

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 <input type="checkbox"/>												
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												
6TH TUESDAY PRE-PRIMARY 1.		MAYOR OF Bethlehem		City of Bethlehem	DEMO	MO. DAY YEAR												
2ND FRIDAY PRE-PRIMARY 2.						MO. DAY YEAR												
30 DAY POST-PRIMARY 3.						MO. DAY YEAR												
6TH TUESDAY PRE-ELECTION 4.						MO. DAY YEAR												
2ND FRIDAY PRE-ELECTION 5.						MO. DAY YEAR												
30 DAY POST-ELECTION 6.						MO. DAY YEAR												
ANNUAL REPORT <input checked="" type="checkbox"/>						FOR OFFICE USE ONLY												
		DATES OF REPORTING PERIOD																
		<table border="1" style="display: inline-table;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>06</td><td>09</td><td>15</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>15</td></tr> </table>		MO.	DAY	YEAR	06	09	15	MO.	DAY	YEAR	12	31	15			
MO.	DAY	YEAR																
06	09	15																
MO.	DAY	YEAR																
12	31	15																
		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>														
		AMENDMENT REPORT?		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>													
		TERMINATION REPORT?		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>													

AFFIDAVIT SECTION



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							
Street Address		377 DEVONSHIRE 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)		Year		Amendment Report		<input type="checkbox"/>	Termination Report	

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	06-09-15	12-31-2015	
A. Amount Brought Forward From Last Report	\$	92,222.91	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	32,546.25	
C. Total Funds Available (Sum of Lines A and B)	\$	124,769.16	
D. Total Expenditures (From Schedule III)	\$	4,556.94	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	120,212.22 -	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	2,545.00 -	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	-0-	

PENNSYLVANIA
 Public
 Notary
 County
 2017
 STATE OF PENNSYLVANIA

Affidavit Section

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

SCHEDULE I
Contributions and Receipts
Detailed Summary Page

Filer Identification Number: 20140235 FRIENDS OF BOB DONCHEZ

1. Unitemized Contributions and Receipts \$50.00 or Less per Contributor	
Total for the reporting period (1)	\$ 223.90 -
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)	
Contributions Received from Political Committees (Part A)	\$ 500.00 -
All Other Contributions (Part B)	\$ 5,377.35 -
Total for the reporting period (2)	\$ 5,877.35
3. Contributions Over \$250.00 (From Part C and Part D)	
Contributions Received from Political Committees (Part C)	\$ 8,500.00 -
All Other Contributions (Part D)	\$ 17,945.00 -
Total for the reporting period (3)	\$ 26,445.00
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 enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)	\$ 32,546.25

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 Identification Number 20140238		FRIENDS OF BOB DONCHEZ				Amount	
Full Name of Contributing Committee RETHER PAC		Date [MM/DD/YYYY] 11/05/2015		S		250.00-	
House # 3020	Street Address COLUMBIA AVE		Date [MM/DD/YYYY]		S		
City LANCASTER	State PA.	Zip Code 17603		Date [MM/DD/YYYY]		S	
Full Name of Contributing Committee RACE STREET PAC PENNACCE PROPERTIES		Date [MM/DD/YYYY] 11/05/2015		S		250.00-	
House # 230	Street Address WYOMING AVE.		Date [MM/DD/YYYY]		S		
City KINGSTON	State PA.	Zip Code 18204		Date [MM/DD/YYYY]		S	
Full Name of Contributing Committee		Date [MM/DD/YYYY]		S			
House #	Street Address		Date [MM/DD/YYYY]		S		
City	State	Zip Code		Date [MM/DD/YYYY]		S	
Full Name of Contributing Committee		Date [MM/DD/YYYY]		S			
House #	Street Address		Date [MM/DD/YYYY]		S		
City	State	Zip Code		Date [MM/DD/YYYY]		S	
Full Name of Contributing Committee		Date [MM/DD/YYYY]		S			
House #	Street Address		Date [MM/DD/YYYY]		S		
City	State	Zip Code		Date [MM/DD/YYYY]		S	
Full Name of Contributing Committee		Date [MM/DD/YYYY]		S			
House #	Street Address		Date [MM/DD/YYYY]		S		
City	State	Zip Code		Date [MM/DD/YYYY]		S	
Full Name of Contributing Committee		Date [MM/DD/YYYY]		S			
House #	Street Address		Date [MM/DD/YYYY]		S		
City	State	Zip Code		Date [MM/DD/YYYY]		S	

