

CAMPAIGN FINANCE REPORT				
<b>Name:</b>		<i>Committee to Elect Percy Dougherty</i>		
<b>Address:</b>		<i>5726 Sandtrap Ln</i>		
<b>City, State, Zip:</b>		<i>Allentown PA 18106</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>
<i>2017 – 30 Day Post-Election</i>		<i>11/07/2017</i>		
<b>Termination Report?</b>				
<b>Office Sought By Candidate</b>		<b>Party</b>	<b>County</b>	
<i>Lehigh County Commissioner Dist #2</i>		<i>R</i>	<i>Lehigh</i>	
Summary of Receipts & Expenditures				
<b>From:</b>	<i>10/24/2017</i>	<b>To:</b>	<i>11/27/2017</i>	
<b>A. Amount Brought Forward From Last Report</b>			<i>3,400.00</i>	
<b>B. Total Monetary Contributions &amp; Receipts (from Schedule I)</b>			<i>5,965.00</i>	
<b>C. Total Funds Available (Sum of Lines A &amp; B)</b>			<i>9,265.00</i>	
<b>D. Total Expenditures (from Schedule III)</b>			<i>4,371.12</i>	
<b>E. Ending Cash Balance (Subtract Line D from Line C)</b>			<i>4,893.88</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>(-6,429.02)</i>	

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

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <b>PERCY DAUGHERTY</b>	Reporting Period From <b>10/23/2017</b> to <b>12/31/2017</b>
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TOTAL for the Reporting Period <b>11-3-17</b> (1)	\$ <b>705.00</b>
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Contributions Received from Political Committees (Part A)		\$ <b>250.00</b>
All Other Contributions (Part B)		\$ <b>3510.00</b>
TOTAL for the Reporting Period	(2)	\$ <b>3760.00</b>

Contributions Received from Political Committees (Part C)	<b>11-3</b>	\$ <b>1000.00</b>
All Other Contributions (Part D)	<b>11-3</b>	\$ <b>500.00</b>
TOTAL for the Reporting Period	(3)	\$ <b>1500.00</b>

TOTAL for the Reporting Period	(4)	\$ <b>5965.00</b>
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<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>5965.00</b>
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*Handwritten notes:*  
 11-3  
 2500  
 3510  
 1000  
 500  
 5965

**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 <i>PERCY DAUGHERTY</i>	Reporting Period From: <i>10/23/2017</i> To: <i>12/07/2017</i>
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				DATE	AMOUNT		
Full Name of Contributing Committee <i>CITIZENS FOR MACKENZIE</i>				MO	DAY	YEAR	
Mailing Address <i>3620 LINCOLN AVE</i>				<i>11</i>	<i>03</i>	<i>2017</i>	\$ <i>250.00</i>
City <i>ALLENTOWN</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18103</i>					

