Commonwealth of Pennsylvania - Campaign Finance Report

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	0.855	(Note: Th	iis iep	oremus	it be clear and	i legiole. It shot	nu be typeu	/	
Filer Identification			Repo	rt Filed B	ly Candida	te 🗸	Committee		Lobbyist
Number			(Mar	k X)					
Name of Filing Comr	mittee, Ca	ndidate or	ni	• •	Vilan	1			
Lobbyist			01	aa	Negi	\sim			
Street Address			12	06	FZ	the St			
City	0	f l l a l	1-	10	State	0.4	Zip Code	1221	
City	Be	shiehe	M		Jule	РH	Lip code	18013	5
Type of Report (Place	e x under r	report type)							
1-6 th Tuesday 2- 2	2 nd Friday	3-30 Day Post	4-6 th]	luesday	5- 2 nd Friday	6-30 Day Post	7- Annual	Special 2 nd Friday	Special 30 Day
	-Primary			ection	Pre-Election	Election		Pre-Election	Post-Election
	\mathbf{N}								
Date Of Election			Year			Amendment		Termination	
(MM/DD/YYYY)		N-111 Jaco			2017	Report		Report	
		05/16/201	7		0011	перые		•	
Summary of Receipt	ts and	From Date		To Date	3		For	Office Use Only	
Expenditures		1 thank		Det	11-1-				
		Jawapor		05/1	0//2017				
A. Amount Brought	Forward F	rom Last Report	\$	- T	21				
B. Total Monetary C	ontributio	ons and Receipts	\$		3				
(From Schedule I)				1	9				
C. Total Funds Availa	able		\$		9				
(Sum of Lines A and	B)			1	5				
D. Total Expenditure	es		\$		2				
(From Schedule III)					9				
E. Ending Cash Balar	nce		\$		9				
(Subtract Line D from				~	0				
F. Value of In-Kind C	Contributio	ons Received	\$		Ð				
(From Schedule II)				-	Ø				
G. Unpaid Debts and	d Obligatio	ons	\$		a				
(From Schedule IV)		Press	2	A. 18	Ø	104 Mer. 1992) F.			
			2007-0	No. of The	Affidavit Se	ction			

Part 1- If this is a Committee report, treasurer sign here. If this is a Candidate Tenort, candidate sign here

Keset Form	Print Form

Commonwealth of Pennsylvania - Campaign Finance Report

		1 0	
(Note: This report mu	st be clear and	l legible. It should be ty	ped)

Filer Identification	Report Filed By	Candidate	Committee		Lobbyist
Number 47-29140	676 (Mark X)	Candidate	Committee		CODDyist
Name of Filing Committee, Candidate of]		· · · · · · · · · · · · · · · · · · ·
Lobbyist	Friends	of Maa K	legrón		
Street Address			1010		
	1306 E		ant of t	1	
city Berler	en	state PA	Zip Code	1801	5
Type of Report (Place x under report type	2)				
1- 6 th Tuesday 2- 2 nd Friday 3- 30 Day Pre-Primary Pre-Primary Primary		nd Friday 6- 30 Day Po - Election Election	ost 7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
Date Of Election	Year	Amendmen		Termination	
(MM/DD/YYYY) 05/14	201 2017	Report		Report	
Summary of Receipts and From Da	te To Date		For	Office Use Only	
Expenditures	tooloul				
0.10p	2017 05/01/	2017			
A. Amount Brought Forward From Last I	Report \$				
B. Total Monetary Contributions and Re	ceipts \$ 0 / i	\wedge			
(From Schedule I)	7106	vO.			
C. Total Funds Available	S O Int				
(Sum of Lines A and B)	- JJU	0.			
D. Total Expenditures	\$ 76	1. No			
(From Schedule III) E. Ending Cash Balance	\$ 1 0 02				
(Subtract Line D from Line C)	1º 1 002	5.14			
F. Value of In-Kind Contributions Receiv	ed \$				
(From Schedule II)	- 400.0	00			
G. Unpaid Debts and Obligations	\$ 0-				
(From Schedule IV)	The second second	na na manana na sara n Na sara na sara	1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.		

