

Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	20140238	Report Filed By (Mark X)	<input type="checkbox"/>	Candidate	<input type="checkbox"/>	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist	FRIENDS OF BOB DONCHEZ PAC								
Street Address	377 DEWONSHIRE DRIVE								
City	Bethlehem	State	PA.	Zip Code	18017				

Type of Report (Place x under report type)

1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6 th Tuesday Pre-Election	5- 2 nd Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)	11/03/2020	Year	2020	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	09/15/2020	12/31/2020	
A. Amount Brought Forward From Last Report	\$	108,016.44	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	- 0 -	
C. Total Funds Available (Sum of Lines A and B)	\$	108,016.44	
D. Total Expenditures (From Schedule III)	\$	530.00	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	107,486.44	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	- 0 -	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	- 0 -	

Pennsylvania - Notary Seal
 Notary Public
 Lehigh County
 Expires November 17, 2021
 Number 1164267
 ASSOCIATION OF NOTARIES

Part 1- 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, is to the best of my knowledge and belief true, correct and complete.

SCHEDULE III
Statement of Expenditures

Filer Identification Number: **20140238** **FRIENDS OF BOB DONCHEZ PAC**

To Whom Paid		CARDS DIRECT			Date [MM/DD/YYYY]	\$
					10/27/2020	387.00
House #	Street Address	Description of Expenditure				
1250	MERIT DRIVE STE 900					
City	State	Zip Code				
DALLAS	TX	75251	CHRISTMAS CARDS EXPENSE			
To Whom Paid		LEHIGH VALLEY POSTAL STORE			Date [MM/DD/YYYY]	\$
					11/10/2020	143.00
House #	Street Address	Description of Expenditure				
17	S. COMMERCE WAY					
City	State	Zip Code				
BETHLEHEM	PA.	18017	U.S. POSTAL STAMPS EXPENSE			
To Whom Paid					Date [MM/DD/YYYY]	\$
House #	Street Address	Description of Expenditure				
City	State	Zip Code				
To Whom Paid					Date [MM/DD/YYYY]	\$
House #	Street Address	Description of Expenditure				
City	State	Zip Code				
To Whom Paid					Date [MM/DD/YYYY]	\$
House #	Street Address	Description of Expenditure				
City	State	Zip Code				
To Whom Paid					Date [MM/DD/YYYY]	\$
House #	Street Address	Description of Expenditure				
City	State	Zip Code				
To Whom Paid					Date [MM/DD/YYYY]	\$
House #	Street Address	Description of Expenditure				
City	State	Zip Code				

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report only if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF		CANDIDATE	<input checked="" type="checkbox"/> COMMITTEE ²	<input type="checkbox"/> LOBBYIST ³												
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST ROBERT J. DONCHEZ																		
STREET ADDRESS 377 Devonshire Drive																		
CITY Bethlehem			STATE PA.	ZIP CODE 18017														
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY	DATE OF ELECTION												
	Mayor - City of Bethlehem			City of Bethlehem	Dem	MO. DAY YEAR 11 03 2020												
1. 6TH TUESDAY PRE-PRIMARY	2. 2ND FRIDAY PRE-PRIMARY	3. 30 DAY POST-PRIMARY	4. 6TH TUESDAY PRE-ELECTION	5. 2ND FRIDAY PRE-ELECTION	6. 30 DAY POST-ELECTION	FOR OFFICE USE ONLY												
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>													
DATES OF REPORTING PERIOD <table border="1" style="display: inline-table; margin-right: 20px;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>09</td><td>15</td><td>2020</td></tr> </table> TO <table border="1" style="display: inline-table;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>12</td><td>31</td><td>2020</td></tr> </table>							MO.	DAY	YEAR	09	15	2020	MO.	DAY	YEAR	12	31	2020
MO.	DAY	YEAR																
09	15	2020																
MO.	DAY	YEAR																
12	31	2020																
CASH BALANCE AT END OF REPORTING PERIOD: \$ <u> -0- </u>																		
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u> -0- </u>																		
<table border="1" style="width:100%;"> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td>NO</td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td>NO</td> </tr> </table>						AMENDMENT REPORT?	YES	NO	TERMINATION REPORT?	YES	NO							
AMENDMENT REPORT?	YES	NO																
TERMINATION REPORT?	YES	NO																

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.