<b>PAGE TOTAL</b>
\$ <i>250.00</i>

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

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>PERCY DAUGHERTY</b>	Reporting Period From <u>10/23/17</u> To <u>12/07/2017</u>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributor <b>SAM SAXTON</b>	11	3	17	\$ 200.-
Mailing Address <b>3712 MAUGH CHUNK Rd</b>	MO.	DAY	YEAR	\$
City <b>ALLENTOWN</b> State <b>PA</b> Zip Code (Plus 4) <b>18104</b>	MO.	DAY	YEAR	\$
Full Name of Contributor <b>ANN VLOT</b>	11	3	17	\$ 240.-
Mailing Address <b>8979 NORTH LOOP Rd</b>	MO.	DAY	YEAR	\$
City <b>SLATINGTON</b> State <b>PA</b> Zip Code (Plus 4) <b>18080</b>	MO.	DAY	YEAR	\$
Full Name of Contributor <b>DOUG BROWN</b>	11	3	17	\$ 250.00
Mailing Address <b>1598 SAUCON VALLEY Rd</b>	MO.	DAY	YEAR	\$
City <b>BETHLEHEM</b> State <b>PA</b> Zip Code (Plus 4) <b>18015</b>	MO.	DAY	YEAR	\$
Full Name of Contributor <b>TOMAS JOHNS</b>	11	3	17	\$ 250.00
Mailing Address <b>3690 RITTER Rd</b>	MO.	DAY	YEAR	\$
City <b>ALLENTOWN</b> State <b>PA</b> Zip Code (Plus 4) <b>18104</b>	MO.	DAY	YEAR	\$
Full Name of Contributor <b>WERNER REINARTZ</b>	11	3	17	\$ 250.-
Mailing Address <b>5509 DAISY LANE</b>	MO.	DAY	YEAR	\$
City <b>COOPERS BURG</b> State <b>PA</b> Zip Code (Plus 4) <b>18036</b>	MO.	DAY	YEAR	\$
Full Name of Contributor <b>CHRISTOPHER ZAJACEK</b>	MO.	DAY	YEAR	\$ 250.-
Mailing Address <b>2299 BROADHEAD ROAD</b>	MO.	DAY	YEAR	\$
City <b>BETHLEHEM</b> State <b>PA</b> Zip Code (Plus 4) <b>18020</b>	MO.	DAY	YEAR	\$
Full Name of Contributor <b>LEE A. BUTZ</b>	10	31	17	\$ 250.00
Mailing Address <b>5633 TREXLER BLVD</b>	MO.	DAY	YEAR	\$
City <b>ALLENTOWN</b> State <b>PA</b> Zip Code (Plus 4) <b>18104</b>	MO.	DAY	YEAR	\$
Full Name of Contributor <b>KATHERINE DIXON</b>	MO.	DAY	YEAR	\$ 100.00
Mailing Address <b>806 SPRING CREEK ROAD</b>	MO.	DAY	YEAR	\$
City <b>ALBURTIS</b> State <b>PA</b> Zip Code (Plus 4) <b>18011-</b>	MO.	DAY	YEAR	\$

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

PAGE TOTAL  
**\$ 1790.00**

## 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				Reporting Period			
PERCY DAUGHERTY				From 10/23/17 To 12/07/2017			
Full Name of Contributor				DATE			AMOUNT
KAREN CSANADI				MO.	DAY	YEAR	\$ 75.00
Mailing Address				MO.	DAY	YEAR	\$
5918 MEADOW DR							
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
OREFIELD		PA	18069				
Full Name of Contributor				MO.	DAY	YEAR	\$ 75.00
BOB HALE				11	3	17	
Mailing Address				MO.	DAY	YEAR	\$
3201 BRIDLE PATH RD							
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
EASTON		PA	18045				
Full Name of Contributor				MO.	DAY	YEAR	\$ 75.00
CHRIS KOTCH				11	3	17	
Mailing Address				MO.	DAY	YEAR	\$
8 S LEMON ST							
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
MEDIA		PA	19063				
Full Name of Contributor				MO.	DAY	YEAR	\$ 90.00
DON DENBERG				11	3	17	
Mailing Address				MO.	DAY	YEAR	\$
1254 CLEARVIEW CIR							
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
ALLENTOWN		PA	18103-				
Full Name of Contributor				MO.	DAY	YEAR	\$ 100.00
SCOTT SIEBER				11	3	17	
Mailing Address				MO.	DAY	YEAR	\$
6071 ST PETERS RD							
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
EMMAUS		PA	18049				
Full Name of Contributor				MO.	DAY	YEAR	\$ 100.00
DARRELL COOK				11	3	17	
Mailing Address				MO.	DAY	YEAR	\$
685 BRANDYWINE RD							
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
NAZARETH		PA	18064				
Full Name of Contributor				MO.	DAY	YEAR	\$ 100.00
JOHN HAYS				11	3	17	
Mailing Address				MO.	DAY	YEAR	\$
7987 SALEM BIBLE CHURCH RD							
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
MACUNGIE		PA	18062				
Full Name of Contributor				MO.	DAY	YEAR	\$ 100.-
MARY ELLEN IOBST				11	3	17	
Mailing Address				MO.	DAY	YEAR	\$
828 TAYLOR DR							
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
ALLENTOWN		PA	18103				
PAGE TOTAL							\$ 715.-
Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.							

