

## CAMPAIGN FINANCE REPORT

<b>Name:</b>		<i>Armstrong 4 Executive</i>		
<b>Address:</b>		<i>3154 Brynwood Dr</i>		
<b>City, State, Zip:</b>		<i>Whitehall PA 18052</i>		
<b>Candidate</b>		<b>Committee</b>	<i>X</i>	
<b>Type of Report</b>		<b>Election Date</b>	<b>Amended</b>	<b>Termination</b>
2017 – 30 Day Post-Election		11/07/2017		
<b>Termination Report?</b>				
<b>Office Sought By Candidate</b>		<b>Party</b>	<b>County</b>	
<i>Lehigh County Executive</i>		<i>D</i>	<i>Lehigh</i>	
<b>Summary of Receipts &amp; Expenditures</b>				
<b>From:</b>	<i>10/23/2017</i>	<b>To:</b>	<i>11/27/2017</i>	
<b>A. Amount Brought Forward From Last Report</b>			<i>20,087.66</i>	
<b>B. Total Monetary Contributions &amp; Receipts (from Schedule I)</b>			<i>6,820.00</i>	
<b>C. Total Funds Available (Sum of Lines A &amp; B)</b>			<i>26,907.66</i>	
<b>D. Total Expenditures (from Schedule III)</b>			<i>15,286.77</i>	
<b>E. Ending Cash Balance (Subtract Line D from Line C)</b>			<i>11,620.89</i>	
<b>F. Value of In-Kind Contributions Received (from Schedule II)</b>			<i>0.00</i>	
<b>G. Unpaid Debts &amp; Obligations (from Schedule IV)</b>			<i>0.00</i>	

\*Complete reports including signatures are on file in the Office of Voter Registration.

**CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate <b>ARMSTRONG 4 EXECUTIVE</b>	Reporting Period From <b>10-23-2017</b> To <b>11-27-2017</b>
---	---

<b>TOTAL for the Reporting Period</b>	(1)	<b>\$ 20.<sup>00</sup></b>
---------------------------------------	-----	----------------------------

Contributions Received from Political Committees (Part A)		<b>\$ - 0 -</b>
All Other Contributions (Part B)		<b>\$ 300.<sup>00</sup></b>
<b>TOTAL for the Reporting Period</b>	(2)	<b>\$ 300.<sup>00</sup></b>

Contributions Received from Political Committees (Part C)		<b>\$ 6500.<sup>00</sup></b>
All Other Contributions (Part D)		<b>\$ - 0 -</b>
<b>TOTAL for the Reporting Period</b>	(3)	<b>\$ 6500.<sup>00</sup></b>

<b>TOTAL for the Reporting Period</b>	(4)	<b>\$ - 0 -</b>
---------------------------------------	-----	-----------------

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)		<b>\$ 6820.<sup>00</sup></b>
--	--	------------------------------

### 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

*ARMSTRONG EXECUTIVE*

Reporting Period

From 10-23-2017 to 11-27-2017

AMOUNT	DATE	Full Name of Contributing Committee	Mailing Address	City	State	Zip Code (Plus 4)
\$						
\$						
\$						
\$						
\$						
\$						
\$						
\$						
\$						
\$						
\$						
\$						
\$						
\$						
\$						
\$						
\$						
\$						
\$						
\$						
\$						
\$						

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL \$ 0

**PART B**  
**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 <b>ARMSTRONG &amp; EXECUTIVE</b>	Reporting Period From <b>10-23-2017</b> To <b>11-27-2017</b>
---	---