3

Total \$50.00

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 20140238	FRIENDS OF Bob DONCHEZ
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Full Name of Contributor	JUSTIN POREMBO	Date (MM/DD/YYYY)	12/11/2015	\$	200.00 -
House #	1670	Street Address	BEST PL	Date (MM/DD/YYYY)	\$
City	Bethlehem	State	PA	Zip Code	18017
Full Name of Contributor	DR. Emily Miller	Date (MM/DD/YYYY)	11/10/2015	\$	200.00 -
House #	2579	Street Address	Kings mill RD	Date (MM/DD/YYYY)	\$
City	Hellertown	State	PA.	Zip Code	18055
Full Name of Contributor	FRANK + ALVERTA MAAVAY	Date (MM/DD/YYYY)	11/10/2015	\$	250.00 -
House #	1743	Street Address	W. Union Blvd.	Date (MM/DD/YYYY)	\$
City	Bethlehem	State	PA.	Zip Code	18018
Full Name of Contributor	William + Mary KARRAS	Date (MM/DD/YYYY)	11/10/2015	\$	250.00 -
House #	5891	Street Address	ALEXANDER RD.	Date (MM/DD/YYYY)	\$
City	Bethlehem	State	PA.	Zip Code	18017
Full Name of Contributor	BRIAN BORNSTEIN	Date (MM/DD/YYYY)	11/05/2015	\$	242.45
House #	16	Street Address	Blackhawk COURT	Date (MM/DD/YYYY)	\$
City	PRINCETON	State	PA.	Zip Code	08550
Full Name of Contributor	RON + JANE BENNETT	Date (MM/DD/YYYY)	11/05/2015	\$	250.00 -
House #	1039	Street Address	RESOLUTION DR.	Date (MM/DD/YYYY)	\$
City	Bethlehem	State	PA.	Zip Code	18017

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.)

File Identification Number: 80196238	FRIENDS OF Bob DONCHEZ
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Full Name of Contributor		JOE WELSH			Date (MM/DD/YYYY)	\$	250.00-
House #	138	Street Address	S. 10th ST. APT #2		Date (MM/DD/YYYY)	\$	
City	EASTON	State	PA.	Zip Code	18042	Date (MM/DD/YYYY)	\$
Full Name of Contributor		ROBERT NITCHEY			Date (MM/DD/YYYY)	\$	250.00-
House #	730	Street Address	WASHINGTON ST.		Date (MM/DD/YYYY)	\$	
City	EASTON	State	PA.	Zip Code	18042	Date (MM/DD/YYYY)	\$
Full Name of Contributor		J m ULIANA & Associates LLC			Date (MM/DD/YYYY)	\$	250.00-
House #	2571	Street Address	BAGYOS Circle B20		Date (MM/DD/YYYY)	\$	
City	Bethlehem	State	PA.	Zip Code	18020	Date (MM/DD/YYYY)	\$
Full Name of Contributor		ROBERT OSTER			Date (MM/DD/YYYY)	\$	250.00 -
House #	142	Street Address	WedgeWOOD RD		Date (MM/DD/YYYY)	\$	
City	Bethlehem	State	PA.	Zip Code	18017	Date (MM/DD/YYYY)	\$
Full Name of Contributor		DR. MARK ANGELB			Date (MM/DD/YYYY)	\$	250.00
House #	1578	Street Address	EASTON AVE.		Date (MM/DD/YYYY)	\$	
City	Bethlehem	State	PA.	Zip Code	18017	Date (MM/DD/YYYY)	\$
Full Name of Contributor		DAN McNEILL			Date (MM/DD/YYYY)	\$	250.00-
House #	3163	Street Address	N. FRONT ST.		Date (MM/DD/YYYY)	\$	
City	Whitehall	State	PA.	Zip Code	18052	Date (MM/DD/YYYY)	\$

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.)

