	CAI	MPAIGN 1	FINANCE REF	ORT			
	Name and A	ddress of F	iling Candidate	or Com	mitte	ee	
Name: Address: City, State							
Candidate Committee				X			
Type of R	eport 30 Day Post	 Election	Election Date 11/08/2011	Amend	ed	Termination	
TERMINA	TION REPORT	-		No		No	
Office Sought By Candidate Party County					7		
Lehigh County Commissioner At-Large R Lehigh							
	Sumi	nary of Re	ceipts & Expend	litures			
From:	10/25/2011		To:	11/28/2	011		
A. Amoun	t Brought Forwa	rd From La	st Report		6,11	8.99	
B. Total M	Ionetary Contrib	utions & Re	ceipts (from Sche	dule I)	11,7	700.00	
C. Total Funds Available (Sum of Lines A & B)					17,818.99		
D. Total Expenditures (from Schedule III)					17,500.00		
E. Ending	Cash Balance (St	ubtract Line	D from Line C)		318.	99	
F. Value o	f In-Kind Contril	outions Reco	eived (from Scheo	lule II)	0.00)	
G. Unpaid Debts & Obligations (from Schedule IV)					20,000.00		
	nonanta inaludina						

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

SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

PAGE 2 OF ____

Detailed Summary Page				
Name of Filing Committee or Candidate VOTE USA SCHEWER	Reporting Per From 10	iod 25/204	то 11 (28/20)	<u>11</u>
PROPERTY AND THE PROPERTY OF T				
TOTAL for the Reporting Period	d (1)	\$	8	
				0.000
Contributions Received from Political Committees (Part A)		\$ 2	266.00	
All Other Contributions (Part B)		\$ &	500.00	
TOTAL for the Reporting Period	d (2)	\$ 7	700.00	
A THE STATE OF THE		10,000,000		
Contributions Received from Political Committees (Part C)		\$	Ø	
All Other Contributions (Part D)		\$ 11	,000.00	
TOTAL for the Reporting Period	d (3)		(, 500.50	
TOTAL for the Reporting Period	d (4)	\$	Ø	
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	·	\$,700.00	

Cover Page, Item B.)

Reporting Period

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.

Name of Filing Committee or Candidate VOTE USA SCHEUER		Reporting Period From 10 25	2011 to 11/28/2011
V 10 0(5). 3 0,000		DATE	AMOUNT
Full Name of Contributing Committee	10000	ene en	
Full Name of Contributing Committee I'M FOR COM, JERRY (C) Mailing Address A D C C C	NOWLES	1 3 20 H	\$ 200.00
Mailing Address 16 OXFORD STREET City TAMAQUA VA	Zip Code (Plus 4)		S
TAMAQUA PA	18252-	10 mm 1 mm	\$
Full Name of Contributing Committee			\$
Mailing Address		W 1.49 M 1.70 S 17.1 M	\$
City	Zip Code (Plus 4)		\$
Full Name of Contributing Committee		Mo PAY TEAR	
Malling Address			\$
Matring Address			\$
City State	Zip Code (Plus 4)		\$
Full Name of Contributing Committee	•	建加斯尼尔 基图73.果	\$
Meiling Address		EXITE STORY STATE	
City	Zip Code (Plus 4)		The state of the s
	-		\$
Full Name of Contributing Committee	*****		\$
Mailing Address			\$
City State	Zip Code (Plus 4)	202 2018 2111	\$
Full Name of Contributing Committee			
Mailing Address			3
			\$
City State	Zip Code (Plus 4)	MO SAY	\$
Full Name of Contributing Committee			\$
Malling Address			\$
City State	Zip Code (Plus 4)		
Full Name of Contributing Committee	_		\$
Mailing Address			\$
City State	Zip Code (Plus 4)		\$
Jan.	min mone name		\$
Foton County Total of Book A on Cale date	1 D-4-11-1-D		PAGE TOTAL
Enter Grand Total of Part A on Schedule	i, Detailed Summar	y Page, Section 2.	\$ 200.00

PAGE TOF

Reporting Period

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Name of Filing Committee or Candidate