	DATE	AMOUNT
Full Name of Contributor <b>TITOMAS S. MULLER</b>	<b>11 3 2017</b>	<b>\$ 100.<sup>00</sup></b>
Mailing Address <b>2600 GRACIE LONE</b>		\$
City <b>MACUNGIE</b> State: <b>PA</b> Zip Code (Plus 4) <b>18062 -</b>		\$
Full Name of Contributor <b>M. J. MULLER</b>	<b>11 3 2017</b>	<b>\$ 100.<sup>00</sup></b>
Mailing Address <b>2600 GRACIE LONE</b>		\$
City <b>MACUNGIE</b> State: <b>PA</b> Zip Code (Plus 4) <b>18062 -</b>		\$
Full Name of Contributor <b>JOSEPH G. EBNER</b>	<b>11 27 2017</b>	<b>\$ 100.<sup>00</sup></b>
Mailing Address <b>3886 ROSEWOOD LANE</b>		\$
City <b>WHITEHALL</b> State: <b>PA</b> Zip Code (Plus 4) <b>18052 -</b>		\$
Full Name of Contributor		\$
Mailing Address		\$
City		\$
Full Name of Contributor		\$
Mailing Address		\$
City		\$
Full Name of Contributor		\$
Mailing Address		\$
City		\$
Full Name of Contributor		\$
Mailing Address		\$
City		\$
Full Name of Contributor		\$
Mailing Address		\$
City		\$

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL  
**\$ 300.<sup>00</sup>**

**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.

Name of Filing Committee or Candidate <b>ARMSTRONG 4 EXECUTIVE</b>	Reporting Period From <u>10-23-2017</u> To <u>11-27-2017</u>
---	---

	DATE	AMOUNT
Full Name of Contributing Committee <b>SEIU HEALTHCARE PA COPE</b>	<b>11 2 2017</b>	<b>\$ 2500.<sup>00</sup></b>
Mailing Address <b>1500 N. 2nd St., Suite 12</b>		\$
City <b>HARRISBURG</b> State <b>PA.</b> Zip Code (Plus 4) <b>17102 -</b>		\$
Full Name of Contributing Committee <b>NEW AMERICANS CAUCUS PAC</b>	<b>11 22 2017</b>	<b>\$ 4000.<sup>00</sup></b>
Mailing Address <b>1139 LEIGHT AVENUE Suite 300</b>		\$
City <b>WHITEHALL</b> State <b>PA.</b> Zip Code (Plus 4) <b>18052 -</b>		\$
Full Name of Contributing Committee		\$
Mailing Address		\$
City		\$
Full Name of Contributing Committee		\$
Mailing Address		\$
City		\$
Full Name of Contributing Committee		\$
Mailing Address		\$
City		\$
Full Name of Contributing Committee		\$
Mailing Address		\$
City		\$
Full Name of Contributing Committee		\$
Mailing Address		\$
City		\$
Full Name of Contributing Committee		\$
Mailing Address		\$
City		\$

**PAGE TOTAL**  
**\$ 6500.<sup>00</sup>**

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

# PART D ALL OTHER CONTRIBUTIONS

**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

*ARMSTRONG EXECUTIVE*

Reporting Period  
From 10-23-2017 to 11-27-2017

		DATE		AMOUNT
<b>Full Name of Contributor</b>				
Mailing Address				
City	State	Zip Code (Plus 4)		\$
Employer Name				
Employer Mailing Address/Principal Place of Business				
<b>Full Name of Contributor</b>				
Mailing Address				
City	State	Zip Code (Plus 4)		\$
Employer Name				
Employer Mailing Address/Principal Place of Business				
<b>Full Name of Contributor</b>				
Mailing Address				
City	State	Zip Code (Plus 4)		\$
Employer Name				
Employer Mailing Address/Principal Place of Business				
<b>Full Name of Contributor</b>				
Mailing Address				
City	State	Zip Code (Plus 4)		\$
Employer Name				
Employer Mailing Address/Principal Place of Business				
<b>Full Name of Contributor</b>				
Mailing Address				
City	State	Zip Code (Plus 4)		\$
Employer Name				
Employer Mailing Address/Principal Place of Business				
<b>Full Name of Contributor</b>				
Mailing Address				
City	State	Zip Code (Plus 4)		\$
Employer Name				
Employer Mailing Address/Principal Place of Business				
<b>PAGE TOTAL</b>				\$ <u>0</u>

Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.