Plan/Contributor Number		Full Name of Contributor		Date (MM/DD/YYYY)	\$
20140338		FRIENDS OF Bob DONCHEZ			
Full Name of Contributor		CURTIS BARNETT		Date (MM/DD/YYYY)	\$
House #	Street Address	1112 PROSPECT AVE.		Date (MM/DD/YYYY)	\$
City	State	Zip Code	18018	Date (MM/DD/YYYY)	\$
Full Name of Contributor		ROBERT + JANE BIGGS		Date (MM/DD/YYYY)	\$
House #	Street Address	157 MORELAND AVE.		Date (MM/DD/YYYY)	\$
City	State	Zip Code	18017	Date (MM/DD/YYYY)	\$
Full Name of Contributor		PATRICK CONNELL		Date (MM/DD/YYYY)	\$
House #	Street Address	152 SURREY RD.		Date (MM/DD/YYYY)	\$
City	State	Zip Code	18015	Date (MM/DD/YYYY)	\$
Full Name of Contributor		VAUGHN GOURA		Date (MM/DD/YYYY)	\$
House #	Street Address	1982 EARTHILL DRIVE		Date (MM/DD/YYYY)	\$
City	State	Zip Code	18017	Date (MM/DD/YYYY)	\$
Full Name of Contributor		JOE LEONARD JR.		Date (MM/DD/YYYY)	\$
House #	Street Address	820 WARRIOR LAKE		Date (MM/DD/YYYY)	\$
City	State	Zip Code	18017	Date (MM/DD/YYYY)	\$
Full Name of Contributor		ISIDORE MIHALAKIS		Date (MM/DD/YYYY)	\$
House #	Street Address	1024 HIGHLAND AVE.		Date (MM/DD/YYYY)	\$
City	State	Zip Code	18018	Date (MM/DD/YYYY)	\$

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.)

Plan Identification Number 00140238	FRIENDS OF Bob DONCHEZ
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Full Name of Contributor MELISSA RUDAS				Date [MM/DD/YYYY] 9/15/2015	\$ 250.00-
House # 3379	Street Address Rising Sun Ct.		Date [MM/DD/YYYY]	\$	
City NAZARETH	State PA.	Zip Code 18064	Date [MM/DD/YYYY]	\$	
Full Name of Contributor ERIC + JOOI EVANS				Date [MM/DD/YYYY] 9/15/2015	\$ 200.00-
House # 1955	Street Address Birtztown RD		Date [MM/DD/YYYY]	\$	
City Bethlehem	State PA.	Zip Code 18017	Date [MM/DD/YYYY]	\$	
Full Name of Contributor JOE DAMBROSIO				Date [MM/DD/YYYY] 9/15/2015	\$ 125.00-
House # 315	Street Address S. NEW ST.		Date [MM/DD/YYYY]	\$	
City Bethlehem	State PA.	Zip Code 18015	Date [MM/DD/YYYY]	\$	
Full Name of Contributor ALICIA KARNER				Date [MM/DD/YYYY] 9/15/2015	\$ 242.45
House # 129	Street Address S. 2nd ST.		Date [MM/DD/YYYY]	\$	
City Bangor	State PA.	Zip Code 18103	Date [MM/DD/YYYY]	\$	
Full Name of Contributor GENE + JAO COUNELL				Date [MM/DD/YYYY] 9/15/2015	\$ 250.00-
House # 3209	Street Address GREEN MEADOW DR.		Date [MM/DD/YYYY]	\$	
City Bethlehem	State PA.	Zip Code 18017	Date [MM/DD/YYYY]	\$	
Full Name of Contributor C. RICHARD ROSEBERRY				Date [MM/DD/YYYY] 9/15/2015	\$ 250.00-
House # 39	Street Address Applewood DR.		Date [MM/DD/YYYY]	\$	
City Easton	State PA.	Zip Code 18045	Date [MM/DD/YYYY]	\$	

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.