Affidavit Section

SCHEDULE I Contributions and Receipts

Detailed Summary Page

Filer Identification Number 47-2914676	
1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor	
Total for the reporting period (1)	\$ 560.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)	
Contributions Received from Political Committees (Part A)	\$ A
All Other Contributions (Part B)	\$ 1 (200.00
Total for the reporting period (2)	\$ 1600.00
3. Contributions Over \$250.00 (From Part C and Part D)	
Contributions Received from Political Committees (Part C)	\$ Ð
All Other Contributions (Part D)	\$ 500.00
Total for the reporting period (3)	\$ D SOD.00 500.00
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)	
Total for the reporting period (4)	\$ 2,660.00
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)	\$

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: 47-2914676 Full Name of Contributor Date [MM/DD/YYYY] \$ Toseland Ber 200.00 <u>04/10/2017</u> Date [MM/DD/YYYY] House # Street Addres \$ Riverwoods Way 602 Citv State **Zip Code** Date [MM/DD/YYYY] \$ 18018 PN **Full Name of Contributor** Date [MM/DD/YYYY] \$ R ar baroc 03 100.00 017 House # Date [MM/DD/YYYY] \$ Street Address 54 Cent 425 City State **Zip Code** Date [MM/DD/YYYY] \$ PH 18018 em e **Full Name of Contributor** Date [MM/DD/YYYY] \$ Saba. runilla m 100.00 03/04 いり <u>73/04 | 2017</u> Date [MM/DD/YYY] Ś House # Street Address 1624 H-ve Eastin State Zip Code Date [MM/DD/YYYY] City \$ en 'A 1801 **Full Name of Contributor** Date [MM/DD/YYYY] \$ nZa GURA 100.00 $\mathcal{O}4$ Date [MM/DD/YYY] Street Address \$ House # 205 City State **Zip Code** Date [MM/DD/YYYY] \$ 18055 4 4pl PY owr **Full Name of Contributor** Date [MM/DD/YYYY] \$ nning 100.00 H <u>/3/3//20/7</u> Date [MM/DD/YYYY] **Street Address** \$ House # $\mathcal{U}.$ Gord 30 City Zip Code Date [MM/DD/YYYY] State \$ 18/04 e M OWN **Full Name of Contributor** Date [MM/DD/YYYY] \$ 100.00 ,4/1 ane 02 Date [MM/DD/YYYY] \$ Street Address House # Way Riverwoods City State **Zip Code** Date [MM/DD/YYYY] \$ 1801

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: 47-2914676 **Full Name of Contributor** Date [MM/DD/YYYY] \$ Ismae '*00.00* わろ House # Street Addres Date MM/DØ/YYYY Ś Eas 17.50 City State Zip Code Date [MM/DD/YYYY] \$ 18017 em **Full Name of Contributor** Date [MM/DD/YYYY] \$ Ro 250.00 カン 03//4/2017 Date [MM/DD/YYYY] 14 House # Street Address \$ E 35 DAV City State Zip Code Date [MM/DD/YYYY] \$ 8018 em **Full Name of Contributor** Date [MM/DD/YYYY] \$ iwind Ka 200.0D Nagra 201 House # Street Address Date [MM/DD/YYYY] Ś D City State Zip Code Date [MM/DD/YYYY] \$ 18020 em **Full Name of Contributor** Date [MM/DD/YYYY] \$ Nic 150.00 House # Street Address Date [MM/DD/YYYY] \$ U). City State Zip Code Date [MM/DD/YYYY] \$ 8018 **Full Name of Contributor** Date [MM/DD/YYY] \$ 100.00 02 Street Address House # Date [MM/DD/YYYY] \$ City **Zip Code** State Date [MM/DD/YYYY] \$ 8015 EN **Full Name of Contributor** Date [MM/DD/YYYY] \$ Marisa Paolice 100.00 ŨÐ House # Street Address Date MM/DD/YYYYI \$ 410 State Zip Code Ave City Date [MM/DD/YYYY] \$ Avondale 31 '9

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)

Filer Identification Number:	7-2914	1.71.	
		214	
Full Name of Contributor	ymond G.	Lahoud	Date [MM/DD/YYYY] \$ 04/02/2017 5DD.00
House # Street Addre	Knolle	roft st.	Dáté [MM/DD/YYYY] \$
City Easton	State P1	J Zip Code	045 <u>GMarun</u> <u>GMarun</u> <u>Soz</u> , <u>Alentown</u> , <u>PA</u> <u>18101</u>
Employer Name	Norris	, Mc/aughlin	GManu Occupation Attorney Immisti
Employer Mailing Address / Principal Place of Business	515 W.1ta	milton St. Saites	GManus Occupation Attorney Imnigoti 502, Allentown, PA 18101
Full Name of Contributor			Date [MM/DD/YYYY] \$
House # Street Addre	255		Date [MM/DD/YYYY] \$
City	State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name		<u></u>	Occupation
Employer Mailing Address / Principal Place of Business			<u></u>
Full Name of Contributor			Date [MM/DD/YYYY] \$
House # Street Addre	355		Date [MM/DD/YYYY] \$
City	State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name		I	Occupation
Employer Mailing Address / Principal Place of Business			
Full Name of Contributor			Date [MM/DD/YYYY] \$
House # Street Addre	155		Date [MM/DD/YYYY] \$
City	State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name	<u> </u>	[Occupation
Employer Mailing Address / Principal Place of Business			

