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 : | | | | port ed B | | CAN | NDII | DATE | | СОМ | MITTEE 🗸 | | LOBBYIST | | | | | |
|---|--|-----------|-----------------------|--------------|---------|------------|-------|----------|-------|----------|-------------|------------------------|--------------------|----------------|------------------------|-----------|----------|----------|
| Name of Filing C | Committee, Candid | ate or Lo | obbyist: | | Nort | than | npton | Co D | em | 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. | 2ND FRIDA PRIMARY | Y PRE | - : | 2. | 30 DA | | Р | OST- | 3. | | AMENDM REPORT? | | Yes | No | • | \ |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDA ELECTION | Y PRI | E- ! | 5. | 30 DA | | Р | OST- | 6. X | | TERMINA REPORT | No | , | / | | |
| report type) | ANNUAL REPORT | 7. | Year 2011 | | | | | OHECK | | | | | PAPER | PAPER DISKE | | | TTE | |
| Name of Office S | Sought by Candida | te: | _ | | | | | DAT | E O | F ELE | CTIC | N | District Number | Office Code | Par | ty Code | Coun | |
| | | | | | | | | МО | | DAY | YI | AR | Number | code | | | couc | |
| | | | | | | | | | 11 | | 8 | 2011 | | (SEE IN | NSTRUCTIONS FOR CODES) | | |) |
| | Receipts and | МО | DAY | YEAR | 2 | | | МО | | DAY | YI | AR | FO | R OFFI | CE USE | ONLY | | |
| Expenditures | xpenditures from: 10 25 2011 TO 11 28 2 | | | | | | | | | 2011 | | | | | | | | |
| A. Amount Brought Forward From Last Report \$ 2,364. | | | | | | | | | | 364.56 | | | | | | | | |
| B. Total Monet | \$ | \$ 135.00 | | | | | | | | | | | | | | | | |
| C. Total Funds Available (Sum Of Lines A and B) \$ 2,499.56 | | | | | | | | | | | | | | | | | | |
| D. Total Expenditures (From Schedule III) \$ 706.81 | | | | | | | | | | | | | | | | | | |
| E. Ending Cash | Balance (Subtract | Line D | From Line | C) | | | \$ | | | | 1,7 | 92.75 | | | | | | |
| F. Value Of In- | Kind Contributions | Receiv | ed (From S | chedu | le II | :) | \$ | | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Obligations | (From S | Schedule IV | /) | | | \$ | | | | | 0.00 | | | • | | | |
| | | | | AFF | FIDA | \VI | T SE | CTIO | N | | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, trea | surer sign | here. | If th | is is | a Car | ndidat | e re | port, c | andi | date sig | ın here. | | | | | |
| I swear (or affirm) correct and comple |) that this report, incl ete. | uding the | attached sc | hedule | s filed | d on | paper | or by e | lectr | onic m | edium | , are to t | he best o | f my kno | wledge | and belie | ef , tru | ue. |
| Sworn to and subs | cribed before me this day of | • | 20 | | | | | | | | S | Signature | of Perso | n Submit | ting Rep | ort | | _ |
| | | | | | | | _ | | | | | | Prin | ted Name | e | | | - |
| My Commission Ex | Signatu opires | re | | | | | | | - | | | | Ema | il | | | | - |
| | мо | D | AY | YR | | | | | • | Are | a Coc | le | Daytim | e Teleph | none Nu | mber | | _ |
| Part II- If this is | a report of a cand | lidate's | authorized | Comr | nitte | e, C | andid | ate sh | alls | sign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of n | ny knowle | edge and beli | ief this | s polit | tical | comm | ittee ha | as no | ot viola | ted an | y provis | ions of the | e act of J | une 3,1 | 937 (P.L | . 1333 | 3, |
| Sworn to and subsc | ribed before me this | | | | | | | | | | | Signature of Candidate | | | | | | |
| | day of | | | | | | _ | | | | | | Printe | d Name | | | | - |
| | Signature | | | | | | _ | | _ | | | | | | | | | _ [|
| My Commission Exp | - | | | | | | | | | | | | Ema | il | | | | |
| | МО | D | AY | YR | R | | - | | | Area | Code | | Da | aytime T | elephon | e Numb | er | - |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| , - | | | | |
|--|-----------|-----------|--------------|------------|
| Name of Filing Committee or Candidate | Reporting | g Period | | |
| Northampton Co Dem Com | From: | 10/25/201 | <u>1</u> To: | 11/28/2011 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reporting |) Period | (1) | \$ | 0.00 |
| 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) | | | | |
| Contributions Received From Political Committees (Part A) | | | \$ | 135.00 |
| All Other Contributions (Part B) | | | \$ | 0.00 |
| TOTAL for the Reporting | (2) | \$ | 135.00 | |
| 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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa | | | \$ | 135.00 |

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.