Payer Identification Number 20140308	FRIENDS OF BOB DAUCHEZ
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Full Name of Contributing Committee Commonwealth Heritage PAC	40 B. GREENLEAF FARM HARVEST DR. STE 300	Date [MM/DD/YYYY] 11/01/2015	\$	2,000.00
House # 925	Street Address HARVEST DR. STE 300	Date [MM/DD/YYYY]	\$	
City Blue Bell	State PA.	Zip Code 19422	Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee LABORERS PAC 1174	ALLANTOWN DRIVE	Date [MM/DD/YYYY] 09/15/2015	\$	1,000.00
House # 465	Street Address ALLANTOWN DRIVE	Date [MM/DD/YYYY]	\$	
City Allantown	State PA.	Zip Code 18109	Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee		Date [MM/DD/YYYY]	\$	
House #	Street Address	Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee		Date [MM/DD/YYYY]	\$	
House #	Street Address	Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee		Date [MM/DD/YYYY]	\$	
House #	Street Address	Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee		Date [MM/DD/YYYY]	\$	
House #	Street Address	Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$

**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)

Identification Number 80149238	FRIENDS OF BOB DONCHEZ
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Full Name of Contributor CARMELO HUERTAS		Date [MM/DD/YYYY] 12/20/2015	\$ 1,000.00-
House #	Street Address P.O. Box 5162	Date [MM/DD/YYYY]	\$
City Bethlehem	State PA.	Zip Code 18015	Date [MM/DD/YYYY]
Employer Name		Occupation BUSINESSMAN	
Employer Mailing Address / Principal Place of Business SAME / South Bethlehem			
Full Name of Contributor + TAMARA DA EMIL DITORIO		Date [MM/DD/YYYY] 11/10/2015	\$ 1,000.00-
House # 200	Street Address W. MACADA ROAD	Date [MM/DD/YYYY]	\$
City Bethlehem	State PA.	Zip Code 18017	Date [MM/DD/YYYY]
Employer Name Coordinated Health		Occupation HEALTH CARE	
Employer Mailing Address / Principal Place of Business Highland Ave., Bethlehem, PA.			
Full Name of Contributor JOHN GALLAGHER		Date [MM/DD/YYYY] 11/05/2015	\$ 500.00-
House # 711	Street Address FORREST ROAD	Date [MM/DD/YYYY]	\$
City Harrisburg	State PA.	Zip Code 17112	Date [MM/DD/YYYY]
Employer Name		Occupation Attorney	
Employer Mailing Address / Principal Place of Business S/A/A			
Full Name of Contributor SUSAN + RICHARD MASTER		Date [MM/DD/YYYY] 11/05/2015	\$ 500.00-
House # 250	Street Address E. MACADA	Date [MM/DD/YYYY]	\$
City Bethlehem	State PA.	Zip Code 18017	Date [MM/DD/YYYY]
Employer Name MCS INDUSTRIES		Occupation OWNER	
Employer Mailing Address / Principal Place of Business EASTON, PA.			

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 20140238	FRIENDS OF BOB DONCHEZ
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Full Name of Contributor Littner, Deschler, Littner		Date [MM/DD/YYYY] 10/15/2015	\$ 500.00
House # 512	Street Address N. NEW ST.	Date [MM/DD/YYYY]	\$
City Bethlehem	State PA.	Zip Code 18018	Date [MM/DD/YYYY]
Employer Name S/A/A		Occupation ATTORNEY FIRM	
Employer Mailing Address / Principal Place of Business			

Full Name of Contributor Raymond Lahoud		Date [MM/DD/YYYY] 10/01/2015	\$ 300.00
House # 3911	Street Address KNOLL CRAFT ST.	Date [MM/DD/YYYY]	\$
City EASTON	State PA.	Zip Code 18045	Date [MM/DD/YYYY]
Employer Name S/A/A		Occupation ATTORNEY	
Employer Mailing Address / Principal Place of Business			

Full Name of Contributor WALT + LUCINDA DEATY		Date [MM/DD/YYYY] 10/01/2015	\$ 500.00
House # 1640	Street Address COUNTRY RD	Date [MM/DD/YYYY]	\$
City BETHLEHEM	State PA.	Zip Code 18015	Date [MM/DD/YYYY]
Employer Name SERVICE TIRE		Occupation CO-OWNER	
Employer Mailing Address / Principal Place of Business Bethlehem, PA.			