SCHEDULE III Statement of Expenditures

Filer Identification Number: 47-2914676

To Whom Paid Valley Family Restaurant	Date [MM/DD/YYYY] \$
	04/30/2017 26.81
House # 28/16 Street Address Eastern Ave	Description of Expenditure
City Bethlehem State PA Code 18017	Under meeting
To Whom Pâid	Date [MM/DD/YYYY] \$
Wawa # 8037	04/28/2017 32.00
House # 741 Street Address CBroad St	Description of Expenditure
City Bethlehem State PH Zip 18018	Gar
To Whom Paid	Dâte [MM/DD/YYYY] \$
PostNet	04/14/2017 289.19
House# 1 Street Address EBroad St. Shite 130	Description of Expenditure
City Betherem State PA Zip 18018	Thank you cards
To Whom Paid Wawa #8037	Date [MM/DD/fYYY] \$
	04/10/2017 2).01 Description of Expenditure
74 E Braud St	Description of expenditure
City Bethlehem State PA Zip 18018	Bar
To Whom Paid	Date [MM/DD/YYYY] \$
4/awa #8037	04/12/2017 29.02
4/awa #8037	Date [MM/DD/YYY] \$ 04 12 2017 29.02 Description of Experiditure
4awa #8037	04/12/2017 29.02
House # 741 Street Address C Broad 37 City Bethlehen State PH Code 18018 To Whom Paild	04/12/2017 29.02 Description of Expenditure Output Date [MIM/DD/YYYY] \$
House # 741 Street Address C Broad 37 City Bethlelen State PH Code 18018 To Whom Paild EXDress Store 4102	04/12/2017 29.02 Description of Expenditure Date [MM/DD/YYYY] \$ 04/03/2017 30.00
House # 741 Street Address C Broad 37 City Bethelen State PH Code 18018 To Whom Paild	04/12/2017 29.02 Description of Expenditure Case Date [MM/DD/YYYY] \$
House # 741 Street Address C Broad St City Bethlehen State PH Code 18018 To Whom Paild EXXUN Express Store # 102 House # 1125 Street Address W Broad St	04/12/2017 29.02 Description of Expenditure Out Date [MM/DD/YYYY] \$ 04/03/2017 30.00 Description of Expenditure
House # 741 Street Address C Broad St City Bethlehem State PH Code 18018 To Whom Paild EXXUN Express Store # 102 House # 1125 Street Address W Broad St City Bethlehem State PH Code 18018 To Whom Paild	04/12/2017 29.02 Description of Expenditure Date [MM/DD/YYYY] \$ 04/03/2017 30.00
House # 741 Street Address C Broad 37 House # 741 Street Address C Broad 37 City Bethelen State PA Code 18018 To Whom Paild EXXUN Express Store # 102 House # 1125 Street Address W Broad St City Bethelen State PA Code 18018 To Whom Paild El Paisano Taguería	04/12/2017 29.02 Description of Expenditure 04/02/000 Date [MM/DD/YYYY] \$ 04/03/2017 30.00 Description/of Expenditure 04/03/2017 17.84
House # 741 Street Address C Broad 37 House # 741 Street Address C Broad 37 City Bethlehem State PH code 18018 To Whom Paild EXXUN Express Store # 102 House # 1125 Street Address W Broad St City Bethlehem State PH code 18018 To Whom Paild El Paisano Taguería	04 19 29.02 Description of Expenditure 29.02 Date [MM/DD/YYYY] \$ 04 30.00 Description of Expenditure 04 30.00 Description of Expenditure 04 05 05 06 07 07 03 07 03 04 03 07 05 07 07 07 07 08 07 08 09
