

CAMPAIGN FINANCE REPORT

PAGE 1 OF 11

(COVER PAGE)

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

Filer Identification Number: 1		Report Filed By: 1		CANDIDATE X		COMMITTEE 2		LOBBYIST 3		
Name of Filing Committee, Candidate or Lobbyist: Committee to elect Daniel A. Buglio										
Street Address: 1814 W. Pennsylvania Street										
City: Allentown				State: PA		Zip Code: 18104				
TYPE OF REPORT (place X to the right of report type)	8TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST PRIMARY	3.	AMENDMENT REPORT?	YES	NO	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST ELECTION	6.	TERMINATION REPORT?	YES	NO	
	ANNUAL REPORT	7.	YEAR		FILING METHOD () CHECK ONE		PAPER	DISKETTE		
Name of Office Sought by Candidate:					DATE OF ELECTION		District Number	Office Code	Party Code	
ALLENTOWN CITY COUNCIL					5 16 2017					
							(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:					MO. DAY YEAR		FOR OFFICE USE ONLY			
					9 20 2016		12 31 2016			
A. Amount Brought Forward From Last Report					\$		0			
B. Total Monetary Contributions and Receipts (From Schedule II)					\$		1,000.00			
C. Total Funds Available (Sum of Lines A and B)					\$		1,000.00			
D. Total Expenditures (From Schedule III)					\$		911.90			
E. Ending Cash Balance (Subtract Line D from Line C)					\$		188.10			
F. Value of In-Kind Contributions Received (From Schedule II)					\$		0			
G. Unpaid Debts and Obligations (From Schedule I)					\$		0			

AFFIDAVIT SECTION

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, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

31 day of **January** 20 **17**

Kathleen Palmer
Signature

James G. Gibbs
Signature of Person Submitting Report

JAMES G. GIBBS
Printed Name

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
MO. DAY YR. **08 2020**

610 **442-1637**
Area Code Daytime Telephone Number

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

31 day of **January** 20 **17**

Kathleen Palmer
Signature

Daniel A. Buglio
Signature of Candidate

484 **239 9571**
Area Code Daytime Telephone Number

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
MO. DAY YR. **08 2020**

KATHLEEN PALMER, Notary Public
City of Allentown, Lehigh County
My Commission Expires April 8, 2020

Department of State Bureau of Commissions, Elections and Legislation
210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280

CONTRIBUTIONS AND RECEIPTS**Detailed Summary Page**

Name of Filing Committee or Candidate

Committee to elect Daniel A. Buglio

Reporting Period

From 9/20/16 To 12/31/2016

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR

TOTAL for the Reporting Period

(1)

\$

0

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)

Contributions Received from Political Committees (Part A)

\$ 100.00

All Other Contributions (Part B)

\$ 1000.00

TOTAL for the Reporting Period

(2)

\$ 1100.00

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)

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)

\$ 1100.00

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD (Add and enter amount totals from

Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)

\$ 1100.00

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 Candidate Committee to elect Daniel A. Buglio	Reporting Period From 9/20/2016 To 12/31/2016
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Full Name of Contributing Committee			DATE			AMOUNT
MO.	DAY	YEAR				
Committee to re-elect Scott M. Grim			11	16	2016	\$ 100 —
Mailing Address 646 Hanover Ave.			MO.	DAY	YEAR	\$
City Allentown	State PA	Zip Code (Plus 4) 18103-	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$

