

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	<input type="checkbox"/> LOBBYIST	
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) 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 <input checked="" type="checkbox"/> 7. ANNUAL REPORT	NAME OF OFFICE SOUGHT BY CANDIDATE City MAYOR OF Bethlehem		DISTRICT NO. City of Bethlehem	PARTY Democrat		DATE OF ELECTION MO. DAY YEAR	
	DATES OF REPORTING PERIOD		TO		FOR OFFICE USE ONLY		
	MO.	DAY	YEAR	MO.	DAY	YEAR	
	10	23	18	4	26	18	
	CASH BALANCE AT END OF REPORTING PERIOD:			\$ <u> 00 </u>			
	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:			\$ <u> 00 </u>			
	AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>			
TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>				

AFFIDAVIT SECTION

PART I -
 If statement is filed on behalf of a Political Committee...

Commonwealth of Pennsylvania - Campaign Finance Report

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

File Identification Number	20140238	Report filed by (Mark X)	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 DEVONSHIRE DRIVE							
City	Bethlehem	State	PA.	Zip Code	18017			

Type of Report (Place x under report type)

1st Tuesday Pre-Primary	2nd Friday Pre-Primary	3rd 30 Day Post Primary	1st Tuesday Pre-Election	2nd Friday Pre-Election	3rd 30 Day Post Election	Annual	Special Pre-Election	Final	Special 30 Day Post-Election
<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date of Election (MM/DD/YYYY)		Year		Amendment Report		Termination Report			

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
A. Amount brought forward from last report	10/23/2018	11/26/2018	
B. Total Monetary Contributions and Receipts (From Schedule II)			
C. Total Funds Available (Subtotal of lines A and B)			
D. Total Expenditures (From Schedule III)			
E. Ending cash balance (Subtotal of lines C and D)			
F. Value of in-kind contributions received (From Schedule IV)			
G. Net debts and obligations (From Schedule IV)			

Affidavit Section

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 pages 1-6, is true and correct.

SCHEDULE I
Contributions and Receipts
 Detailed Summary Page

Filer Identification Number <i>70111033</i>	FRIENDS OF BOB DONCHEZ PAC
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1. Unitemized Contributions and Receipts \$50.00 or less per Contributor		
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Total for the reporting period (1)	\$	
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2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)		
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Contributions Received from Political Committees (Part A)	\$	
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All Other Contributions (Part B)	\$	
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Total for the reporting period (2)	\$	
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3. Contributions Over \$250.00 (From Part C and Part D)		
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Contributions Received from Political Committees (Part C)	\$	
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All Other Contributions (Part D)	\$	
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Total for the reporting period (3)	\$	
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4. Other Receipts: Refunds, Interest earned, Returned Checks, ETC. (From Part E)		
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Total for the reporting period (4)	\$	
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Total Monetary Contributions and Receipts during this reporting period <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i>	\$	- 0 -
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SCHEDULE III
Statement of Expenditures

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

To Whom Paid		Re-elect Tom Wolf Governor		Date [MM/DD/YYYY]	\$
House #	Street Address	P.O. Box 22454		10/25/2018	500.00 -
City	State	Zip Code	Description of Expenditure		
Phila	PA.	19110	Campaign contribution		
To Whom Paid		Minsi Trails Council BSA		Date [MM/DD/YYYY]	\$
House #	Street Address	P.O. Box 20624		10/25/2018	500.00 -
City	State	Zip Code	Description of Expenditure		
Lehigh Valley	PA.	18002	Contribution / RDO		
To Whom Paid		BOB LASEY SENATOR		Date [MM/DD/YYYY]	\$
House #	Street Address	P.O. Box 58746		10/27/2018	250.00 -
City	State	Zip Code	Description of Expenditure		
Phila	PA.	19102	Campaign contribution		
To Whom Paid		SUSAN WILD FOR CONGRESS		Date [MM/DD/YYYY]	\$
House #	Street Address	N. Cedar Crest Blvd. #183		10/29/2018	500.00 -
City	State	Zip Code	Description of Expenditure		
Allentown	PA.	18104	Campaign contribution		
To Whom Paid		REIMBURSEMENT XMAS CARDS		Date [MM/DD/YYYY]	\$
House #	Street Address	Devonshire Drive		11/05/2018	416.15
City	State	Zip Code	Description of Expenditure		
Bethlehem	PA.	18017	X-MAS CARDS EXPENSE		
To Whom Paid		U.S. POST OFFICE		Date [MM/DD/YYYY]	\$
House #	Street Address			11/06/2018	150.00 -
City	State	Zip Code	Description of Expenditure		
Bethlehem	PA.		EXPENSE FOR STAMPS		
To Whom Paid				Date [MM/DD/YYYY]	\$
House #	Street Address				
City	State	Zip Code	Description of Expenditure		
To Whom Paid				Date [MM/DD/YYYY]	\$
House #	Street Address				
City	State	Zip Code	Description of Expenditure		