### **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 :	Filer Identification 2003296 Number :					Repo Filed					COMN	1ITTEE	<b>✓</b>	LOB	BYIST				
Name of Filing C	ommittee, Cand	lidate or L	.obbyi	st:	E	EMRI	CK,	JOE	СОМ	MIT	TEE TO	) ELI	ECT C/C	TRES.	JOANN (	CARDI	ELLO		
Street Address:	P.O. BOX 1	21																	
City:	TANNERSVI	LLE							State	e:	PA			Zip Cod	l <b>e:</b> 18	372			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.					30 DA PRIMA		Р	OST-	3.		AMENDMENT REPORT?		Yes	N	0	<b>√</b>	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					30 DA		Р	OST-	6. <b>X</b>		TERMINA REPORT?		Yes	N	0	<b>√</b>	
report type)	ANNUAL REPOR							NG ME					PAPER		<b>√</b>	DISK	ETTE		
Name of Office S	ought by Candi	date:	•			•			DAT	ΕO	F ELE	CTIC	ON	District Number	Office Code	Pai	ty Code	Cour	
									МО		DAY	Y	EAR						
										11		4	2014		(SEE INS	TRUCTI	ONS FOR	CODES	)
	Receipts and	МО	DA	Υ	YEAR				МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	irom:		10	21	20	)14	T	<b>)</b>		11	:	24	2014						
A. Amount Bro	ught Forward Fr	om Last F	Report					\$				90,	559.12						
B. Total Moneta	ary Contribution	s And Rec	eipts	(From	Sched	lule I	[)	\$			2,100.00								
C. Total Funds	Available (Sum	Of Lines A	A and E	В)				\$				92,	659.12						
D. Total Expend	ditures (From S	chedule I	(I)					\$					0.00						
E. Ending Cash	Balance (Subtr	act Line D	From	Line C	<b>E)</b>			\$				92,	659.12						
F. Value Of In-	Kind Contribution	ns Receiv	red (Fr	rom Sc	hedul	e II)		\$				:	162.40						
G. Unpaid Debt	s And Obligatio	ns (From	Sched	ule IV	)			\$					0.00						
					AFF1	[DA\	VIT	SE	CTI	NC									
PART I - If this is				_									_						
I swear (or affirm) correct and comple		nciuaing th	e attaci	nea scn	ieauies	Tilea (	on p	aper	ог ву с	electr	onic m	eaiun	n, are to t	ne best of	тту кпоч	vieage	and bei	ier, tr	ue
Sworn to and subs	cribed before me t day of	his	20							•		:	Signature	of Persor	n Submitt	ing Re	oort		
	Signa	ature	_											Print	ed Name				
My Commission Ex	pires							-						Emai	I				
	МО	D	AY		YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		$\underline{}$
Part II- If this is	a report of a ca	ındidate's	autho	rized	Comm	ittee	, Ca	ndid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge aı	nd belie	ef this	politic	cal o	comm	ittee h	as no	ot viola	ted a	ny provisi	ions of the	act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before me th day of	ıis	20										Si	ignature o	f Candida	ite			_
			_ 20 _											Printe	d Name				-
M. C	Signatui	 re								-				Emai	i				_
My Commission Exp	ires 																		_
	мо	D	AY		YR						Area	Code		Da	ytime Te	lephor	ne Num	ber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
EMRICK, JOE COMMITTEE TO ELECT C/O TRES. JOANN CARDELLO	From:	10/21/201	<u>4</u> To:	11/24/2014
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)			\$	0.00
All Other Contributions (Part B)			\$	600.00
TOTAL for the Reporting	Period	(2)	\$	600.00
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)			\$	1,500.00
TOTAL for the Reporting	Period	(3)	\$	1,500.00
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			\$	2,100.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fro	om:		То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	•	•				-		DAGE TOTAL

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

0.00

### 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 Filing Committee or Candidate				Reporting Period						
EMRICK, JOE COMMITTEE TO ELECT	C/O TRES. JOANN	CARDELLO	From:	•	10/21/2	2014 <b>T</b> o	<u>11/24/2014</u>			
				I	DATE	AMOUNT				
Full Name of Contributor CHRIS & SANDRA CADE				мо	DAY	YEAR				
Mailing Address 1825 JENKINS DRIVE							<b>\$</b> 100.00			
City EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18040		11	12	2014				
Full Name of Contributor RICHARD WEAVER				мо	DAY	YEAR				
Mailing Address 331 SO. BROAD ST  City NAZARETH	State PA	<b>Zip Code (Plus 4)</b> 18064		11	12	2014	<b>\$</b> 75.00			
Full Name of Contributor RICHARD WEAVER				мо	DAY	YEAR				
Mailing Address 331 SO. BROAD ST							\$ 50.00			
City NAZARETH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18064		11	12	2014				
Full Name of Contributor THOMAS & AMY AMENT				мо	DAY	YEAR				
Mailing Address 126 FOURTH ST.  City NAZARETH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18064		11	12	2014	<b>\$</b> 120.00			
Full Name of Contributor DAVID & LISA COLVER				мо	DAY	YEAR	_			
Mailing Address 3130 OLD CARRIAG  City PALMER	State PA	<b>Zip Code (Plus 4)</b> 18045		11	12	2014	\$ 100.00			