VOTE USA SCHEUER				From <u>1</u>	0/25/2	ON TO 11/28/2011
				DATE		AMOUNT
Full Name of Contributor UBCLTO MSCHMANN Mailing Address			Med.	3	2011	\$ 200.00
Meiling Address 3003 TURNER STREET			180		YEAR.	
City, !S	tate	Zip Code (Plus 4)	Md.	DAY	YEAR	
· · · · · · · · · · · · · · · · · · ·	1	18104 -				\$
Full Name of Contributor SNEULN6			11	3	201	\$ 250.00
Mailing Address 1280 CHURCH STREET			MO.	DAY	YEAR	\$
	A-	Zip Code (Plus 4)	Mo-	DAY	斯 尔杰, 国	*
Full Name of Contributor	//-	18051-1710		- BAT		\$
Malling Address						\$
. Watting Varians			-MO	PAY	TEAR	\$
City	tate	Zip Code (Pius 4)	MO	DAY	YEAT	\$
Full Name of Contributor				DAY		\$
Mailing Address			- MO.	DAY	W.M.	*
						\$
City	tate	Zip Code (Plus 4)	MO.	E SEXY	YEAR	\$
Full Name of Contributor			Z Live		2010. Q	\$
Mailing Address			MO.		YZAN	
City	i-i- 1	V:- A-J- Bl A				\$
Sity	tate	Zip Code (Plus 4)	-MO	DAY	-YEAR	\$
Full Name of Contributor				253-734-85		\$
Mailing Address			ang.	SHDAYE		\$
City	tate	Zip Code (Plus 4)		C DAY:	76.0	•
		-				\$
Full Name of Contributor						\$
Mailing Address				10 Y		\$
City	tate	Zip Code (Plus 4)	#10 .**	DAY	E777 (#	_
Full Name of Contributor		_		REPARE		\$
Mailing Address						\$
• · · · · · · · · · · · · · · · · · · ·			MO		TAL	\$
City	tate	Zip Code (Plus 4)	25 b 12	報道・八届	EVANE.	\$
<u> </u>		1000		<u> </u>		PAGE TOTAL
Enter Grand Total of Part B on Schedul	le i,	Detailed Summary	Page,	Section	n 2.	\$ 500,00

ALL OTHER CONTRIBUTIONS

Reporting Period

and the first of t

PAGE 5 OF 1

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate

DSEB-502 (7-99)

VOTE LISA SCHEUER				From 10	25/2	2011 To 11/28/2011
				DATE		AMOUNT
FULL Name of Contributor ELMER D. GATES			MO	3	YEAR 2011	\$ 500.00
840 YORKSHIRE (LOAT)			MO	DAY	PAY EAG	\$
BETHLEHEM	State	Zip Code (Plus 4)	MC.	DAY	YEAR	\$
Employer Name			Occupation	TIPE	50	
Employer Mailing Address/Principal Place of Business			<u> </u>	- : 	······································	
FULL Name of Contributor WELCH			MO. 2	3	2611	\$ 500.00
Mailing Address WOODS LANE			e MO.	DAY	YEAR	\$
MALVERN	State	Zip Code (Plus 4) 19355 -9695	MO.	DAY	YEAR	\$
Employer Name			Occupati	REPI	RENE	avr_
Employer Mailing Address/Principal Place of Business						
Full Name of Contributor USA SCHEWER	LOF	AN)	11	DAY 4	2011	\$ 10,000.00
Mailing Address 751 BENNER RUAD			MO.	DAY	YEAR	\$
AUENTOWN	Siete PA-	Zip Code (Plus 4) 18104	MO.		YEAR	\$
Employer Name SILBERUNE			Occupati	SIDE	SUT/	CEO
Employer Mailing Address/Principal Place of Business 130 UNCOLN DR., TAMAL	AUÇ,	PA 18252				
Full Name of Contributor			Mo.	DAY	УЕЛЯ	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer Name			Occupati	on	-nn	
Employer Mailing Address/Principal Place of Business					·	
Full Name of Contributor			Mo	ero Vas	A CAN	\$
Mailing Address	· · · · · · · · · · · · · · · · · · ·		SERVICES	DAY	YEAR -	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer Name	<u></u>		Occupati	on		
Employer Mailing Address/Principal Place of Business						
Fotor Cuand Total of Bort D. on Cabad		D-4-2-4-0		01	_	PAGE TOTAL

