Campaign Finance Report

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

																_
Filer Identificat Number :	ion 2003	296			Report Filed B		CANDI	DATE		СОМИ	MITTEE	✓	LOBE	BYIST		_
Name of Filing (Committee, Candid	ate or Lo	obbyist:	E	EMRICK	JOE	COMMIT	ΓΕΕ ΤΟ	ELEC	CT C/O	TRES. J	OANN C	ARDE	LLO		_
Street Address:	P.O. BOX 121															-
City:	TANNERSVILL	.E					State: PA Zip Cod					ode: 18372				_
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-		30 DA PRIM		POST- 3.			AMENDM REPORT?		Yes	No	Y	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE-		30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	Y	/
report type)	ANNUAL REPORT	7.	Year 2014			FILING METHOD () CHECK ONE					PAPER		\checkmark	DISKE	TTE	
Name of Office S	Sought by Candidat	te:					DATE O	F ELE	стіо	N	District Number	Office Code	Par	ty Code	County	,
							мо	DAY	YE	AR					L	_
							11		4	2014		(SEE INS	TRUCTIO	ONS FOR (CODES)	
	Receipts and	мо	DAY	YEAR			мо	DAY	YE	EAR	FO	OR OFFIC	E USE	ONLY		
Expenditures	s from:		4 1	20	014 T	0	5		5	2014						100mm
A. Amount Bro	ought Forward From	n Last R	eport			\$			70,1	L28.97]					
B. Total Monet	ary Contributions	And Reco	eipts (From	1 Sched	Jule I)	\$			2	200.00]					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			70,3	328.97						
D. Total Expen	ditures (From Sche	edule II	()			\$			2,9	974.84						
E. Ending Cash	n Balance (Subtract	t Line D	From Line	C)		\$			62,3	54.13]					
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedul	e II)	\$				0.00						
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	') 		\$				0.00	<u> </u>					
				AFFI	IDAVI	T SE	CTION									
	s a Committee repo	•	-					•			-					
I swear (or affirm correct and compl) that this report, incl lete.	uding the	attached scl	hedules	filed on p	paper	or by elect	ronic me	edium,	, are to t	the best of	f my know	vledge	and beli	ef , true	•
Sworn to and subs	scribed before me this day of	•	20						S	ignature	e of Perso	n Submitt	ing Rep	ort		
	Signatu	re				- -					Prin	ted Name	1			
My Commission E	xpires					_					Emai	il				
	мо	D/	AY	YR				Are	ea Cod	e	Daytim	ne Telepho	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comm	ittee, C	andid	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	dge and beli	ief this (political	comm	ittee has n	ot viola	ted any	y provis	ions of the	e act of Ju	ıne 3,19	€37 (P.L	. 1333,	
Sworn to and subso	cribed before me this									s	ignature o	of Candida	ite			
	day of 					-					Printe	ed Name				
	Signature					-										
My Commission Exp	-										Emai	il				
	мо	D/	AY	YR		•		Area	Code		Da	aytime Te	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** EMRICK JOE COMMITTEE TO ELECT C/O TRES. JOANN CARDELLO From: <u>4/1/2014</u> **To:** <u>5/5/2014</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 50.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 150.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 150.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 200.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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.

PART A

Name of Filing Committee or Candidate				porting l	Period			
From				om:				
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

0.00

\$

5/3/2024 8:09:05 AM

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 Candida	te			Rep	porting P	eriod				
EMRICK JOE COMMITTEE TO ELECT C/O TRES. JOANN CARDELLO					m:	<u>4/1/2</u>	2014 To):	5/5/2014	
						DATE			AMOUNT	
Full Name of Contributor STERLING ROME					мо	DAY	YEAR			
Mailing Address 2506 MARTIN ST.								\$	150.00	
City NAZARETH	State		Zip Code (Plus 4)		3	19	2014			
	РА		18064							
									PAGE TOTAL	
Enter Grand Total of Part A on	Schedule I,	Detaile	d Summary Pag	je, S	ection 2			\$	150.00	

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 Can	didate	Name of Filing Committee or Candidate						
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	ittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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	Reporting Period	
	From:	То:

				D	ATE		АМС	DUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion	-		
Employer Mailing Address/Principal Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
	-						\$	0.00

I

PART E **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:			om: To:						
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description	•								
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	ſAL
		iiai y i uge,	Section				\$		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 Period		
EMRICK JOE COMMITTEE TO ELECT C/O TRES. JOANN CARDELLO	From:	<u>4/1/2014</u> то:	<u>5/5/2014</u>
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, 3		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate R			g Period			
F					То:		
				DATE		АМО	UNT
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate					oorting P	eriod			
						From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business				Zip 4)	Code(Plus	Descri	ption o	of Contribution		

	1
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate					Reporting Period					
EMRICK JOE COMMITTEE TO ELECT C/	O TRES. JOANN CARD	ELLO	From	<u>4/</u>	<u>1/2014</u>	То:	<u>5/5/2014</u>				
				DATE			AMOUNT				
To Whom Paid HRCC			мо	DAY	YEAR						
Mailing Address P.O. BOX 11787			2	2 18 2014 \$							
CityHARRISBURGStateZip Code (Plus 4)PA17108				Description of Expenditure DONATION							
To Whom Paid HRCC			мо	DAY	YEAR						
Mailing Address P.O. BOX 11787			3	15	2014	\$	1,000.00				
CityHARRISBURGStateZip Code (Plus 4)PA17108			Descrip DONAT	ition of Exp TION	penditure	1					
To Whom Paid USPS			мо	DAY	YEAR						
Mailing Address			5	1	2014	\$	117.60				
City NAZARETH	State PA	Zip Code (Plus 4) 18064	Descrip STAMP	s	penditure	1					
To Whom Paid STAPLES			мо	DAY	YEAR						
Mailing Address 3764 EASTON NAZA	RETH HWY		5	1	2014	\$	57.24				
City EASTON	State PA	Zip Code (Plus 4) 18045	-	ntion of Exp		1					
To Whom Paid COMMITTEE TO ELECT DAVID M. MALONEY			мо	DAY	YEAR						
Mailing Address 646 LENAPE RD.			4	30	2014	\$	250.00				
City BECHTELSVILLE	State PA	Zip Code (Plus 4) 19505	Descrip DONAT	otion of Exp TION	penditure						

To Whom Paid BLUE			мо	DAY	YEAR		
Mailing Address 4431 EASTON AVE			5	4	2014	\$	500.00
City BETHLEHEM	State PA	Zip Code (Plus 4) 18020	Description of Expenditure DEPOSIT FOR FUNDRAISER				
To Whom Paid PAUL EMRICK			мо	DAY	YEAR		
Mailing Address 6520 FOREST KNOLL CT.			5	4	2014	\$	350.00
City ALLENTOWN	State PA	Zip Code (Plus 4) 18106	Description of Expenditure REFUND OF DONATION				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	2,974.84