

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		20120115		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> SCHLOSSBERG, MIKE FRIENDS OF												
<b>Street Address:</b> PO BOX 1537												
<b>City:</b> ALLENTOWN						<b>State:</b> PA			<b>Zip Code:</b> 18105-1537			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2014	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
REPRESENTATIVE IN THE GENERAL ASSEMBLY						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	132	STH	DEM	39
						11	4	2014	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		10	21	2014		11	24	2014				
<b>A. Amount Brought Forward From Last Report</b>						\$ 45,821.18						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 1,300.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 47,121.18						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 4,465.27						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 42,655.91						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 0.00						

## AFFIDAVIT SECTION

**PART I - 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 filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
Detailed Summary Page

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
SCHLOSSBERG, MIKE FRIENDS OF	From: <u>10/21/2014</u> To: <u>11/24/2014</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 1,300.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 1,300.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 1,300.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

<b>PAGE TOTAL</b>	
\$	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.**

<b>Name of Filing Committee or Candidate</b>  SCHLOSSBERG, MIKE FRIENDS OF	<b>Reporting Period</b>  <b>From:</b> <u>10/21/2014</u> <b>To:</b> <u>11/24/2014</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee LOCAL 0420 STEAMFITTERS UNION COPE COM				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 14420 TOWNSEND RD				11	5	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19154-1028					
Full Name of Contributing Committee PA BANKERS PUB AFFAIRS (PABPAC)				MO	DAY	YEAR	\$ 300.00
Mailing Address 3897 N FRONT ST				10	28	2014	
City HARRISBURG	State PA	Zip Code (Plus 4) 171100000					

**Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.**

<b>PAGE TOTAL</b>
\$ 1,300.00

**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: <span style="float: right;">To:</span>

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 0.00

## 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	Reporting Period  From: <span style="float: right;">To:</span>
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			DATE	AMOUNT
Full Name	MO	DAY	YEAR	
Mailing Address				\$ 0.00
<div style="display: flex; justify-content: space-between;"> <span>City</span> <span>State</span> <span>Zip Code (Plus 4)</span> </div>				
Receipt Description				

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
SCHLOSSBERG, MIKE FRIENDS OF		From: <u>10/21/2014</u> To: <u>11/24/2014</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	0.00



**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period
	From: <span style="float: right;">To:</span>

			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b> \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III

## STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
SCHLOSSBERG, MIKE FRIENDS OF	From <u>10/21/2014</u> To: <u>11/24/2014</u>

				DATE			AMOUNT	
To Whom Paid OFNA				MO	DAY	YEAR	\$ 100.00	
Mailing Address 417 N. 7th				10	28	2014		
City Allentown		State PA	Zip Code (Plus 4) 18102	Description of Expenditure Event sponsorship				
To Whom Paid Mike Schlossberg				MO	DAY	YEAR	\$ 500.00	
Mailing Address 944 N 19TH ST				10	31	2014		
City Allentown		State PA	Zip Code (Plus 4) 18104	Description of Expenditure Donation				
To Whom Paid Mike Schlossberg				MO	DAY	YEAR	\$ 1,240.02	
Mailing Address 944 N 19TH ST				10	31	2014		
City Allentown		State PA	Zip Code (Plus 4) 18104	Description of Expenditure Reimbursement				
To Whom Paid HDCC				MO	DAY	YEAR	\$ 500.00	
Mailing Address 205 State Street				10	31	2014		
City Harrisburg		State PA	Zip Code (Plus 4) 17101	Description of Expenditure Donation				
To Whom Paid Allentown St. Patrick's Day Parade				MO	DAY	YEAR	\$ 300.00	
Mailing Address PO Box 3517				11	3	2014		
City Allentown		State PA	Zip Code (Plus 4) 18105	Description of Expenditure Event sponsorship				

To Whom Paid ASD Foundation			MO	DAY	YEAR	\$ 300.00
Mailing Address 31 S. Penn Street			11	3	2014	
City Allentown	State PA	Zip Code (Plus 4) 18105	Description of Expenditure Donation			

To Whom Paid Citizens to Reelect Bryan Barbin			MO	DAY	YEAR	\$ 500.00
Mailing Address 206 Main Street			11	3	2014	
City Johnstown	State PA	Zip Code (Plus 4) 15901	Description of Expenditure Donation			

To Whom Paid Mary Ann Donuts			MO	DAY	YEAR	\$ 130.00
Mailing Address 1601 W. Liberty			11	7	2014	
City Allentown	State PA	Zip Code (Plus 4) 18102	Description of Expenditure Election Day			

To Whom Paid Allentown Youth Soccer Club			MO	DAY	YEAR	\$ 100.00
Mailing Address PO Box 443			11	10	2014	
City Allentown	State PA	Zip Code (Plus 4) 18105	Description of Expenditure Event sponsorship			

To Whom Paid AT&T			MO	DAY	YEAR	\$ 30.00
Mailing Address 250 Lehigh Valley Mall			11	13	2014	
City Whitehall	State PA	Zip Code (Plus 4) 18052	Description of Expenditure Data plan			

To Whom Paid Mike Schlossberg			MO	DAY	YEAR	\$ 265.25
Mailing Address 944 N 19TH ST			11	13	2014	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18104	Description of Expenditure Reimbursement			

<b>To Whom Paid</b> Friends of Peter Schweyer			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> PO Box 4634			11	17	2014	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18105	<b>Description of Expenditure</b> Election Day			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 4,465.27

