

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

| | | | | | | | | |
|----------------------------------------------------------------------|-------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|-----------------------------------------------|------------------------------------|-----------------------------------|-------------------------------------|--|
| FILER IDENTIFICATION NUMBER | ▶ Robert J. DONCHEZ | | REPORT FILED ON BEHALF OF | CANDIDATE <input checked="" type="checkbox"/> | COMMITTEE <input type="checkbox"/> | LOBBYIST <input type="checkbox"/> | | |
| NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Robert J. DONCHEZ | | | | | | | | |
| STREET ADDRESS 377 DEVONSHIRE DRIVE | | | | | | | | |
| CITY Bethlehem | | | STATE PA. | ZIP CODE 18017 | | | | |
| TYPE OF REPORT (CHECK ONE) | | NAME OF OFFICE SOUGHT BY CANDIDATE | | | DISTRICT NO. | PARTY | DATE OF ELECTION | |
| 1. 6TH TUESDAY PRE-PRIMARY | <input type="checkbox"/> | MAYOR OF Bethlehem | | | City of Bethlehem | Dem | MO. DAY YEAR | |
| 2. 2ND FRIDAY PRE-PRIMARY | <input checked="" type="checkbox"/> | DATES OF REPORTING PERIOD | | | MO. DAY YEAR TO MO. DAY YEAR | | | |
| 3. 30 DAY POST-PRIMARY | <input type="checkbox"/> | 01 01 2018 TO 04 30 2018 | | | | | | |
| 4. 6TH TUESDAY PRE-ELECTION | <input type="checkbox"/> | CASH BALANCE AT END OF REPORTING PERIOD: \$ <u> -0- </u> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u> -0- </u> | | | | | FOR OFFICE USE ONLY | |
| 5. 2ND FRIDAY PRE-ELECTION | <input type="checkbox"/> | | | | | | | |
| 6. 30 DAY POST-ELECTION | <input type="checkbox"/> | | | | | | | |
| 7. ANNUAL REPORT | <input type="checkbox"/> | | | | | | | |
| | | AMENDMENT REPORT? | | YES | <input type="checkbox"/> | NO | <input checked="" type="checkbox"/> | |
| | | TERMINATION REPORT? | | YES | <input type="checkbox"/> | NO | <input checked="" type="checkbox"/> | |

AFFIDAVIT SECTION

PART I -
 If statement is filed on behalf of a Political Committee or Candidates' Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.

Notary Public
 021
 NOTARIE

Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

| | | | | | |
|--------------------------------------------------------------------------------|-------------------------|---------------------------------------|-----------------------------------------------------------|---------------------------------------|---------------------------------------|
| Report Number 20140238 | Report Filed By Main | Candidate <input type="checkbox"/> | Campaign Committee <input checked="" type="checkbox"/> | Candidate <input type="checkbox"/> | Candidate <input type="checkbox"/> |
| Name of Political Committee, Candidate or Ballot FRIENDS OF BOB DONCHEZ PAC | | | | | |
| Street Address 377 DEVONSHIRE DRIVE | | | | | |
| City Bethlehem | | State PA. | | Zip Code 18019 | |

Type of Report (Place x under report type)

| 1. 1 st Tuesday Pre-Primary | 2. 2 nd Friday Pre-Primary | 3. 30 Day Post Primary | 4. 1 st Tuesday Pre-Election | 5. 2 nd Friday Pre-Election | 6. 30 Day Post Election | 7. Annual | Special 2 nd Friday Pre-Election | Special 30 Day Post-Election |
|----------------------------------------|---------------------------------------|--------------------------|-----------------------------------------|----------------------------------------|--------------------------|--------------------------|---------------------------------------------|------------------------------|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Date of Election (Month/Day/Year) | | | Year | | | Appointment Report | | Termination Report |

| Statement of Receipts and Expenditures | From Date | To Date | |
|-----------------------------------------------------------------|------------|------------|---------------|
| 1. Amount Brought Forward from Last Report | 01/01/2018 | 04/30/2018 | |
| 2. Total Monetary Contributions and Receipts (From Schedule I) | | | \$ 141,145.07 |
| 3. Total Funds Available (Sum of Lines 1 and 2) | | | \$ -0- |
| 4. Total Expenditures (From Schedule II) | | | \$ 141,145.07 |
| 5. Ending Cash Balance (Beginning of Period from Line 3) | | | \$ 3,430.00 |
| 6. Balance of Bank and Other Funds Received (From Schedule III) | | | \$ 138,215.07 |
| 7. Deposit Fees and Commissions (From Schedule IV) | | | \$ -0- |
| | | | \$ -0- |

Affidavit Section

Part 1- If this is a **Committee** report, treasurer sign here. If this is a **Candidate** report, candidate sign here.
 I swear (or affirm) that this report, including the attached schedules on paper, is to the best of my knowledge and belief true, correct and complete.

