction</b>			
Employer Mailing Address/Principal Place of Business <b>1228 Trexlertown Road, Trexlertown, PA</b>							
Full Name of Contributor <b>Raymond G. Lahoud</b>				4	2	2025	\$ 2,500.00
Mailing Address <b>2063 Flint Hill Road</b>				MO.	DAY	YEAR	\$
City <b>Upper Saucon Township</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18036 -</b>		MO.	DAY	YEAR	\$
Employer Name <b>Lahoud Law</b>				Occupation <b>Immigration Attorney</b>			
Employer Mailing Address/Principal Place of Business <b>600 Hamilton Street, Allentown, PA 18101</b>							
Full Name of Contributor <b>Mark Jajndl</b>				4	16	2025	\$ 1,500.00
Mailing Address <b>1964 Diehl Court</b>				MO.	DAY	YEAR	\$
City <b>Allentown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18104 -</b>		MO.	DAY	YEAR	\$
Employer Name <b>Jajndl Enterprises</b>				Occupation <b>Entrepreneur</b>			
Employer Mailing Address/Principal Place of Business <b>615 Waterfront Drive, Suite 402, Allentown PA, 18102</b>							
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							

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

PAGE TOTAL	<b>\$ 6,500.00</b>
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## 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 <b>Pungo For Allentown</b>	Reporting Period From <b>02/01/2025</b> To <b>05/05/2025</b>
---------------------------------------------------------------------	-----------------------------------------------------------------

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

<b>Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.</b>	<b>PAGE TOTAL</b>
	<b>\$ 0.00</b>

# 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 <b>Pungo For Allentown</b>	Reporting Period From <u>02/01/2025</u> To <u>05/05/2025</u>
---------------------------------------------------------------------	-----------------------------------------------------------------

<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>		
<b>TOTAL for the Reporting Period</b>	(1)	<b>\$ 0.00</b>

<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>		
<b>TOTAL for the Reporting Period</b>	(2)	<b>\$ 0.00</b>

<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>		
<b>TOTAL for the Reporting Period</b>	(3)	<b>\$ 0.00</b>

<b>TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD</b> <i>(Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)</i>	<b>\$</b>	<b>0.00</b>
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**SCHEDULE II  
PART F  
IN-KIND CONTRIBUTIONS RECEIVED**

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate <b>Pungo For Allentown</b>	Reporting Period From <u>02/01/2025</u> To <u>05/05/2025</u>
---------------------------------------------------------------------	-----------------------------------------------------------------

				DATE			AMOUNT
Full Name of Contributor	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State				Zip Code (Plus 4)			
				-			
Description of Contribution:							
Full Name of Contributor	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State				Zip Code (Plus 4)			
				-			
Description of Contribution:							
Full Name of Contributor	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State				Zip Code (Plus 4)			
				-			
Description of Contribution:							
Full Name of Contributor	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State				Zip Code (Plus 4)			
				-			
Description of Contribution:							
Full Name of Contributor	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State				Zip Code (Plus 4)			
				-			
Description of Contribution:							
Full Name of Contributor	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State				Zip Code (Plus 4)			
				-			
Description of Contribution:							
Full Name of Contributor	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State				Zip Code (Plus 4)			
				-			
Description of Contribution:							

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL	
\$	0.00

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

Name of Filing Committee or Candidate <b>Pungo For Allentown</b>	Reporting Period From <u>02/01/2025</u> To <u>05/05/2025</u>
---------------------------------------------------------------------	-----------------------------------------------------------------

				DATE			AMOUNT
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAGE TOTAL \$ <span style="font-size: 1.2em;">0.00</span>
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## SCHEDULE III

## STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Pungo For Allentown	Reporting Period From 02/01/2025 To 05/05/2025
--------------------------------------------------------------	---------------------------------------------------

To Whom Paid	MO.	DAY	YEAR	Amount
Target Corp	2	24	2025	\$ 114.85
Mailing Address 1600 N Cedar Crest	Description of Expenditure Event supplies for campaign kickoff event			
City Allentown	State PA	Zip Code (Plus 4) 18104 -		
To Whom Paid Lehigh Valley Print Center	3	05	2025	\$ 122.96
Mailing Address 1701 Union BLVD STE 114	Description of Expenditure Palm Card Order			
City Allentown	State PA	Zip Code (Plus 4) 18109 -		
To Whom Paid Lehigh Valley Print Center	3	28	2025	\$ 339.73
Mailing Address 1701 Union BLVD STE 114	Description of Expenditure Yard Sign Order			
City Allentown	State PA	Zip Code (Plus 4) 18109 -		
To Whom Paid Lehigh Valley Print Center	3	31	2025	\$ 61.48
Mailing Address 1701 Union BLVD STE 114	Description of Expenditure Palm Card Order			
City Allentown	State PA	Zip Code (Plus 4) 18109 -		
To Whom Paid Lehigh Valley Print Center	4	04	2025	\$ 2,074.17
Mailing Address 1701 Union BLVD STE 114	Description of Expenditure Yard signs, palm cards and magnet order			
City Allentown	State PA	Zip Code (Plus 4) 18109 -		
To Whom Paid Lehigh Valley Print Center	4	28	2025	\$ 2,673.60
Mailing Address 1701 Union BLVD STE 114	Description of Expenditure 1st Mailer			
City Allentown	State PA	Zip Code (Plus 4) 18109 -		
To Whom Paid Lehigh Valley Print Center	5	02	2025	\$ 2,673.60
Mailing Address 1701 Union BLVD STE 114	Description of Expenditure 2nd Mailer			
City Allentown	State PA	Zip Code (Plus 4) 18109 -		
To Whom Paid City of Allentown	4	30	2025	\$ 25.98
Mailing Address 435 Hamilton Street	Description of Expenditure Right of way signage permit			
City Allentown	State PA	Zip Code (Plus 4) 18101 -		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$ 8,086.37