# 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>PERCY DAUGHERTY</b>	Reporting Period From <b>10/23/17</b> To <b>12/07/2017</b>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
JEFFREY MATZKIN Mailing Address 2005 HONEYSUCKLE RD City BETHLEHEM PA 18015	11	3	17	\$ 100.00
BRAD OSBORNE Mailing Address 1460 COVENTRY RD City ALLENTOWN PA 18104	11	3	17	\$ 100.00
DANIEL PORESKY Mailing Address 824 N BROAD ST City ALLENTOWN PA 18104	11	3	17	\$ 100.-
JANINE REPPERT Mailing Address 6711 CURVEY DR City NEW TRIPOLLI PA 18066	11	3	17	\$ 100.-
JULIE THOMASES Mailing Address 825 N BROAD ST City ALLENTOWN PA 18104	11	3	17	\$ 100.-
KICK FREDERICK Mailing Address 2790 CAROLE LANE City ALLENTOWN PA 18104	11	3	17	\$ 125.-
JAN MORAN Mailing Address 1751 LEHIGH PARKWAY N City ALLENTOWN PA 18103	11	3	17	\$ 140.-
JUDI ROGGIE Mailing Address 1829 FELICITY LN City HELLERTOWN PA 18054	11	3	17	\$ 140

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

PAGE TOTAL  
**\$ 905.-**

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>PERCY DAUGHERTY</b>	Reporting Period From <b>10/23/17</b> To <b>12/07/2017</b>
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Full Name of Contributor				DATE			AMOUNT
				MO.	DAY	YEAR	
VARIOUS CASH DONATIONS				10	26	17	\$ 100.00
Mailing Address 5726 SANDTRAP LANE				MO.	DAY	YEAR	\$
City Allentown		State PA	Zip Code (Plus 4) 18106	MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$

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

PAGE TOTAL <b>\$ 100.00</b>
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# 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>PERLY DAUGHERTY</b>	Reporting Period From <b>10/03/2017</b> to <b>12/07/2017</b>
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Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
<b>LEMION VALLEY ASSOC OF REALTORS</b>	<b>11</b>	<b>3</b>	<b>2017</b>	<b>\$ 500.00</b>
Mailing Address <b>10 SOUTH COMMERCE WAY</b>	MO.	DAY	YEAR	\$
City <b>BETHLEHEM</b> State <b>PA</b> Zip Code (Plus 4) <b>18017</b>	MO.	DAY	YEAR	\$
<b>AIR PRODUCTS PA POLITICAL ACTION</b>	<b>11</b>	<b>4</b>	<b>2017</b>	<b>\$ 500.00</b>
Mailing Address <b>P.O. Box 441</b>	MO.	DAY	YEAR	\$
City <b>TREXKERTOWN</b> State <b>PA</b> Zip Code (Plus 4) <b>18087</b>	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$

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

PAGE TOTAL <b>\$ 1000.00</b>
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**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 <b>PERCY DOUGHERTY</b>	Reporting Period From <b>10/03/2017</b> to <b>12/07/2017</b>
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				DATE			AMOUNT
Full Name of Contributor				MO.	DAY	YEAR	
<b>DEAN N BROWNING</b>				11	3	2017	\$ 500.00
Mailing Address				MO.	DAY	YEAR	
<b>2432 W CONGRESS ST</b>							\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	
<b>ALLENTOWN</b>	<b>PA</b>	<b>18104</b>					\$
Employer Name				Occupation			
<b>NEW WORLD AVIATION</b>				<b>CEO</b>			
Employer Mailing Address/Principal Place of Business							
<b>LV3 AIRPORT, 987 POSTAL RD, ALLENTOWN, PA 18109</b>							
Full Name of Contributor				MO.	DAY	YEAR	
Mailing Address				MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	
		-					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor				MO.	DAY	YEAR	
Mailing Address				MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	
		-					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor				MO.	DAY	YEAR	
Mailing Address				MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	
		-					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor				MO.	DAY	YEAR	
Mailing Address				MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	
		-					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							

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

PAGE TOTAL  
**\$ 500.00**

SCHEDULE III  
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <b>PERCY DAUGHERTY</b>	Reporting Period From <u>10/23/2017</u> To <u>12/07/2017</u>
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To Whom Paid <b>CHRIS RUSSELL</b>	11   13   17	Amount <b>\$ 4058.04</b>
Mailing Address <b>5 BANYAN COURT</b>		
City <b>JACKSON</b>	State <b>NJ</b>	Zip Code (Plus 4) <b>08527</b>
Description of Expenditure <b>CAMPAIGN FLYER</b>		

To Whom Paid <b>JOHN LANDIS - WINDELL WINERY</b>	10   25   17	Amount <b>\$ 313.08</b>
Mailing Address <b>172 ARROWHEAD LANE</b>		
City <b>BREINIGSVILLE</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18031</b>
Description of Expenditure		