Full Name of Contributor William Leason		Date [MM/DD/YYYY] 10/01/2015	\$ 1,000.00
House # 70	Street Address E. BROAD ST.	Date [MM/DD/YYYY]	\$
City Bethlehem	State PA.	Zip Code 18017	Date [MM/DD/YYYY]
Employer Name S/A/A		Occupation ATTORNEY	
Employer Mailing Address / Principal Place of Business			

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: 80140238	FRIENDS OF BOB DONCHEZ
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Full Name of Contributor		Bill + Karen LAUDIS		Date [MM/DD/YYYY]	\$	500.00-
House #	Street Address	Date [MM/DD/YYYY]	\$			
2135	Kelly Lane					
City	State	Zip Code	Date [MM/DD/YYYY]	\$		
Bath	PA.	18014				
Employer Name		TUNAK COMMUNICATIONS		Occupation	OWNER/COMMUNISTION	
Employer Mailing Address / Principal Place of Business		Bethlehem, PA.		COMPAN.		
Full Name of Contributor		MICHAEL + LYNN ALBARELL		Date [MM/DD/YYYY]	\$	1,000.00-
House #	Street Address	Date [MM/DD/YYYY]	\$			
1053	Resolution DR.					
City	State	Zip Code	Date [MM/DD/YYYY]	\$		
Bethlehem	PA.	18017				
Employer Name		ALBARELL Electric		Occupation	owner	
Employer Mailing Address / Principal Place of Business		901 W. Lehigh ST., Bethlehem, PA. 18018				
Full Name of Contributor		SEAN BOYLE		Date [MM/DD/YYYY]	\$	1,000.00-
House #	Street Address	Date [MM/DD/YYYY]	\$			
2516	Ludwig COURT					
City	State	Zip Code	Date [MM/DD/YYYY]	\$		
MACUNGIE	PA.	18062				
Employer Name		BOYLE CONSTRUCTION		Occupation	CO-OWNER	
Employer Mailing Address / Principal Place of Business		2299 BROCKWOOD RD., Bethlehem, PA. 18020				
Full Name of Contributor		LUKE CUNNINGHAM		Date [MM/DD/YYYY]	\$	1,000.00
House #	Street Address	Date [MM/DD/YYYY]	\$			
1325	CLAY ST.					
City	State	Zip Code	Date [MM/DD/YYYY]	\$		
Bethlehem	PA.	18018				
Employer Name		WEST SIDE HAMMER Electric		Occupation	owner	
Employer Mailing Address / Principal Place of Business		925 E. 2nd ST., Bethlehem, PA.				

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		FRIENDS OF Bob DONCHEZ	
Full Name of Contributor		Tom + JAIME SEVERSON	
Date [MM/DD/YYYY]		09/15/2015	
House #		901	
Street Address		E. WALNUT ST.	
Date [MM/DD/YYYY]			
City		PEN ARGYL PA. 18012	
Date [MM/DD/YYYY]			
Employer Name			
Occupation		RETIRED/CONSULTANT	
Employer Mailing Address / Principal Place of Business			
Full Name of Contributor		Tom + DIANE MCGWIRE	
Date [MM/DD/YYYY]		09/15/2015	
House #		1954	
Street Address		SUNDEZLAND DR.	
Date [MM/DD/YYYY]			
City		Bethlehem PA. 18015	
Date [MM/DD/YYYY]			
Employer Name			
Occupation		RETIRED	
Employer Mailing Address / Principal Place of Business		N/A	
Full Name of Contributor		SCOTT FAWCER	
Date [MM/DD/YYYY]		09/15/2015	
House #		3050	
Street Address		FAIRFIELD DR.	
Date [MM/DD/YYYY]			
City		Allentown PA. 18103	
Date [MM/DD/YYYY]			
Employer Name		NATIONAL PENN BANK	
Occupation		BANKER	
Employer Mailing Address / Principal Place of Business		7th + Hamilton ST., Allentown, PA.	
Full Name of Contributor		MARK PEPTONE	
Date [MM/DD/YYYY]		11/15/2015	
House #		2285	
Street Address		Schoenersville ROAD	
Date [MM/DD/YYYY]			
City		Bethlehem PA. 18018	
Date [MM/DD/YYYY]			
Employer Name		WESTGATE MALL	
Occupation		ATTORNEY	
Employer Mailing Address / Principal Place of Business		Bethlehem, PA.	