## SCHEDULE III

## STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Pungo For Allentown	Reporting Period From 02/01/2025 To 05/05/2025
--------------------------------------------------------------	---------------------------------------------------

To Whom Paid GoDaddy	MO. 2	DAY 03	YEAR 2025	Amount \$	12.17
Mailing Address 2155 E GoDaddy Way	Description of Expenditure Website Domain Purchase				
City Tempe	State AZ	Zip Code (Plus 4) 85284 -			
To Whom Paid Wix.com	MO. 2	DAY 07	YEAR 2025	Amount \$	38.17
Mailing Address Yunitsman 5	Description of Expenditure Website Hosting Service				
City Tel Aviv, Israel	State	Zip Code (Plus 4) -			
To Whom Paid Wix.com	MO. 3	DAY 10	YEAR 2025	Amount \$	38.17
Mailing Address Yunitsman 5	Description of Expenditure Website Hosting Service				
City Tel Aviv, Israel	State	Zip Code (Plus 4) -			
To Whom Paid Wix.com	MO. 3	DAY 14	YEAR 2025	Amount \$	8.90
Mailing Address Yunitsman 5	Description of Expenditure Website Email Hosting Fee				
City Tel Aviv, Israel	State	Zip Code (Plus 4) -			
To Whom Paid Wix.com	MO. 4	DAY 08	YEAR 2025	Amount \$	38.17
Mailing Address Yunitsman 5	Description of Expenditure Website Hosting Service				
City Tel Aviv, Israel	State	Zip Code (Plus 4) -			
To Whom Paid Wix.com	MO. 4	DAY 14	YEAR 2025	Amount \$	8.90
Mailing Address Yunitsman 5	Description of Expenditure Website Email Hosting Fee				
City Tel Aviv, Israel	State	Zip Code (Plus 4) -			
To Whom Paid inkwell.	MO. 2	DAY 12	YEAR 2025	Amount \$	150.00
Mailing Address 1125 Hamilton Street	Description of Expenditure Event Deposit				
City Allentown	State PA	Zip Code (Plus 4) 18101 -			
To Whom Paid inkwell.	MO. 3	DAY 04	YEAR 2025	Amount \$	150.00
Mailing Address 1125 Hamilton Street	Description of Expenditure Event Balance				
City Allentown	State PA	Zip Code (Plus 4) 18101 -			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$ 444.48

## SCHEDULE III

## STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Pungo For Allentown	Reporting Period From 02/01/2025 To 05/05/2025
--------------------------------------------------------------	---------------------------------------------------

To Whom Paid Microsoft Corporation	MO.	DAY	YEAR	Amount
	3	25	2025	\$ 13.25
Mailing Address 1 Microsoft Way	Description of Expenditure Doc Management Software Fee			
City Redmond	State WA	Zip Code (Plus 4) 98052 -		
To Whom Paid Microsoft Corporation	MO.	DAY	YEAR	Amount
	4	28	2025	\$ 13.25
Mailing Address 1 Microsoft Way	Description of Expenditure Doc Management Software Fee			
City Redmond	State WA	Zip Code (Plus 4) 98052 -		
To Whom Paid Truist Financial	MO.	DAY	YEAR	Amount
	4	21	2025	\$ 1.75
Mailing Address 214 N Tryon St Ste 3	Description of Expenditure Bank Service Fee for April			
City Charlotte	State NC	Zip Code (Plus 4) 28202 -		
To Whom Paid Staples	MO.	DAY	YEAR	Amount
	4	24	2025	\$ 70.98
Mailing Address 4628 Broadway Suite A	Description of Expenditure Mailing Supplies			
City Allentown	State PA	Zip Code (Plus 4) 18104 -		
To Whom Paid ActBlue	MO.	DAY	YEAR	Amount
	3	01	2025	\$ 18.50
Mailing Address PO Box 441146	Description of Expenditure Service Fee for Donation Processing			
City Somerville	State MA	Zip Code (Plus 4) 02144-0031		
To Whom Paid ActBlue	MO.	DAY	YEAR	Amount
	4	01	2025	\$ 3.90
Mailing Address PO Box 441146	Description of Expenditure Service Fee for Donation Processing			
City Somerville	State MA	Zip Code (Plus 4) 02144-0031		
To Whom Paid ActBlue	MO.	DAY	YEAR	Amount
	5	01	2025	\$ 42.92
Mailing Address PO Box 441146	Description of Expenditure Service Fee for Donation Processing			
City Somerville	State MA	Zip Code (Plus 4) 02144-0031		
To Whom Paid Meta Platforms, Inc.	MO.	DAY	YEAR	Amount
	4	10	2025	\$ 9.00
Mailing Address 1 Meta Way	Description of Expenditure Social Media Ads			
City Menlo Park	State CA	Zip Code (Plus 4) 94025 -		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL	\$ 173.55
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## SCHEDULE III

## STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Pungo For Allentown	Reporting Period From 02/01/2025 To 05/05/2025
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To Whom Paid Meta Platforms, Inc.	MO. 4	DAY 11	YEAR 2025	Amount \$ 16.00
Mailing Address 1 Meta Way	Description of Expenditure Social Media Ads			
City Menlo Park	State CA	Zip Code (Plus 4) 94025 -		
To Whom Paid Meta Platforms, Inc.	MO. 4	DAY 14	YEAR 2025	Amount \$ 30.00
Mailing Address 1 Meta Way	Description of Expenditure Social Media Ads			
City Menlo Park	State CA	Zip Code (Plus 4) 94025 -		
To Whom Paid Meta Platforms, Inc.	MO. 4	DAY 15	YEAR 2025	Amount \$ 27.00
Mailing Address 1 Meta Way	Description of Expenditure Social Media Ads			
City Menlo Park	State CA	Zip Code (Plus 4) 94025 -		
To Whom Paid Meta Platforms, Inc.	MO. 4	DAY 18	YEAR 2025	Amount \$ 30.00
Mailing Address 1 Meta Way	Description of Expenditure Social Media Ads			
City Menlo Park	State CA	Zip Code (Plus 4) 94025 -		
To Whom Paid Meta Platforms, Inc.	MO. 4	DAY 21	YEAR 2025	Amount \$ 33.00
Mailing Address 1 Meta Way	Description of Expenditure Social Media Ads			
City Menlo Park	State CA	Zip Code (Plus 4) 94025 -		
To Whom Paid Meta Platforms, Inc.	MO. 4	DAY 24	YEAR 2025	Amount \$ 37.00
Mailing Address 1 Meta Way	Description of Expenditure Social Media Ads			
City Menlo Park	State CA	Zip Code (Plus 4) 94025 -		
To Whom Paid Meta Platforms, Inc.	MO. 4	DAY 28	YEAR 2025	Amount \$ 87.00
Mailing Address 1 Meta Way	Description of Expenditure Social Media Ads			
City Menlo Park	State CA	Zip Code (Plus 4) 94025 -		
To Whom Paid Meta Platforms, Inc.	MO. 4	DAY 30	YEAR 2025	Amount \$ 51.00
Mailing Address 1 Meta Way	Description of Expenditure Social Media Ads			
City Menlo Park	State CA	Zip Code (Plus 4) 94025 -		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$ 311.00

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <b>Pungo For Allentown</b>	Reporting Period From <u>02/01/2025</u> To <u>05/05/2025</u>
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To Whom Paid <b>Meta Platforms, Inc.</b>	MO. <b>5</b>	DAY <b>02</b>	YEAR <b>2025</b>	Amount <b>\$ 57.00</b>
Mailing Address <b>1 Meta Way</b>		Description of Expenditure <b>Social Media Ads</b>		
City <b>Menlo Park</b>	State <b>CA</b>	Zip Code (Plus 4) <b>94025 -</b>		
To Whom Paid <b>Meta Platforms, Inc.</b>	MO. <b>5</b>	DAY <b>04</b>	YEAR <b>2025</b>	Amount <b>\$ 63.00</b>
Mailing Address <b>1 Meta Way</b>		Description of Expenditure <b>Social Media Ads</b>		
City <b>Menlo Park</b>	State <b>CA</b>	Zip Code (Plus 4) <b>94025 -</b>		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) <b>-</b>		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) <b>-</b>		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) <b>-</b>		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) <b>-</b>		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) <b>-</b>		
To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) <b>-</b>		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

<b>PAGE TOTAL</b>	<b>\$ 120.00</b>
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## 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.

Name of Filing Committee or Candidate <b>Pungo For Allentown</b>	Reporting Period From <b>02/01/2025</b> To <b>05/05/2025</b>
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Name of Creditor <b>Genaro Robles Jr.</b>				Outstanding Balance of Debt \$ <b>42.56</b>	
Mailing Address <b>513 N 21st Street</b>	DATE DEBT INCURRED	MO. <b>2</b>	DAY <b>25</b>	YEAR <b>2025</b>	
City <b>Allentown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18104-</b>			

Description of Debt  
**Unpaid campaign expense for purchasing kickoff event supplies**

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)			
Description of Debt					

Description of Debt

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)			
Description of Debt					

Description of Debt

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)			
Description of Debt					

Description of Debt

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)			
Description of Debt					

Description of Debt

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)			
Description of Debt					

Description of Debt

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

PAGE TOTAL	\$ <b>42.56</b>
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