House # 741 Street Address C Broad 37 House # 741 Street Address C Broad 37 City Bethlehem State PH code 18018 To Whom Paild EXXUN Express Store # 102 House # 1125 Street Address W Broad St City Bethlehem State PH code 18018 To Whom Paild El Poilsano Taguería House # 22 Street Address E Union Blvd	04/12/2017 29.02 Description of Expenditure 04/02/000 Date [MM/DD/YYYY] \$ 04/03/2017 30.00 Description/of Expenditure 04/03/2017 17.84
House # 741 Street Address C Broad St City Bethelen State PH code 18018 To Whom Paild EXXUN Express Store # 102 House # 1125 Street Address W Broad St City Bethelen State PH code 18018 To Whom Paild El Paisano Taguería House # 22 Street Address E Union Blvd City Bethlehem State PA code 18018 To Whom Paild El Paisano Taguería Street Address E Union Blvd City Bethlehem State PA code 18018 To Whom Paild El Paisano Taguería Street Address E Union Blvd City Bethlehem State PA code 18018	$\begin{array}{c c} 04 & 13 & 30 \\ \hline 04 & 13 & 30 \\ \hline Description of Expenditure \\ \hline \\ \hline \\ \hline \\ \hline \\ \hline \\ Date [MM/DD/YYYY] $ 30.00 \\ \hline \\$
House # 741 Street Address C Broad 37 House # 741 Street Address C Broad 37 City Bethlelen State PA Code 18018 To Whom Paild EXXUN Express Store # 102 House # 1125 Street Address W Broad St City Bethlelen State PA Code 18018 To Whom Paild El Poussano Taguería House # 22 Street Address E Union Blvd City Bethlelen State PA Code 18018	$\begin{array}{c c} 04 & 12 & 20 \\ \hline 04 & 12 & 20 \\ \hline Description of Expenditure \\ \hline \\ \hline \\ \hline \\ 04 & \\ 03 & \\ 20 & \\ \hline \\ 04 & \\ 03 & \\ 20 & \\ \hline \\ 04 & \\ 03 & \\ 20 & \\ \hline \\ 03 & \\ 00 & \\ \hline \\ 00 & \\ 00 & \\ 00 & \\ \hline \\ 00 & \\$
House # 741 Street Address C Broad 37 House # 741 Street Address C Broad 37 City Bethlehen State PA Code 18018 To Whom Paid EXXUN Express Store #102 House # 1125 Street Address W Broad St City Bethlehem State PA Code 18018 To Whom Paid El Paisano Taguería House # 22 Street Address E Union Blvd City Bethlehem State PA Code 18018 To Whom Paid El Paisano Taguería House # 22 Street Address E Union Blvd City Bethlehem State PA Code 18018 To Whom Paid El Paisano Taguería House # 22 Street Address E Union Blvd City Bethlehem State PA Code 18018 To Whom Paid Dollar Tree Stores, Inc.	$\begin{array}{c c} 04 & 12 & 20 \\ \hline 04 & 29 \\ \hline 02 \\ \hline 03 & 0 \\ \hline 04 & 02 \\ \hline 03 & 02 \\ \hline 04 & 02 \\ \hline 03 & 02 \\ $
House # 741 Street Address C Broad 37 House # 741 Street Address C Broad 37 City Bethlehen State PA Code 18018 To Whom Paid EXXUN Express Store #102 House # 1125 Street Address W Broad St City Bethlehem State PA Code 18018 To Whom Paid El Paisano Taguería House # 22 Street Address E Union Blvd City Bethlehem State PA Code 18018 To Whom Paid El Paisano Taguería House # 22 Street Address E Union Blvd City Bethlehem State PA Code 18018 To Whom Paid El Paisano Taguería House # 23 Street Address E Union Blvd City Bethlehem State PA Code 18018 To Whom Paid Dollar Tree Stores, Inc.	$\begin{array}{c c} 04 & 12 & 20 & 29.02 \\ \hline Description of Expenditure \\ \hline \\ \hline \\ 04 & 02 & 02 \\ \hline \\ 04 & 03 & 2017 \\ \hline \\ 03 & 27 & 2017 \\ \hline \\ 03 & 3.78 \\ \hline \end{array}$