Full Name of Contributor DAVID GREEN			МО	DAY	YEAR	
Mailing Address 300 IRON	STONE LANE					\$ 100.00
City ELVERSON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19520	11	6	2014	
Full Name of Contributor MARK HEMPHILL			мо	DAY	YEAR	
MARK HEMPHILL	ASANT RUN CT.		<b>MO</b>	<b>DAY</b> 12	<b>YEAR</b> 2014	\$ 55.00

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

PAGE TOTAL
\$ 600.00

#### **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 Candidat	te		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							<b>\$</b>	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sci	nedule 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				Reporting Period					
EMRICK, JOE COMMITTEE TO ELECT C	/O TRES. JOANN C	ARDE	LLO	Fron	n:	10/21/2	014 <b>To</b>	ŧ	11/24/2014
					D/	ATE		АМ	OUNT
Full Name of Contributor BRUCE & SHARON FOX					МО	DAY	YEAR		
Mailing 5190 BERRY HOLLOV Address	/ ROAD							\$	500.00
City BANGOR	State	Zip	Code (Plus	4)	11	12	2014		
27	PA	18	013						
Employer Name ALLSTATE SEPTIC	1	<u> </u>			Occupat	t <b>ion</b>	WNER	<u>. I</u>	
Employer Mailing Address/Principal Plac Business	ce of		City			State		Zip Code	e (Plus 4)
5767 BERRY HOLLOW RD.			BANGOR			PA		18013	
Full Name of Contributor CHARLES CHRIN					МО	DAY	YEAR		
Mailing 3201 ROCKY LANE								<b>\$</b>	1,000.00
City EASTON	State	Zip	Code (Plus	4)	11	12	2014		
LAGION .	PA	18	045						
Employer Name CHARLES CHRIN CO.	1	·			Occupat	t <b>ion</b>	WNER	1	
Employer Mailing Address/Principal Plac Business	ce of		City			State		Zip Code	e (Plus 4)
400 SO GREENWOOD AVE.			EASTON			PA		18045	
Enter Grand Total of Part C on Sche	dule I, Detailed S	Summ	nary Page,	Sectio	on 3.		4		1,500.00

## 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 Candida	ite		Report	ing Perio	od		
			From:			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 Scho	edule T. Detaile	d Summary Page.	Section	4.			PAGE TOTAL
	Julie 1, Detaile	a Janimary ruge,		•			\$ 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 Peri	od	
EMRICK, JOE COMMITTEE TO ELECT C/O TRES. JOANN CARDELLO	From:	<u>10/21/2014</u> <b>To:</b>	11/24/2014
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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)	\$	162.40
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,	•	\$	162.40

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Fi	ling Committee or Candidate	Reporting F	Period	
EMRICK, 3	OE COMMITTEE TO ELECT C/O TRES. JOANN CARDELLO	From:	<u>10/21/2014</u> <b>To:</b>	11/24/2014

EMRICK, JOE COMMITTEE TO ELECT C/C	From:	<u>10/</u>	<u>/21/2014</u>	<u>14</u> To: <u>11/24/2014</u>			
				DATE		,	AMOUNT
Full Name of Contributor HRCC			МО	DAY	YEAR		
Mailing Address P.O. BOX 11787			11	5	2014	\$	162.40
City HARRISBURG	State	Zip Code (Plus 4)	Ī				
	PA	17108					
Description of Contribution: DATA LIS	TS & POSTCARDS	5					
Enter Grand Total of Part F on Sched	ule II, In-Kind	Contributions Deta	iled Sum	mary Pag	je,	P	AGE TOTAL
Section 2.						\$	162.40

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate					Reporting Period							
					From:		То	То:				
					•		DATE				AMOUNT	
Full Name of Contributor						мо	DAY	YEAR	1			
Mailing Address										\$	0.00	
City	State	Zip Code(Plus 4		Plus 4)								
Employer of Contributor						Occupation						
Employer Mailing Address/Principal Place of Business		City		State		Zip 4)	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

Name of Filing Committee or Candidate				Reporting Period						
						То:				
		•				AMOUNT				
To Whom Paid			мо	DAY	YEAR					
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)	Descri	otion of Ex	penditure					
Forting Council Total of Forman distance		PAGE TOTAL								
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	0.00			