**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 <p style="font-size: 1.2em; margin: 0;"><i>ARMSTRONG EXECUTIVE</i></p>	Reporting Period From <u>10-23-2017</u> To <u>11-27-2017</u>
---	---

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)				Amount \$
Receipt Description						
Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)				Amount \$
Receipt Description						
Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)				Amount \$
Receipt Description						
Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)				Amount \$
Receipt Description						
Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)				Amount \$
Receipt Description						
Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)				Amount \$
Receipt Description						

<b>PAGE TOTAL</b>
\$ — 0 —

**Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.**

# 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

Name of Filing Committee or Candidate <b>ARMSTRONG 4 EXECUTIVE</b>	Reporting Period From <b>10-23-2017</b> To <b>11-27-2017</b>
---	---

TOTAL for the Reporting Period (1)	\$ - 0 -
------------------------------------	----------

TOTAL for the Reporting Period (2)	\$ - 0 -
------------------------------------	----------

TOTAL for the Reporting Period (3)	\$ - 0 -
------------------------------------	----------

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.)	\$ - 0 -
--	----------



**SCHEDULE II  
PART F  
IN-KIND CONTRIBUTIONS RECEIVED**  
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate <b>ARMSTRONG EXECUTIVE</b>	Reporting Period From <b>10-23-2017</b> To <b>11-27-2017</b>
---	---

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	\$
Mailing Address				MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor				MO	DAY	YEAR	\$
Mailing Address				MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor				MO	DAY	YEAR	\$
Mailing Address				MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor				MO	DAY	YEAR	\$
Mailing Address				MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor				MO	DAY	YEAR	\$
Mailing Address				MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor				MO	DAY	YEAR	\$
Mailing Address				MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Description of Contribution:							

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL  
\$   0  -

**SCHEDULE II  
PART G  
IN-KIND CONTRIBUTIONS RECEIVED  
VALUE OVER \$250.00**

Name of Filing Committee or Candidate <b>ARMSTRONG EXECUTIVE</b>	Reporting Period From <u>10-23-2017</u> To <u>11-27-2017</u>
---	---

				DATE		AMOUNT
Full Name of Contributor						\$
Mailing Address						\$
City	State	Zip Code (Plus 4)				\$
Employer of Contributor				Occupation		
Employer Mailing Address/Principal Place of Business				Description of Contribution		
Full Name of Contributor						\$
Mailing Address						\$
City	State	Zip Code (Plus 4)				\$
Employer of Contributor				Occupation		
Employer Mailing Address/Principal Place of Business				Description of Contribution		
Full Name of Contributor						\$
Mailing Address						\$
City	State	Zip Code (Plus 4)				\$
Employer of Contributor				Occupation		
Employer Mailing Address/Principal Place of Business				Description of Contribution		
Full Name of Contributor						\$
Mailing Address						\$
City	State	Zip Code (Plus 4)				\$
Employer of Contributor				Occupation		
Employer Mailing Address/Principal Place of Business				Description of Contribution		

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

PAGE TOTAL  
\$ — 0 —

SCHEDULE III  
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <b>ARMSTRONG 4 EXECUTIVE</b>	Reporting Period From <b>10-23-2017</b> To <b>11-27-2017</b>
---	---

To Whom Paid	Date	Amount	Description of Expenditure
LV PRINT CENTER 1701 UNION Blvd Suite 114 ALLENTOWN PA 18109 -	10 30 2017	\$ 6,581.45	LEHIGH COUNTY MAILER
FRIENDS OF SHOARIB 1601 KENNINGTON LANE MACUNGIE PA 18062 -	11 2 2017	\$ 1,041.64	JOINT MAILER EXPENSE L.V. PRINT CENTER
Phillips ARMSTRONG 3154 Brynwood Drive WHITEHALL PA 18052 -	10 28 2017	\$ 266.00	E.P. DEMS FALL FEST - REIMB. (21.00) U.S. POSTAGE - REIMB. (245.00)
RICH WILKINS 2 GEORGE ST. EASTON PA 18045 -	11 18 2017	\$ 1,250.00	POLITICAL WORK
LV PRINT CENTER 1701 UNION Blvd Suite 114 ALLENTOWN PA 18109 -	11 18 17	\$ 1,696.00	CAMPAIGN FLYERS
TUSKR, INC 1330 BROADWAY OAKLAND CA 94612 -	11 21 2017	\$ 617.44	CAMPAIGN TEXT MARKETING
ASSANTE RISTORANTE 2050 MAIN ST. Northampton PA 18067 -	11 18 2017	\$ 681.73	CAMPAIGN DINNER MEETING
TIMES NEWS 594 Blakeslee Blvd West LEIGHTON PA 18235 -	10 31 2017	\$ 790.85	NEWS PAPER ADVERTISEMENT