SCHEDULE III Statement of Expenditures

Filer Identification Number: Provent and

To Whom Paid						
	1 Wan	In Her	37		Date [MM/DD/YYYY] \$	2 -
House #	Street Address		5/		03/26/2017	30.00
141		C Broad	54		Description of Expenditure	
City Rol	hlahant	State PA	Zip	02.0	C	<u></u>
109	Menern	IT	Code	8018	Gaz	
To Whom Paid	1/01/	Γ_{1}	n l	1	Date [MM/DD/YYYY] \$	
House # 👝 🥔	Valley	tamily	Restaur	ont	03/26/2017	15.61
House # 2816	Street Address	Easton Ai	10		Description of Expenditure	Section 18 18
City Dol	41 0	State 0.1		1		
ber	1 eren	PH	Code /	8017	Meeting lun	ch
To Whom Paid		1/ 0	112 - The second second		Date [MM/DD/YYYY] \$	
	Wana	# 803	7		03/21/2017	28.00
House # 741	Street Address	E. Broad	St		Description of Expenditure	New Yorks and the
City O . (A I C	State O A				
Bet	hehem	PA	Code 18	018	Gan	
To Whom Paid	11 .11	1 0			Date [MIM/DD/YYYY] \$	
	Northan	watch l'oun	WOMI	Install		.75
House #	Street Address	The period	g v v v v	Jistelli	Description of Expenditure	013
City /	12.2.201	State				10-14-14-14-14-14-14-14-14-14-14-14-14-14-
East	m	PA	Zip Code		(DDV	
To Whom Paid	- 11		A CONTRACTOR AND A CONT		Date [MM/DD/YYY] S	
	Dollar	Tipe St	hore-	ŀ	12/10/2017	12.77
House # 2x21	Street Address	2821 1/2	all D.I	/	Description of Expenditure	in a
		100100	ileth Pilo	a l		
Beth	10 her.	State PA	Zip Code	000	Malariala V: 10	000
o Whom Paid	<u> </u>	-Serd-1 ht		0-0	Matura Cick	-DFF
	Waln	art			Date [MM/DD/YYYY] \$	8,34
iouse # 3926		· 1 Cl			Description of Expenditure	0, 37
5420	and the form	- indenst			Second Second Conception of the second s	
ity Beth	1 olana	State PA		020	Male: IV.K	200
o Whom Paid	100000	171	Code 18		Materials Kick-	UTT
	Chilic	anle	Bar		Date [MM/DD/YYYY] \$	I YA
louse # 10 or	Street Address				03 94 2017 Description of Expenditure	ų - 10
1525	L IN	lanheim 1	Pille		sesurption of expenditure	1. 机合金 化
Tity / and	. 1.0	State	Zio		N. OAN	11: 0
	$n - 1 \psi$	CARLES AND			N A. 1/1 1 \ /1	1 10.0 1/11
O Whom Paid	ante	DA PA	Code 7/	101	Dinney PHDem.	GAND UM
and the second	11-11 /	1 1 1	1		Date [MM/DD/YYYY] \$	Latino Elli
o Whom Paid	Hilton	arden Inv	n Lancas	les ti	Date [MM/DD/YYYY] \$	45,39
o Whom Paid	11-11 /	arden Inv	nlancas	les ti	Date [MM/DD/YYYY] \$	45.39
To Whom Paid	Hilton(arden Inv	nlancas	le i	Date [MM/DD/YYYY] \$	45.39

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: 47-2-0	714676		
1. UNITEMIZED IN-KIND CONTRIBUTIONS REC	EIVED-VALUE OF \$50.00 OR LI	ESS PER CONTRIBUTOR	
TOTAL for the reporting period (1)	\$	-0-	
2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE	OF \$50.01 TO \$250.00 (FROM	I PART F)	
TOTAL for the reporting period (2)	\$	400.00	
3. IN-KIND CONTRIBUTION RECEIVED-VALUE	DVER \$250.00 (FROM PART G)		
TOTAL for the reporting period (3)	\$	-0-	
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING PERIOD (Add and enter amount totals from boxes 1, on Page 1, Report Cover Page, Item F)		400-00	

SCHEDULE II PART F In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

Filer Identification Number: 47-2914676

Füll Name of Contributor	John Beich	hert, Esg	Date [MM/DD/YYY] 2/15/2017	\$ 200.00
House # 707 Street Ad	dress Valley	Rd	Date [MM/DD/YYYY]	\$
City Blue Bell	State P4	Zip Code	Mac [MM/DD/YYYY]	\$
Description of Contribution	Food	ininks For	Cick-O-FF EV	ent
Full Name of Contributor		4220	Date [MM/DD/YYY]	\$ 200,00
House # 14 Street Ad	damas 1	view Lh	Date [MM/DD/YYYY]	\$
City Denver	State P(The second second second	7517 Date [MM/DD/YYYY]	\$
Description of Contribution	Food	Drinks for	Fundvaiser El	vent
Fall Name of Contributor	1		Dāte [MM/DD/YYYY]	\$
House # Street Ad	dress		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 Ad	idress		Date [MM/DD/YYYY]	\$
City	State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Contribution	CALCUL.			1963
Full Name of Contributor			Date [MM/DD/YYYY]	\$
House # Street Ad	dress		Date [MM/DD/YYYY]	\$
City	State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Contribution		different in operation		