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			R	eporting	Period	-
VOTE USA SCHEWER			I	From //	olacla	OIL TO 11/28/2011
VOID HUN JURIOURE				FIOR 1	12210	out to tolerate
MY CEHIGH COUNTY PA	2		MO.	3	2011	\$ 6,000,00
My CEHIGH COUNTY PA Mailing Address BOX 3012			Description ()	on of Exp	3077 6	N
ALLENTOWN	Siste	Zip Code (Plus 4) 8106 -				
MY CEHIGH COUNTY P	AC.		MO.	4	YEAR 2011	\$ 11,500.00
Mailing Address P.O. BOX 3012 City			COA	on of Exp	3UTZO	
ALLENTOWN	State	Zip Code (Pius 4) 18106 -				
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address			Description	on of Exp	enditure	
City	State	Zip Code (Plus 4) —		444		7 - 1
To Whom Paid			₩0.	DAY	YEAR	Amount \$
Mailing Address			Description	on of Exp	enditure	9
City	State	Zip Code (Plus 4)				
To Whom Paid	<u> </u>		Mo	DAY	YEAR	Amount \$
Mailing Address			Description	on of Exp	enditure	
спу	State	Zip Code (Plus 4)				
To Whom Paid		4.4.000	MO.	DAY	YEAH	Amount \$
Mailing Address			Descripti	on of Exp	enditure	3
City	State	Zip Code (Plus 4)				
To Whom Paid	<u></u>		MO.	DAY	YEAR	Amount \$
Mailing Address		754	Description	on of Exp	enditure	3
City	State	Zip Code (Plus 4)				
To Whom Paid			MO.	DAY	PALSE	Amount \$
Mailing Address			Description	on of Expe	enditure	
City	State	Zip Code (Plus 4)				
			<u> </u>	···	,	
Enter Grand Total of Expenditures on Page	ge 1, i	Report Cover Pa	age, Ite	m D.		* 17, 500, 60

PAGE OF

SCHEDULE IV STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Name of Filing Committee or Candidate VOTE USA SCHEUER			Reportin	g Period 10/25	2011 To 11/28/2011
Voil Car Scriptock				1-1-1	ser in Healthal
Name of Creditor USA SCHEWER		. ""			Outstanding Balance of Debt
USA SCHEWER Mailing Address 151 BENNER ROAD	DATE DEBT INCURRED	MO:	DAY	YEAR 2011	
AUENTOWN	INCORRED	State		le (Plus 4)	- 1
Description of Debt LOAN TO CAMPAIGN		177	1010		The state of the s
Name of Creditor SCHEUEN	-				Outstanding Balance of Debt
Mailing Address 151 BENNER ROAD City.	DATE DEBT	, MO.	DAY	YEAR	13 10,000.00
CITY ALLENTOWN	INCURRED	Siste		2011 le (Plus 4)	
Description of Debit CAMPALEN	 	[PA	1810	4	
Name of Creditor					Outstanding Balance of Debt
Mailing Address	DATE	Mo.	DAY	YEAR	\$
City	DEBT INCURRED	State		e (Plus 4)	
Description of Debt		3.5.6		-	
Name of Creditor					Outstanding Balance of Debt
Mailing Address	DATE DEBT INCURRED	€ МО.	DAY	YEAR	
City	TINCONNEO	State	Zip Cod	e (Plus 4)	
Description of Debt				-//20	
Name of Creditor					Outstanding Balance of Debt
Mailing Address	DATE DEBT	Mo	DAY	YEAR	
City	INCURRED	State	Zip Cod	e (Plus 4)	See
Description of Debt					
Name of Creditor					Outstanding Balance of Debt
Mailing Address	DATE DEBT	MO.	DAY.	YEAR	
City	INCURRED	State	Zip Code	tPlus 4)	
Description of Debt		<u> </u>			The second secon
Description of Debt			-		PAGE TOTAL
Description of Debt Enter Grand Total of Unpaid Debts on Page 1, Re	eport Cover	Page, I	tem G.		PAGE TOTAL \$ 20,500.80