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)

File Identification Number: 20140238		FRIENDS OF Bob DONCHER			
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Full Name of Contributor		Citizens ^{FOR} JOHN MORGANELLI		Date [MM/DD/YYYY]	\$	500.00-
House #	Street Address	835 BURNSDALE ROAD		Date [MM/DD/YYYY]	\$	
City	State	Zip Code		Date [MM/DD/YYYY]	\$	
	Bethlehem	PA.	18017			
Employer Name		County of Northampton		Occupation	District Attorney	
Employer Mailing Address / Principal Place of Business		Easton, PA.				

Full Name of Contributor		Thomas + JAMA BARKER		Date [MM/DD/YYYY]	\$	500.00-
House #	Street Address	1007 PROSPECT AVE.		Date [MM/DD/YYYY]	\$	
City	State	Zip Code		Date [MM/DD/YYYY]	\$	
	Bethlehem	PA.	18018			
Employer Name		BARKER + BARKER PAWING		Occupation	PAWING CONTRACTOR	
Employer Mailing Address / Principal Place of Business		1401 EASTON AVE., Bethlehem, PA				

Full Name of Contributor		MARK DULUZIO		Date [MM/DD/YYYY]	\$	300.00-
House #	Street Address	2319 LARK SPRING LANE		Date [MM/DD/YYYY]	\$	
City	State	Zip Code		Date [MM/DD/YYYY]	\$	
	EASTON	PA.	18045			
Employer Name		City of Bethlehem		Occupation	Chief of Police	
Employer Mailing Address / Principal Place of Business		Bethlehem, PA.				

Full Name of Contributor		GAVIO Mc GEEHAN		Date [MM/DD/YYYY]	\$	485.20
House #	Street Address	3433 TENNIS COURT RD.		Date [MM/DD/YYYY]	\$	
City	State	Zip Code		Date [MM/DD/YYYY]	\$	
	Bethlehem	PA.	18015			
Employer Name		BARKER + BARKER PAWING		Occupation	PAWING CONTRACTOR	
Employer Mailing Address / Principal Place of Business		1401 EASTON AVE., Bethlehem, PA.				

**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: 20140238	FRIENDS OF Bob DOUCHEZ
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Full Name of Contributor		FRIENDS OF LISA BOSORDA		Date [MM/DD/YYYY]	9/19/2015	\$	500.00-
House #	385	Street Address		PALMETTO DR.		Date [MM/DD/YYYY]	
City	EASTON	State	PA.	Zip Code	18045	Date [MM/DD/YYYY]	
Employer Name		STATE OF PENNA.		Occupation		STATE SOUTHER	
Employer Mailing Address / Principal Place of Business		HARRISBURG, PA.					
Full Name of Contributor		ARTHUR TASCHKE JR.		Date [MM/DD/YYYY]	9/01/2015	\$	500.00
House #	1935	Street Address		BELLEVUE DRIVE		Date [MM/DD/YYYY]	
City	Whitehall	State	PA.	Zip Code	18052	Date [MM/DD/YYYY]	
Employer Name		TUWAY WAY COMMUNICAT.		Occupation		OWNER	
Employer Mailing Address / Principal Place of Business		"TUWAY" BETHLEHEM, PA.					
Full Name of Contributor		DENNIS BEUWER		Date [MM/DD/YYYY]	9/01/2015	\$	1,000.00
House #	2005	Street Address		CITY LINE RD STE 106		Date [MM/DD/YYYY]	
City	Bethlehem	State	PA.	Zip Code	18011	Date [MM/DD/YYYY]	
Employer Name		BEUWER + PIPERATO		Occupation		ATTORNEY	
Employer Mailing Address / Principal Place of Business		SLA/A					
Full Name of Contributor		ROBERT WAY + LAURA WAY		Date [MM/DD/YYYY]	9/01/2015	\$	500.00-
House #	1914	Street Address		WOODHAVEN DR.		Date [MM/DD/YYYY]	
City	Allentown	State	PA.	Zip Code	18104	Date [MM/DD/YYYY]	
Employer Name		ST. LUKE'S HOSPITAL		Occupation		ATTORNEY	
Employer Mailing Address / Principal Place of Business		Bethlehem, PA.					

