Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	on 8000	634				port ed B		CANDI	DATE		COMN	1ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:	•	Nor	than	npton	Co Dem	Com								
Street Address:	227 Mechanic	Street															
City:	Wind Gap							State:	PA			Zip Cod	ie: 18	3091-1	321		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	•	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?	TERMINATION Yes REPORT?		No	•	/
report type)	ANNUAL REPORT	7.	Year 2011					IG METH				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	Sought by Candida	te:	-					DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Count Code	у
	,							МО	DAY	YE	AR	Italiibei	code			Code	
								11		8	2011		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY Y	/EAR	l			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	5 Trom:		6 17	2	011	Т	0	9	:	19	2011						
A. Amount Bro	ught Forward Fror	n Last R	eport				\$			1,7	'08.15						
B. Total Moneta	ary Contributions	And Rec	eipts (From S	Sche	dule	e I)	\$			3	329.61						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			2,0	37.76						
D. Total Expend	ditures (From Sch	edule II	I)				\$			7	14.57						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C))			\$			1,3	23.19						
F. Value Of In-	Kind Contributions	Receiv	ed (From Sch	edu	le II	I)	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)				\$				0.00			1			
			,	AFF	ID/	AVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign he	ere. 1	If th	nis is	a Can	didate r	eport, o	candio	late sig	ın here.					
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	e attached sche	dules	s file	d on	paper o	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	f , tru	e,
Sworn to and subs	cribed before me this day of	•	20							s	ignature	of Perso	n Submit	ting Rep	ort		-
	Signatu	re					- -					Prin	ted Name	e			-
My Commission Ex	cpires											Ema	il				-
	мо	D	AY	YR					Are	ea Cod	е	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	didate's	authorized Co	omn	nitte	ee, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowl	edge and belief	this	polit	tical	commi	ittee has n	ot viola	ted an	y provisi	ions of the	e act of J	une 3,1	937 (P.L.	1333	,
Sworn to and subsc	ribed before me this										Si	ignature o	of Candid	ate			-
-	day of						-		Printed Name								-
	Signature						-										_
My Commission Exp	ires											Ema					
	мо	D	AY	YR	,		-		Area	Code		Da	aytime T	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

betanea summary ruge	-			
Name of Filing Committee or Candidate	Reporting	Period		
Northampton Co Dem Com	From:	6/17/201	<u>1</u> To:	9/19/2011
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	39.57
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	290.04
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	290.04
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add antotals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page			\$	329.61

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 Candidat	Name of Filing Committee or Candidate Rep				Period			
Northampton Co Dem Com			Fre	om:	6/17/20) <u>11</u> To:	:	9/19/2011
					DATE			AMOUNT
Full Name of Contributing Committee The Easton Area Democratic Committee	9			МО	DAY	YEAR		
Mailing Address P.O. Box							\$	100.00
City Easton	State PA	Zip Code (Plus	4)	9	12	2011		
Full Name of Contributing Committee The Easton Area Democratic Committee	9			МО	DAY	YEAR		
Mailing Address P.O. Box				-			\$	100.00
City Easton	State PA	Zip Code (Plus 18020	4)	8	16	2011		
Full Name of Contributing Committee Comttee to Re-Elect Sal Panto				МО	DAY	YEAR		
Mailing Address P.O. Box 222							\$	90.04
City Easton	State PA	Zip Code (Plus	4)	6	17	2011		

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

PAGE TOTAL290.04

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 Fining Committee of Candidate				Reporting Period From: To:				
			l		DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

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

PAGE TOTAL \$0.00

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 from Over \$250.00 in the reporting period.

Name of Filing Committee or Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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	•			Rep	orting Pe	riod			
				Fror	n:		To):	
					D	ATE		Α	MOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•	•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Deta	iled Sumr	mary Page,	Section	on 3.			\$	PAGE TOTAL 0.00

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		Report	ting Perio	od			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detailer	d Summary Page	Section	4			PA	GE TOTAL
	,,,	. Junimary 1 ago,	5000.011				\$	0.00

SCHEDULE II

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	Reporting Perio	d	
Northampton Co Dem Com	From:	<u>6/17/2011</u> To:	9/19/2011
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		Reportin	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II, In-Kir	nd Contributions Deta	iled Sun	nmary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Reporting	Period				
					From:			То:		
						DAT	E			AMOUNT
Full Name of Contributor					мо	DAY	,	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus	4)						
Employer of Contributor					Оссир	ation				
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zi 4)	p Code(Pl)	us	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed					PAGE TOTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period				
Northampton Co Dem Com			From	6/1	7/2011	То:	9/19/2011	
				DATE			AMOUNT	
To Whom Paid KNBT Bank			МО	DAY	YEAR			
Mailing Address P.O. box	547		9	19	2011	\$	6.00	
City Boyertown	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	19512	Bank C					
To Whom Paid Lehigh Valley Printing			МО	DAY	YEAR			
Mailing Address 1337 N. N	Nelson St		8	30	2011	\$	55.12	
City Allentown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure)		
PA 18109				Ticket Print				
To Whom Paid Walter Garvin			МО	DAY	YEAR			
Mailing Address PO BOX 2	2256		6	24	2011	\$	281.10	
City Lehigh Valley	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
- '	PA	18002	Office S	Supplies Re	eimburse	ment		
To Whom Paid Verizon			МО	DAY	YEAR			
Mailing Address PO Box 2	8000		9	19	2011	\$	322.35	
City Lehigh Valley	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u>'</u>		
,	PA	18002	Telepho	one & Inte	rnet			
To Whom Paid Bethlehem City Democratic (Committee		мо	DAY	YEAR			
Mailing Address 617 2nd	Ave		7	13	2011	\$	50.00	
City Bethlehem	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u>'</u>		
	PA	18019		ates Night			Hall	
Futou Cuand Tatal of F	ndihana an Bara 4 B	nest Cover Person The	`				PAGE TOTAL	
Enter Grand Total of Expe	nuitures on Page 1, Re	port Cover Page, Item L	<i>)</i> .			\$	714.57	