	CAI	MPAIGN F	INANCE REP	ORT			
	Name and A	ddress of Fi	ling Candidate	or Com	mitte	e	
Name: Address: City, State, 2	Zip:	Committee to Elect Andrea Naugle 2304 E Fairmont St Allentown PA 18109 Report Filed By					
Candidate			Committee			X	
Type of Report Annual 2011		Election Date	Amended		Termination YES		
TERMINATION REPORT				No		No	
Office Sought By Candidate			Party	County			
Lehigh County Clerk of Judicial Records			D	Lehigh			
	Sumi	nary of Rec	 eipts & Expend	litures			
From:	From: 11/29/2011 To: 12/31/.				2011		
A. Amount Brought Forward From Last Report					454.33		
B. Total Monetary Contributions & Receipts (from Schedule I)					0.33		
C. Total Funds Available (Sum of Lines A & B)					454.66		
D. Total Expenditures (from Schedule III)				454.66			
E. Ending Cash Balance (Subtract Line D from Line C)				0.00			
F. Value of In-Kind Contributions Received (from Schedule II)				lule II)	0.00		
G. Unpaid Debts & Obligations (from Schedule IV)				7°	0.00		
					-		

^{*}Complete reports including signatures are on file in the Office of Voter Registration.

SCHEDULE I

PAGE 2 OF

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate Committee to Elect Andrea Naugle	Reporting Period	39/11 7	12/31/11
THUNHEMIZED CONTRIBUTIONS AND RECEIPTS - \$50,00 OR LESS	PER CONT	RIBUSTROLE	SP CONTROL OF THE CON
TOTAL for the Reporting Period	(1)	\$	
2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART)	B)		
Contributions Received from Political Committees (Part A)		\$	
All Other Contributions (Part B)		\$	
TOTAL for the Reporting Period	i (2)	\$	
3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)			Section 1
Contributions Received from Political Committees (Part C)		\$	
All Other Contributions (Part D)		\$	
TOTAL for the Reporting Period	d (3)	\$	
4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CH	HECKS, EHC	(EROM I	-Ance
TOTAL for the Reporting Period	j (4)	\$.	33
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		\$	33

PAGE 3 OF 4

PART E OTHER RECEIPTS

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 Committee to Elect A	Indre	en Naugle	Re	porting From	Perjod	11 To 12/31/11
Full Name L, C, E, F, C, U,						78.7.
Mailing Address 455 W Hamilton	ST					
Allentown	State P/1	Zip Code (Plus 4)	MO. 12	31	YEAR	Amount \$ •33
Receipt Description Interest	14 . / 1	1010(υt		
Fuli Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
Receipt Description						\$
Full Name						
PULL INGERE						
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
		-	WIO.		1501	\$
Receipt Description						
Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
Receipt Description		-	<u> </u>	<u></u>		\$
Full Name						
Mailing Address						
City	State	Zip Code (Plus 4) —	MO.	DAY	YEAR	Amount \$
Receipt Description	<u> </u>		L			
						PAGE TOTAL
Enter Grand Total of Part E on Sche	dule I,	Detailed Summary	Page,	Sectio	n 4.	\$.33

SCHEDULE III

STATEMENT OF EXPENDITURES

Committee to Elect An	d rea	n Nougle	? He	From	1 29	/11 To 12/31/11
To Whom Paid Friends of Peter Mailing Address	S	chweyer		DAY 29		\$ 449,33
Allentown	SIA!	Zip Code (Plus 4)		mat	071	
To Whom Paid Andrea Naugle			MO.	BAY 31	YEAR) (Amount \$ 5.33
To Whom Paid Andrea Naugle Mailing Address 2304 E. Fairmont S	st.		Close	on of Expe	Lit U	nion Acet Returns
Allentoun	PA	Zip Code (Plus 4) 18109-	#5(1	.351	nt.)Wh	ich opened Acct.
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address			Description	on of Expe	inditure	
City	State	Zip Code (Plus 4)				
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address			Description	on of Expe	enditure	¥
City	State	Zip Code (Plus 4)				
To Whom Paid	<u> </u>		Mo.	DAY	YEAR	Amount
Mailing Address			Description	on of Expe	enditure	\$
City	State	Zip Code (Plus 4)				
To Whom Paid			MO.	DAY	YEAR	Amount
Mailing Address			Description	on of Expe	enditure	\$
City	State	Zip Code (Plus 4)				
To Whom Paid		-	MO.	DAY	YEAR	Amount
Mailing Address				on of Exp		\$
City	State	Zip Code (Plus 4)				
		-			232-27-112-122	Amount
To Whom Paid Mailing Address		·	MO.	DAY on of Exp	YE AR	Amount \$
Mailing Address City	Stree	Zip Code (Plus 4)	Descripti	on or exp	onditur 8	
	State	Zip Code (Flus 4)				
Enter Grand Total of Expenditures on Pa	ge 1,	Report Cover P	age, ite	m D.		PAGE TOTAL \$ 454, 66