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL
\$

SCHEDULE III  
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <b>ARMSTRONG 4 EXECUTIVE</b>	Reporting Period From <b>10-23-2017</b> To <b>11-27-2017</b>
---	---

To Whom Paid	City	State	Zip Code (Plus 4)	Date	Amount	Description of Expenditure
ROBODIAL ORG LLC	FALLS CHURCH	VA	22046-	11/6/2017	\$ 1,001.61	PHONE SOLICITATION
STAPLES	WHITEHALL	PA	18052-	11/1/2017	\$ 37.08	PAPER SUPPLIES
USPS	WHITEHALL	PA	18052-	10/28/2017	\$ 245.00	POSTAGE
FACEBOOK, INC	MENLO PARK	CA	94025-	11/5/2017	\$ 129.43	SOCIAL MEDIA MESSAGING
BOB ELBICH FOR LEHIGH COUNTY COMMISSIONER	FOGELSVILLE	PA	18051-	11/26/2017	\$ 319.54	WHITEHALL CORAY JOINT MAILER LV PRINT CENTER
DENNIS SHARKEY	WHITEHALL	PA	18052-	11/27/2017	\$ 25.00	POSTAGE, ENVELOPES, COPY EXP.
TIME WHY'S	ALLEGHTOWN	PA	18104-	11/22/2017	\$ 500.00	POST ELECTION RECEPTION ENTERTAINMENT
AFC BANK	WHITEHALL	PA	18052-	11/26/2017	\$ 4.00	OCT AND NOV STATEMENT FEE

Enter **Grand Total** of Expenditures on Page 1, Report Cover Page, Item D.

TO WHOM PAID: PHILLIPS ARMSTRONG  
3154 BRYNWOOD DRIVE  
WHITEHALL, PA 18052

11-27-2017  
\$100.00  
REPAY 3-15-2017 LOAN

PAGE TOTAL	\$ 15,186.77
<b>\$ 15,286.77 GRAND TOTAL</b>	

## 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 <b>ARMSTRONG 4 EXECUTIVE</b>	Reporting Period From <b>10-23-2017</b> To <b>11-27-2017</b>
---	---

Name of Creditor <b>PHILLIPS M. ARMSTRONG</b>	DATE DEBT INCURRED <b>3 15 2017</b>	Outstanding Balance of Debt \$ <b>— 0 —</b>
Mailing Address <b>3154 BAYWOOD DRIVE</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18052-</b>
City <b>WHITEHALL, PA</b>		

Description of Debt  
**ON 11-27-2017 REPAYED \$100.00 LOAN FROM PHILLIPS M. ARMSTRONG LOAN DATA 3-15-2017**

Name of Creditor	DATE DEBT INCURRED	Outstanding Balance of Debt
Mailing Address	State	Zip Code (Plus 4)
City		
Description of Debt		

Name of Creditor	DATE DEBT INCURRED	Outstanding Balance of Debt
Mailing Address	State	Zip Code (Plus 4)
City		
Description of Debt		

Name of Creditor	DATE DEBT INCURRED	Outstanding Balance of Debt
Mailing Address	State	Zip Code (Plus 4)
City		
Description of Debt		

Name of Creditor	DATE DEBT INCURRED	Outstanding Balance of Debt
Mailing Address	State	Zip Code (Plus 4)
City		
Description of Debt		

Name of Creditor	DATE DEBT INCURRED	Outstanding Balance of Debt
Mailing Address	State	Zip Code (Plus 4)
City		
Description of Debt		

Name of Creditor	DATE DEBT INCURRED	Outstanding Balance of Debt
Mailing Address	State	Zip Code (Plus 4)
City		
Description of Debt		

Name of Creditor	DATE DEBT INCURRED	Outstanding Balance of Debt
Mailing Address	State	Zip Code (Plus 4)
City		
Description of Debt		

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

PAGE TOTAL \$ <b>— 0 —</b>
-------------------------------