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

PAGE TOTAL

\$ 100 —

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 Candidate Citizens Committee to elect Paul A. Buglio	Reporting Period From 9/20/2016 To 12/31/2016
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				DATE			AMOUNT
Full Name of Contributor	Mailing Address	City	State	MO.	DAY	YEAR	
Kathleen & Stephen Kistler	1659 Ashby Court	Kutztown PA	PA	9	21	2016	\$ 100 —
William & Acca ngila Villa	1128 N. 18th St.	Allentown	PA	9	23	2016	\$ 50 —
Cynthia Maci	2040 Market Street	Philadelphia	PA	9	21	2016	\$ 50 —
Scott and Ann Grim	646 Hanover Ave.	Allentown	PA	9	21	2016	\$ 50 —
Anne and Peter Troiani	1142 N. 18th St	Allentown	PA	9	21	2016	\$ 50 —
Deborah A. Saeger	3004 Huron Street	Allentown	PA	9	21	2016	\$ 100 —
Judith Bullard	333 N. 10th St	Allentown	PA	9	21	2016	\$ 100 —
Stephen Libby	1814 W. Conyass St. Apt 2	Allentown	PA				\$ 80 —

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

PAGE TOTAL
\$ 550.00

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 Candidate <div style="font-size: 1.2em; font-family: cursive;">Committee to elect Daniel A. Buglio</div>	Reporting Period From <div style="font-size: 1.2em; font-family: cursive;">9/20/2016</div> To <div style="font-size: 1.2em; font-family: cursive;">12/31/2016</div>
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	DATE	AMOUNT
Full Name of Contributor	MO. DAY YEAR	\$
<div style="font-size: 1.2em; font-family: cursive;">Conor & Richard Cowen</div>	<div style="font-size: 1.2em; font-family: cursive;">9 21 2016</div>	<div style="font-size: 1.2em; font-family: cursive;">\$ 100 —</div>
<div style="font-size: 0.8em;">Mailing Address</div> <div style="font-size: 1.2em; font-family: cursive;">1600 Lehigh Parkway East</div>	<div style="font-size: 0.8em;">MO. DAY YEAR</div>	<div style="font-size: 0.8em;">\$</div>
<div style="font-size: 0.8em;">City</div> <div style="font-size: 1.2em; font-family: cursive;">Allentown</div>	<div style="font-size: 0.8em;">State</div> <div style="font-size: 1.2em; font-family: cursive;">PA</div>	<div style="font-size: 0.8em;">Zip Code (Plus 4)</div> <div style="font-size: 1.2em; font-family: cursive;">18104 -</div>
<div style="font-size: 1.2em; font-family: cursive;">Patrick A. Kitchen</div>	<div style="font-size: 1.2em; font-family: cursive;">9 21 2016</div>	<div style="font-size: 1.2em; font-family: cursive;">\$ 100 —</div>
<div style="font-size: 0.8em;">Mailing Address</div> <div style="font-size: 1.2em; font-family: cursive;">1814 W. Pennsylvania Street</div>	<div style="font-size: 0.8em;">MO. DAY YEAR</div>	<div style="font-size: 0.8em;">\$</div>
<div style="font-size: 0.8em;">City</div> <div style="font-size: 1.2em; font-family: cursive;">Allentown</div>	<div style="font-size: 0.8em;">State</div> <div style="font-size: 1.2em; font-family: cursive;">PA</div>	<div style="font-size: 0.8em;">Zip Code (Plus 4)</div> <div style="font-size: 1.2em; font-family: cursive;">18104 -</div>
<div style="font-size: 1.2em; font-family: cursive;">Eric Davis</div>	<div style="font-size: 1.2em; font-family: cursive;">9 21 2016</div>	<div style="font-size: 1.2em; font-family: cursive;">\$ 50 —</div>
<div style="font-size: 0.8em;">Mailing Address</div> <div style="font-size: 1.2em; font-family: cursive;">3707 Oakwood Trail</div>	<div style="font-size: 0.8em;">MO. DAY YEAR</div>	<div style="font-size: 0.8em;">\$</div>
<div style="font-size: 0.8em;">City</div> <div style="font-size: 1.2em; font-family: cursive;">Allentown</div>	<div style="font-size: 0.8em;">State</div> <div style="font-size: 1.2em; font-family: cursive;">PA</div>	<div style="font-size: 0.8em;">Zip Code (Plus 4)</div> <div style="font-size: 1.2em; font-family: cursive;">18104 -</div>
