

## CAMPAIGN FINANCE REPORT

<b>CAMPAIGN FINANCE REPORT</b>				
<b>Name:</b>	<i>Government That Works</i>			
<b>Address:</b>	<i>2600 Gracie Lone</i>			
<b>City, State, Zip:</b>	<i>Macungie Pa 18062</i>			
<b>Candidate</b>		<b>Committee</b>		
<b>Type of Report</b>	<b>Election Date</b>	<b>Amended</b>	<b>Termination</b>	
2017 – ANNUAL REPORT			<b>YES</b>	
<b>Termination Report?</b>				
<b>Office Sought By Candidate</b>	<b>Party</b>	<b>County</b>		
<i>Lehigh County PAC</i>		<i>Lehigh</i>		
<b>Summary of Receipts &amp; Expenditures</b>				
<b>From:</b>	<i>1/1/2017</i>	<b>To:</b>	<i>12/31/2017</i>	
<b>A. Amount Brought Forward From Last Report</b>			<i>2,712.60</i>	
<b>B. Total Monetary Contributions &amp; Receipts (from Schedule I)</b>			<i>2,600.00</i>	
<b>C. Total Funds Available (Sum of Lines A &amp; B)</b>			<i>5,312.60</i>	
<b>D. Total Expenditures (from Schedule III)</b>			<i>5,312.60</i>	
<b>E. Ending Cash Balance (Subtract Line D from Line C)</b>			<i>0.00</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>(-370.67)</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>GOVERNMENT TINT WORKS</b>	Reporting Period From <b>11/2017</b> To <b>12/31/2017</b>
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<b>1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR</b>	
TOTAL for the Reporting Period (1)	\$ <b>0</b>

<b>2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)</b>	
Contributions Received from Political Committees (Part A)	\$
All Other Contributions (Part B)	\$ <b>100.00</b>
TOTAL for the Reporting Period (2)	\$ <b>100.00</b>

<b>3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)</b>	
Contributions Received from Political Committees (Part C)	\$
All Other Contributions (Part D)	\$ <b>2500.00</b>
TOTAL for the Reporting Period (3)	\$ <b>2,500.00</b>

<b>4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)</b>	
TOTAL for the Reporting Period (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>\$ 2,600.00</b>
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# 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>GOVERNMENT THAT WORKS</b>	Reporting Period From <b>11/1/2017</b> To <b>12/31/2017</b>
-----------------------------------------------------------------------	----------------------------------------------------------------

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Ed Zucal	2	13	17	\$ 100.00
Mailing Address 650 N. 16TH ST.	MO.	DAY	YEAR	\$
City Allentown	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18102-	MO.	DAY	YEAR	\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$

**PAGE TOTAL**  
**\$ 100.00**

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

**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>GOVERNMENT THAT WORKS</b>	Reporting Period From <b>1/1/2017</b> To <b>12/31/2017</b>
-----------------------------------------------------------------------	---------------------------------------------------------------

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
<b>THOMAS MULLER</b>	10	1	17	\$ 1,500.00
Mailing Address <b>2600 GRACE LOPE</b>	MO.	DAY	YEAR	\$
City <b>MACUGIE</b> State <b>PA</b> Zip Code (Plus 4) <b>18062 -</b>	MO.	DAY	YEAR	\$
Employer Name <b>COUNTY OF LEHIGH</b>		Occupation <b>COUNTY EXECUTIVE</b>		
Employer Mailing Address/Principal Place of Business <b>17 S. 7TH ST., ALBRIGHTOWN, PA 18101</b>				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
<b>MURAT GOZEL</b>	12	5	17	\$ 1,000.00
Mailing Address <b>1139 LEHIGH ST.</b>	MO.	DAY	YEAR	\$
City <b>WHITEHALL</b> State <b>PA</b> Zip Code (Plus 4) <b>18052 -</b>	MO.	DAY	YEAR	\$
Employer Name <b>NATURAL FOOD GROUP</b>		Occupation <b>CEO</b>		
Employer Mailing Address/Principal Place of Business <b>1139 LEHIGH ST. WHITEHALL PA 18052</b>				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Employer Name		Occupation		
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Employer Name		Occupation		
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address	MO.	DAY	YEAR	\$
City	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  
**\$2,500.00**