**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: **20140238** **FRIENDS OF BOB DONCHEZ**

Full Name of Contributor		DIANE DUPREY		Date [MM/DD/YYYY]	\$	09/01/2015	375.00
House #	Street Address	1600 PARKWAY EAST SUITE 1A		Date [MM/DD/YYYY]	\$		
City	State	Zip Code	Allentown PA 18103		Date [MM/DD/YYYY]	\$	
Employer Name	* This check was deposited into		Occupation				
Employer Mailing Address / Principal Place of Business	Friends of Bob Donchez by mistake / listed but then Bob Donchez wrote her back a check for 2395.00						

Full Name of Contributor		ROBERT MARTIN		Date [MM/DD/YYYY]	\$	09/01/2015	485.20
House #	Street Address	2332 Blackledge Dr.		Date [MM/DD/YYYY]	\$		
City	State	Zip Code	Quakertown PA 18951		Date [MM/DD/YYYY]	\$	
Employer Name	ST. LUKE'S HOSPITAL		Occupation	VICE PRESIDENT			
Employer Mailing Address / Principal Place of Business	Bethlehem, PA.						

Full Name of Contributor		MURAT & ZEYNEP GUREL		Date [MM/DD/YYYY]	\$	09/01/2015	1000.00
House #	Street Address	1105 CLARE ST.		Date [MM/DD/YYYY]	\$		
City	State	Zip Code	Bethlehem PA 18017		Date [MM/DD/YYYY]	\$	
Employer Name	SMART JUICES LLC		Occupation	OWNER			
Employer Mailing Address / Principal Place of Business	52 E. Union Blvd, Bethlehem, PA 18018						

Full Name of Contributor				Date [MM/DD/YYYY]	\$		
House #	Street Address			Date [MM/DD/YYYY]	\$		
City	State	Zip Code			Date [MM/DD/YYYY]	\$	
Employer Name			Occupation				
Employer Mailing Address / Principal Place of Business							

SCHEDULE II

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

Filer Identification Number: 20140232	FRIENDS OF BOB DONCHEZ
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED VALUE OF \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the reporting period	(1)	\$

2. IN-KIND CONTRIBUTIONS RECEIVED VALUE OF \$50.01 TO \$250.00 (FROM PART F)		
TOTAL for the reporting period	(2)	\$

3. IN-KIND CONTRIBUTION RECEIVED VALUE OVER \$250.00 (FROM PART G)		
TOTAL for the reporting period	(3)	\$ 2,545.00 -

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)		\$ # 2,545.00 -
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SCHEDULE II
Part G
In-Kind Contributions Received
VALUE OVER \$250

Identification Number: 20140238 FRIENDS OF BOB DONCHEZ

Full Name of Contributor		ATTORNEY JAMES BAUGHAL		Date [MM/DD/YYYY]	\$	2,545.00
House #	38	Street Address	WEST MARKET STREET	Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA.	Zip Code	18018	
Employer Name	BAUGHAL & DEVITO		Occupation	ATTORNEY FIRM		
Employer Mailing Address / Principal Place of Business	S/A/A		Description of Contribution	EXPENSE FOR FUNDRAISER AT SWEET CREEK COUNTRY CLUB		
Full Name of Contributor				Date [MM/DD/YYYY]	\$	
House #		Street Address		Date [MM/DD/YYYY]	\$	
City		State		Zip Code		
Employer Name			Occupation			
Employer Mailing Address / Principal Place of Business			Description of Contribution			
Full Name of Contributor				Date [MM/DD/YYYY]	\$	
House #		Street Address		Date [MM/DD/YYYY]	\$	
City		State		Zip Code		
Employer Name			Occupation			
Employer Mailing Address / Principal Place of Business			Description of Contribution			
Full Name of Contributor				Date [MM/DD/YYYY]	\$	
House #		Street Address		Date [MM/DD/YYYY]	\$	
City		State		Zip Code		
Employer Name			Occupation			
Employer Mailing Address / Principal Place of Business			Description of Contribution			