<div style="font-size: 1.2em; font-family: cursive;">William Anskis</div>	<div style="font-size: 1.2em; font-family: cursive;">9 21 2016</div>	<div style="font-size: 1.2em; font-family: cursive;">\$ 50 —</div>
<div style="font-size: 0.8em;">Mailing Address</div> <div style="font-size: 1.2em; font-family: cursive;">1813 W. Pennsylvania Street</div>	<div style="font-size: 0.8em;">MO. DAY YEAR</div>	<div style="font-size: 0.8em;">\$</div>
<div style="font-size: 0.8em;">City</div> <div style="font-size: 1.2em; font-family: cursive;">Allentown</div>	<div style="font-size: 0.8em;">State</div> <div style="font-size: 1.2em; font-family: cursive;">PA</div>	<div style="font-size: 0.8em;">Zip Code (Plus 4)</div> <div style="font-size: 1.2em; font-family: cursive;">18104 -</div>
<div style="font-size: 1.2em; font-family: cursive;">Frank Babashak</div>	<div style="font-size: 1.2em; font-family: cursive;">9 21 2016</div>	<div style="font-size: 1.2em; font-family: cursive;">\$ 50 —</div>
<div style="font-size: 0.8em;">Mailing Address</div> <div style="font-size: 1.2em; font-family: cursive;">1939 Sawcon Lane</div>	<div style="font-size: 0.8em;">MO. DAY YEAR</div>	<div style="font-size: 0.8em;">\$</div>
<div style="font-size: 0.8em;">City</div> <div style="font-size: 1.2em; font-family: cursive;">Bethlehem</div>	<div style="font-size: 0.8em;">State</div> <div style="font-size: 1.2em; font-family: cursive;">PA</div>	<div style="font-size: 0.8em;">Zip Code (Plus 4)</div> <div style="font-size: 1.2em; font-family: cursive;">18015 -</div>
<div style="font-size: 1.2em; font-family: cursive;">Stephanie & Cray Hanzl</div>	<div style="font-size: 1.2em; font-family: cursive;">9 21 2016</div>	<div style="font-size: 1.2em; font-family: cursive;">\$ 100 —</div>
<div style="font-size: 0.8em;">Mailing Address</div> <div style="font-size: 1.2em; font-family: cursive;">430 Virginia Lane</div>	<div style="font-size: 0.8em;">MO. DAY YEAR</div>	<div style="font-size: 0.8em;">\$</div>
<div style="font-size: 0.8em;">City</div> <div style="font-size: 1.2em; font-family: cursive;">Whitehall</div>	<div style="font-size: 0.8em;">State</div> <div style="font-size: 1.2em; font-family: cursive;">PA</div>	<div style="font-size: 0.8em;">Zip Code (Plus 4)</div> <div style="font-size: 1.2em; font-family: cursive;">18052 -</div>
<div style="font-size: 1.2em; font-family: cursive;"> </div>	<div style="font-size: 1.2em; font-family: cursive;"> </div>	<div style="font-size: 1.2em; font-family: cursive;">\$</div>
<div style="font-size: 0.8em;">Mailing Address</div> <div style="font-size: 1.2em; font-family: cursive;"> </div>	<div style="font-size: 0.8em;">MO. DAY YEAR</div>	<div style="font-size: 0.8em;">\$</div>
<div style="font-size: 0.8em;">City</div> <div style="font-size: 1.2em; font-family: cursive;"> </div>	<div style="font-size: 0.8em;">State</div> <div style="font-size: 1.2em; font-family: cursive;"> </div>	<div style="font-size: 0.8em;">Zip Code (Plus 4)</div> <div style="font-size: 1.2em; font-family: cursive;"> </div>
<div style="font-size: 1.2em; font-family: cursive;"> </div>	<div style="font-size: 1.2em; font-family: cursive;"> </div>	<div style="font-size: 1.2em; font-family: cursive;">\$</div>
<div style="font-size: 0.8em;">Mailing Address</div> <div style="font-size: 1.2em; font-family: cursive;"> </div>	<div style="font-size: 0.8em;">MO. DAY YEAR</div>	<div style="font-size: 0.8em;">\$</div>
<div style="font-size: 0.8em;">City</div> <div style="font-size: 1.2em; font-family: cursive;"> </div>	<div style="font-size: 0.8em;">State</div> <div style="font-size: 1.2em; font-family: cursive;"> </div>	<div style="font-size: 0.8em;">Zip Code (Plus 4)</div> <div style="font-size: 1.2em; font-family: cursive;"> </div>