SCHEDULE III  
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <b>GOVERNMENT THAT WORKS</b>	Reporting Period From <b>11/2017</b> To <b>12/31/2017</b>
-----------------------------------------------------------------------	--------------------------------------------------------------

To Whom Paid	MO.	DAY	YEAR	Amount
<b>BROOKSIDE COUNTRY CLUB</b>	<b>2</b>	<b>13</b>	<b>17</b>	<b>\$1,259.57</b>
Mailing Address <b>901 Willow Lane</b>	Description of Expenditure <b>CAMPAIGN APPROPRIEMENT</b>			
City <b>MARCUSGIE</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18062-</b>		
<b>EAST PASS DEMOCRATIC CLUB</b>	<b>2</b>	<b>2</b>	<b>17</b>	<b>\$97.50</b>
Mailing Address <b>P.O. Box 6</b>	Description of Expenditure <b>AUTO DECALS</b>			
City <b>EMMAUS</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18049-</b>		
<b>CACTUS BLUE</b>	<b>2</b>	<b>6</b>	<b>17</b>	<b>\$33.46</b>
Mailing Address <b>2915 SCHORERSVILLE RD.</b>	Description of Expenditure <b>CANDIDATE RECRUITING</b>			
City <b>BETHLEHEM</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18017-</b>		
<b>FRIENDS OF ED ZUCAL</b>	<b>2</b>	<b>16</b>	<b>17</b>	<b>\$100.00</b>
Mailing Address <b>650 N. 16TH ST</b>	Description of Expenditure <b>CAMPAIGN CONTRIBUTION</b>			
City <b>ALBERTOWN</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18102-</b>		
<b>FRIENDS OF AMY ZOBEL</b>	<b>3</b>	<b>17</b>	<b>17</b>	<b>\$100.00</b>
Mailing Address <b>502 12TH AVE.</b>	Description of Expenditure <b>CAMPAIGN CONTRIBUTION</b>			
City <b>BETHLEHEM</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18018</b>		
<b>PA DEMOCRATIC CAUCUS OF CTY. COMMISSIONERS</b>	<b>3</b>	<b>27</b>	<b>17</b>	<b>\$35.00</b>
Mailing Address <b>UNKNOWN</b>	Description of Expenditure <b>CAUCUS BREAKFAST @ CCAP</b>			
City	State	Zip Code (Plus 4) <b>-</b>		
<b>BORDERLINE RESTAURANT</b>	<b>5</b>	<b>31</b>	<b>17</b>	<b>\$14.49</b>
Mailing Address <b>2100 W. UNION BLVD.</b>	Description of Expenditure <b>ENDORSEMENT BREAKFAST</b>			
City <b>BETHLEHEM</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18018-</b>		
<b>PA DEMOCRATIC CAUCUS OF CTY. COMMISSIONERS</b>	<b>8</b>	<b>7</b>	<b>17</b>	<b>\$35.00</b>
Mailing Address <b>UNKNOWN</b>	Description of Expenditure <b>CAUCUS BREAKFAST @ CCAP</b>			
City	State	Zip Code (Plus 4) <b>-</b>		