SCHEDULE III
Statement of Expenditures

Identifier Number		FRIENDS OF BOB DONCHEZ	
To Whom Paid	Bethlehem Business Forms	Date (MM/DD/YYYY)	\$ 95.29
House #	Street Address	Description of Expenditure	
	PO. BOX 4250	MAILING ENVELOPES	
City	State	Zip Code	
Bethlehem	PA.	18018	
To Whom Paid	NATIONAL DEW BANK	Date (MM/DD/YYYY)	\$ 35.00-
House #	Street Address	Description of Expenditure	
	HAMILTON ST.	STOP PAYMENT EXP.	
City	State	Zip Code	
Allentown	PA.		
To Whom Paid	JOHN MORGANELLI PA PAC	Date (MM/DD/YYYY)	\$ 1,000.00-
House #	Street Address	Description of Expenditure	
	BARRONDALE ROAD	CONTRIBUTION TO POLITICAL CAMPAIGN	
City	State	Zip Code	
Bethlehem	PA	18011	
To Whom Paid	XXXXXXXXXXXXXXXXXXXX	Date (MM/DD/YYYY)	\$ 500.00
House #	Street Address	Description of Expenditure	
City	State	Zip Code	
To Whom Paid	PAWLUSKI FOR SENATE 2016	Date (MM/DD/YYYY)	\$ 1,000.00-
House #	Street Address	Description of Expenditure	
840	W. HAMILTON ST. SUI 321	CONTRIBUTION TO POLITICAL SENATE CAMPAIGN	
City	State	Zip Code	
Allentown	PA.	18101	
To Whom Paid	BARRON FOR COUNTY CONTROLLER	Date (MM/DD/YYYY)	\$ 500.00-
House #	Street Address	Description of Expenditure	
		CONTRIBUTION TO POLITICAL CONTROLLER CAMPAIGN	
City	State	Zip Code	
	PA.		
To Whom Paid	LEHIGH VALLEY POSTAL STORES	Date (MM/DD/YYYY)	\$ 196.00-
House #	Street Address	Description of Expenditure	
17	S COMMERCE WAY	POSTAL STAMPS	
City	State	Zip Code	
Bethlehem	PA.	18017	
To Whom Paid	PA TRADE ASSOC.	Date (MM/DD/YYYY)	\$ 600.00-
House #	Street Address	Description of Expenditure	
		74 AD PAGES W PROGRAM	
City	State	Zip Code	
	PA.		

SCHEDULE III
Statement of Expenditures

File Identification Number: **35-140338**
FRIENDS OF BOB DONCHEZ

To Whom Paid	Robert Donchez			Date (MM/DD/YYYY)	11/11/2015	\$	430.65
House #	377	Street Address	Newarkshire Drive	Description of Expenditure			
City	Bethlehem	State	PA.	Zip Code	18011	Reimbursement For X-MAS CARDS	
To Whom Paid	Friends of Dan McNeill			Date (MM/DD/YYYY)	11/15/2015	\$	250.00
House #		Street Address		Description of Expenditure			
City	Whitehall	State	PA.	Zip Code		Contribution to Political Campaign (Lehigh Co.)	
To Whom Paid	John Weber			Date (MM/DD/YYYY)	11/30/2015	\$	75.00
House #	450	Street Address	Fifth St.	Description of Expenditure			
City	Whitehall	State	PA.	Zip Code	18057	Photo Expense / Event	
To Whom Paid	Diane Duprey			Date (MM/DD/YYYY)	12/3/2015	\$	375.00
House #	1600	Street Address	Parkway East Suite A.	Description of Expenditure			
City	Allentown	State	PA.	Zip Code	18103	was given deposit in error	
To Whom Paid	Chak was not payable to Friends of Bob Donchez, deposit into account in error. This expense refunded Mrs. Duprey.			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			