To Whom Paid		Amount <b>\$</b>
Mailing Address		
City	State	Zip Code (Plus 4)
Description of Expenditure		

To Whom Paid		Amount <b>\$</b>
Mailing Address		
City	State	Zip Code (Plus 4)
Description of Expenditure		

To Whom Paid		Amount <b>\$</b>
Mailing Address		
City	State	Zip Code (Plus 4)
Description of Expenditure		

To Whom Paid		Amount <b>\$</b>
Mailing Address		
City	State	Zip Code (Plus 4)
Description of Expenditure		

To Whom Paid		Amount <b>\$</b>
Mailing Address		
City	State	Zip Code (Plus 4)
Description of Expenditure		

To Whom Paid		Amount <b>\$</b>
Mailing Address		
City	State	Zip Code (Plus 4)
Description of Expenditure		

**PAGE TOTAL**  
**\$ 4371.12**

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

## 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>Percy DAUGHERTY</b>	Reporting Period From <u>10/23/2017</u> To <u>12/07/2017</u>
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Name of Creditor <b>Percy Daugherty</b>	DATE DEBT INCURRED	11	06	17	Outstanding Balance of Debt \$ 867.59
Mailing Address <b>5726 Sand Trap Lane</b>		State	Zip Code (Plus 4)		
City <b>Allentown</b>		<b>PA</b>	<b>18106</b>		

Description of Debt  
**STAPLES SUPPLIES**

Name of Creditor <b>Percy Daugherty</b>	DATE DEBT INCURRED	11	06	17	Outstanding Balance of Debt \$ 347.22
Mailing Address <b>5726 Sand Trap Lane</b>		State	Zip Code (Plus 4)		
City <b>Allentown</b>		<b>PA</b>	<b>18106</b>		

Description of Debt  
**Mileage Reimbursement**

Name of Creditor <b>Percy Daugherty</b>	DATE DEBT INCURRED	9	30	17	Outstanding Balance of Debt \$ 100.00
Mailing Address <b>5726 Sand Trap Lane</b>		State	Zip Code (Plus 4)		
City <b>Allentown</b>		<b>PA</b>	<b>18106</b>		

Description of Debt  
**Lehigh Co Nominations Form**

Name of Creditor <b>Percy Daugherty</b>	DATE DEBT INCURRED	10	23	17	Outstanding Balance of Debt \$ 20.00
Mailing Address <b>5726 Sand Trap Lane</b>		State	Zip Code (Plus 4)		
City <b>Allentown</b>		<b>PA</b>	<b>18106</b>		

Description of Debt  
**Notary Fees**

Name of Creditor <b>Percy Daugherty</b>	DATE DEBT INCURRED	11	1	17	Outstanding Balance of Debt \$ 1596.21
Mailing Address <b>5726 Sand Trap Lane</b>		State	Zip Code (Plus 4)		
City <b>Allentown</b>		<b>PA</b>	<b>18106</b>		

Description of Debt  
**MAIL FINDER**

Name of Creditor <b>Percy Daugherty</b>	DATE DEBT INCURRED	10	7	17	Outstanding Balance of Debt \$ 98.00
Mailing Address <b>5726 Sand Trap Lane</b>		State	Zip Code (Plus 4)		
City <b>Allentown</b>		<b>PA</b>	<b>18106</b>		

Description of Debt

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

**PAGE TOTAL**  
**\$ 3029.02**

## 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 <i>PERCY DAUGHERTY</i>	Reporting Period From <i>10/23/2017</i> To <i>12-07-2017</i>
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Name of Creditor <i>Percy Daugherty</i>			Outstanding Balance of Debt \$ <i>2000.00</i>	
Mailing Address <i>5726 Sand Trap Lane</i>	DATE DEBT INCURRED	State <i>PA</i>	Zip Code (Plus 4) <i>18016</i>	
City <i>WISCONSILLI</i>				

Name of Creditor <i>Percy DAUGHERTY</i>			Outstanding Balance of Debt \$ <i>1400.00</i>	
Mailing Address <i>5726 Sand Trap Lane</i>	DATE DEBT INCURRED	State <i>PA</i>	Zip Code (Plus 4) <i>18016</i>	
City <i>WISCONSILLI</i>				

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

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

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

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

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

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

PAGE TOTAL  
\$ *3400.00*