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

PAGE TOTAL <b>\$1,675.02</b>
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STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <b>GOVERNMENT THAT WORKS</b>	Reporting Period From <u>11/2017</u> To <u>12/31/2017</u>
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To Whom Paid	MO.	DAY	YEAR	Amount
<b>WINE &amp; SPIRITS</b>	<b>9</b>	<b>25</b>	<b>17</b>	<b>\$325.25</b>
Mailing Address: <b>1325 CHESTNUT ST.</b>				
Description of Expenditure: <b>Event Provisions</b>				
City: <b>EMMAUS</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>18049-</b>		
<b>KAREY HUPPER</b>	<b>9</b>	<b>25</b>	<b>17</b>	<b>\$933.00</b>
Mailing Address: <b>107 S. MAIN ST.</b>				
Description of Expenditure: <b>Event Catering</b>				
City: <b>COOPERSBURG</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>18036-</b>		
<b>ARMSTRONG EXEC</b>	<b>10</b>	<b>15</b>	<b>17</b>	<b>\$1,250.00</b>
Mailing Address: <b>ARMSTRONG EXEC</b>				
Description of Expenditure: <b>CAMPAIGN CONTRIBUTION</b>				
City: <b>-</b>	State: <b>-</b>	Zip Code (Plus 4): <b>-</b>		
<b>THOMAS MULLER</b>	<b>12</b>	<b>1</b>	<b>17</b>	<b>\$800.00</b>
Mailing Address: <b>2600 GRACIE LANE</b>				
Description of Expenditure: <b>PARTIAL LOAN REPAYMENT</b>				
City: <b>MACUGER</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>18062-9504</b>		
<b>THOMAS MULLER</b>	<b>12</b>	<b>31</b>	<b>17</b>	<b>\$329.33</b>
Mailing Address: <b>2600 GRACIE LANE</b>				
Description of Expenditure: <b>PARTIAL LOAN REPAYMENT</b>				
City: <b>MACUGER</b>	State: <b>PA</b>	Zip Code (Plus 4): <b>18062-9504</b>		
<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>\$</b>
Mailing Address: <b>-</b>				
Description of Expenditure: <b>-</b>				
City: <b>-</b>	State: <b>-</b>	Zip Code (Plus 4): <b>-</b>		
<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>\$</b>
Mailing Address: <b>-</b>				
Description of Expenditure: <b>-</b>				
City: <b>-</b>	State: <b>-</b>	Zip Code (Plus 4): <b>-</b>		
<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>\$</b>
Mailing Address: <b>-</b>				
Description of Expenditure: <b>-</b>				
City: <b>-</b>	State: <b>-</b>	Zip Code (Plus 4): <b>-</b>		

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

PAGE TOTAL  
**\$3,637.58**

## 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>GOVERNMENT THAT WORKS</b>	Reporting Period From <u>11/1/2017</u> To <u>12/31/2017</u>
-----------------------------------------------------------------------	----------------------------------------------------------------

Name of Creditor <b>Thomas Mulner</b>				Outstanding Balance of Debt <b>\$ 370.67</b>		
Mailing Address <b>2600 Gracie Lane</b>	DATE DEBT INCURRED	MO <b>10</b>	DAY <b>1</b>	YEAR <b>17</b>		
City <b>Maggie</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18062-9504</b>				
Description of Debt <b>Lead To PAC of \$1,500.00 To meet Expenses</b>						

Name of Creditor				Outstanding Balance of Debt <b>\$</b>		
Mailing Address	DATE DEBT INCURRED	MO	DAY	YEAR		
City	State	Zip Code (Plus 4) <b>-</b>				
Description of Debt						

Name of Creditor				Outstanding Balance of Debt <b>\$</b>		
Mailing Address	DATE DEBT INCURRED	MO	DAY	YEAR		
City	State	Zip Code (Plus 4) <b>-</b>				
Description of Debt						

Name of Creditor				Outstanding Balance of Debt <b>\$</b>		
Mailing Address	DATE DEBT INCURRED	MO	DAY	YEAR		
City	State	Zip Code (Plus 4) <b>-</b>				
Description of Debt						

Name of Creditor				Outstanding Balance of Debt <b>\$</b>		
Mailing Address	DATE DEBT INCURRED	MO	DAY	YEAR		
City	State	Zip Code (Plus 4) <b>-</b>				
Description of Debt						

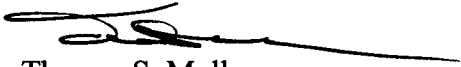
Name of Creditor				Outstanding Balance of Debt <b>\$</b>		
Mailing Address	DATE DEBT INCURRED	MO	DAY	YEAR		
City	State	Zip Code (Plus 4) <b>-</b>				
Description of Debt						

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

PAGE TOTAL <b>\$ 370.67</b>
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**Thomas S. Muller**  
**2600 Gracie Lane**  
**Macungie, PA 18062**

I hereby excuse the unpaid debt of \$370.67 with "Government That Works" and relinquish any claim for reimbursement.



Thomas S. Muller

1/25/17