DAY

YEAR

| Name of Filing Committee or Candidate | Reporting | Reporting Period | | | | |
|---------------------------------------|-----------|------------------------------|------------|--|--|--|
| Northampton Co Dem Com | From: | <u>10/25/2011</u> To: | 11/28/2011 | | | |
| | • | DATE | AMOUNT | | | |
| Full Name of Contributing Committee | | | | | | |

| United Steelworkers Pensioners | ited Steelworkers Pensioners | | | | | |
|---|------------------------------|--------------------------------|----|-----|------|-----------------|
| Mailing Address 53 East L | ehigh Street | | | | | \$ 75.00 |
| City Bethlehem | State PA | Zip Code (Plus 4) 18018 | 11 | 2 | 2011 | |
| Full Name of Contributing Committee Bethlehem Democratic City Comm | | | МО | DAY | YEAR | |
| Mailing Address 617 2nd | Ave | | | | | \$ 60.00 |
| City Bethlehem | State PA | Zip Code (Plus 4) 18019 | 11 | 2 | 2011 | |
| | '^ | 10019 | | | | |

PAGE TOTAL \$ 135.00

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 Filling Committee of Candidate | | | Reporting Period From: To: | | | | | |
|--|-------|-------------------|----------------------------|----|------|------|----|--------|
| | | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) | 1 | | | | | |

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 Candida | ate | | | Rep | orting Pe | riod | | | |
|---|-----------------|-----------|--------------|--------------|-----------|-------|------|----------|------------|
| | | | | Froi | n: | | То | : | |
| | | | | | D | ATE | | AN | MOUNT |
| Full Name of Contributor | | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 0.00 |
| City | State | Zi | p Code (Plus | i 4) | | | | | |
| Employer Name | • | • | | | Occupa | tion | • | • | |
| Employer Mailing Address/Principal Business | Place of | | City | | | State | | Zip Code | e (Plus 4) |
| Enter Grand Total of Part C on So | chedule I, Deta | iled Sumr | mary Page, | Section | on 3. | | | P | AGE 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 | ing Perio | od | | | | |
|-----------------------------|-------------------------|------------------------|---------|-----------|-----|------|----|---------|------|
| | | | From: | | | To: | | | |
| | | | | D | ATE | | | AMOUNT | |
| Full Name | | | | мо | DAY | YEAR | 1 | | |
| Mailing Address | | | | | | | \$ | | 0.00 |
| City | State | Zip Code (| Plus 4) | | | | | | |
| Receipt Description | · | · | | • | | | • | | |
| Enter Grand Total of Part E | on Schedule I. Detailer | l Summary Page. | Section | 4. | | | | PAGE TO | ΓAL |
| - Communication of the Ex | Januara 1/ Betained | . Jaai y 1 ago, | Dection | •• | | | \$ | | 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 Per | iod | |
|--|---------------|------------------------------|------------|
| Northampton Co Dem Com | From: | <u>10/25/2011</u> To: | 11/28/2011 |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | ER CONTRIBUTO | R | |
| 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 Candidat | Il Name of Contributor ailing Address ty State Zip Code (Plus 4) | | | | Reporting Period | | | | | |
|--------------------------------------|--|-----------------------|-------------|-------------|------------------|-----------|------------|--|--|--|
| | Name of Contributor ling Address State Zip Code (Plus 4) | | | | From: To: | | | | | |
| | ling Address | | | | | | 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 Sch | andula II. In-Kir | nd Contributions Data | ilad Sum | mary Pag | | | DACE TOTAL | | | |
| Section 2. | iedule II, III-KII | ia contributions Deta | iiieu Suiii | iliai y Pag | , je, | | PAGE TOTAL | | | |
| | | | | | | \$ | 0.00 | | | |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | е | | | | Re | porting | Period | | | | |
|---|--------------|---------|------------|---------|--------|-----------|-----------|--------|-------|------------------------|--|
| | | | | | Fro | om: | | То: | : | | |
| | | | | | • | | DATE | | | AMOUNT | |
| Full Name of Contributor | | | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | | | | \$ | 0.00 | |
| City | State | | Zip Code(I | Plus 4) | | | | | | | |
| Employer of Contributor | -1 | | • | | | Occupa | ation | | | | |
| Employer Mailing Address/Principal Pla Business | ace of | City | | State | | Zip 4) | Code(Plus | Descri | ption | of Contribution | |
| Enter Grand Total of Part G on Sc Summary Page, Section 3. | hedule II, I | in-Kind | Contributi | ons De | etaile | ed | | | | PAGE TOTAL 0.00 | |

STATEMENT OF EXPENDITURES

| Name of Filing Committee or C | Candidate | | Reporti | ng Period | | | |
|---|------------------------------|-----------------------------------|---------------------------|--------------------|-----------|-----|------------|
| Northampton Co Dem Com | | | From | 10/2 | 5/2011 | То: | 11/28/2011 |
| | | | | DATE | | | AMOUNT |
| To Whom Paid KNBT Bank | | | мо | DAY | YEAR | | |
| Mailing Address P.O. Box 54 | 10 | 31 | 2011 | \$ | 2.00 | | |
| State Zip Code (Plus 4) PA 19512 | | | | otion of Exp ee | penditure | | |
| To Whom Paid Walt Garvin | | | | DAY | YEAR | | |
| Mailing Address 3536 Oakla | and Road | | 10 | 31 | 2011 | \$ | 595.78 |
| City Bethlehem | State PA | Zip Code (Plus 4) 18020 | - | s & Office | | | |
| To Whom Paid Verizon | | | мо | DAY | YEAR | | |
| Mailing Address PO Box 280 | Mailing Address PO Box 28000 | | | 31 | 2011 | \$ | 109.03 |
| City Lehigh Valley State PA Zip Code (Plus 4) 18002 | | | Descrip Telepho | otion of Exp | penditure | | |
| | | | | | | | PAGE TOTAL |

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

706.81