Pennsylvania - Notary Seal
 Notary Public
 Berks County
 Commission Expires November 17, 2021
 Number 1164267
 SOCIATION OF NOTARIES

SCHEDULE I
Contributions and Receipts
 Detailed Summary Page

| | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------|
| File number (if any) | FRIENDS OF BOB DONCHEZ PAC | |
| 1. Monetary Contributions and Receipts of \$500 or less per contributor | | |
| Total for the reporting period (1) | \$ | - 0 - |
| 2. Contributions of \$500 or more (from Part A and Part B) | | |
| Contributions Received from Political Committees (Part A) | \$ | - 0 - |
| All Other Contributions (Part B) | \$ | - 0 - |
| Total for the reporting period (2) | \$ | - 0 - |
| 3. Contributions Over \$2000 (from Part C and Part D) | | |
| Contributions Received from Political Committees (Part C) | \$ | - 0 - |
| All Other Contributions (Part D) | \$ | - 0 - |
| Total for the reporting period (3) | \$ | - 0 - |
| 4. Other Receipts: Refunds, Interest earned, Rent and Checks, ETC. (from Part E) | | |
| Total for the reporting period (4) | \$ | - 0 - |
| Total Monetary Contributions and Receipts during this reporting period <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i> | | \$ - 0 - |

SCHEDULE III
Statement of Expenditures

Filer Identification Number: **20140238** **FRIENDS OF BOB DONCHEZ PAC**

| | | | | | | |
|--------------|----------------|------------------------------|-----|----------------------------|-------|-------------------------|
| To Whom Paid | | JOHN MORGANELLI For Congress | | Date [MM/DD/YYYY] | \$ | 2,000.00 |
| House # | Street Address | Brownsdale ROAD | | Description of Expenditure | | |
| City | Bethlehem | State | PA | Zip Code | 18017 | CAMPAIGN CONTRIBUTION |
| To Whom Paid | | FRIENDS OF LISA BOSCOLA | | Date [MM/DD/YYYY] | \$ | 500.00 |
| House # | Street Address | 1 E Broad ST. # 120 | | Description of Expenditure | | |
| City | Bethlehem | State | PA. | Zip Code | 18018 | CAMPAIGN CONTRIBUTION |
| To Whom Paid | | FRIENDS OF DEAN DONCHEZ | | Date [MM/DD/YYYY] | \$ | 250.00 |
| House # | Street Address | 710 Weymans ROAD | | Description of Expenditure | | |
| City | Bethlehem | State | PA. | Zip Code | 18017 | CAMPAIGN CONTRIBUTION |
| To Whom Paid | | Bethlehem Democratic CC | | Date [MM/DD/YYYY] | \$ | 180.00 |
| House # | Street Address | | | Description of Expenditure | | |
| City | Bethlehem | State | PA. | Zip Code | | AD CONTRIBUTION (OWNER) |
| To Whom Paid | | Good Shepherd | | Date [MM/DD/YYYY] | \$ | 250.00- |
| House # | Street Address | 850 South 5th ST. | | Description of Expenditure | | |
| City | Allentown | State | PA. | Zip Code | 18103 | AD CONTRIBUTION |
| To Whom Paid | | FRIENDS OF TIM BRENNAN | | Date [MM/DD/YYYY] | \$ | 250.00- |
| House # | Street Address | 102 Shewell AVE. | | Description of Expenditure | | |
| City | Doylstown | State | PA. | Zip Code | 18901 | CAMPAIGN CONTRIBUTION |
| To Whom Paid | | | | Date [MM/DD/YYYY] | \$ | |
| House # | Street Address | | | Description of Expenditure | | |
| City | | State | | Zip Code | | |
| To Whom Paid | | | | Date [MM/DD/YYYY] | \$ | |
| House # | Street Address | | | Description of Expenditure | | |
| City | | State | | Zip Code | | |