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

PAGE TOTAL <div style="font-size: 1.5em; font-family: cursive;">\$ 450 —</div>

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

Committee to elect Daniel A. Buglio

Reporting Period

From 9/20/2016 To 12/31/2016

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

PAGE TOTAL

\$

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

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 Committee to Elect Daniel A. Buglio	Reporting Period From 9/10/2016 To 12/31/2016
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				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
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 \$ 7
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PART E
OTHER RECEIPTS

PAGE _____ OF _____

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 <i>Committee to elect Daniel A. Boyle</i>	Reporting Period From <i>9/20/2016</i> To <i>12/31/2016</i>
--	--

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						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL

\$ *0*

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

PAGE _____ OF _____

Name of Filing Committee or Candidate <i>Committee to elect Donald A. Bugiso</i>	Reporting Period From <i>9/20/2016</i> To <i>12/31/2016</i>
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				DATE			AMOUNT
Full Name of Contributor				MO.	DAY	YEAR	\$
<i>Hook Safford & Grille</i>				<i>9</i>	<i>21</i>	<i>2016</i>	<i>0</i>
Mailing Address				MO.	DAY	YEAR	\$
<i>22 N. 6th St</i>							
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
<i>Allentown</i>	<i>PA</i>	<i>18102 -</i>					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
				<i>Anonymous Fund Raiser</i>			
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
\$ *0*

SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period From <u>9/7/2016</u> To <u>12/31/2016</u>
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To Whom Paid <u>THE AM Effect LLC</u>			MO. <u>9</u> DAY <u>7</u> YEAR <u>2016</u>	Amount \$ <u>127.20</u>
Mailing Address <u>1147 W. Highland St.</u>			Description of Expenditure	
City <u>Whitehall</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18052</u>	<u>Postcards / Invites</u>	
To Whom Paid <u>THE AM Effect LLC</u>			MO. <u>9</u> DAY <u>3</u> YEAR <u>2016</u>	Amount \$ <u>100.70</u>
Mailing Address <u>1147 W. Highland Street</u>			Description of Expenditure	
City <u>Whitehall</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18052</u>	<u>BANKS.</u>	
To Whom Paid <u>Vici Castro Cakes & Catering</u>			MO. <u>9</u> DAY <u>21</u> YEAR <u>2016</u>	Amount \$ <u>683.70</u>
Mailing Address <u>1730 Hill Street</u>			Description of Expenditure	
City <u>Fogelsville</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18051</u>	<u>Food - catering</u>	
To Whom Paid			MO. DAY YEAR	Amount \$
Mailing Address			Description of Expenditure	
City	State	Zip Code (Plus 4)		
To Whom Paid			MO. DAY YEAR	Amount \$
Mailing Address			Description of Expenditure	
City	State	Zip Code (Plus 4)		
To Whom Paid			MO. DAY YEAR	Amount \$
Mailing Address			Description of Expenditure	
City	State	Zip Code (Plus 4)		
To Whom Paid			MO. DAY YEAR	Amount \$
Mailing Address			Description of Expenditure	
City	State	Zip Code (Plus 4)		
To Whom Paid			MO. DAY YEAR	Amount \$
Mailing Address			Description of Expenditure	
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL

\$ 911.90

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 <i>Committee to elect Donald A. Buglio</i>	Reporting Period From <i>9/20/2016</i> To <i>12/31/2016</i>
---	--

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

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

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

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

PAGE TOTAL

\$