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	20130	271				Rep File			CA	NDII	DATE		COM	1ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, (Candida	te or Lo	bbyis	t:		CITIZ	ZEN	S FO	R UR	BAN	RENE	WAL							
Street Address:	645 W	HAMILT	ON ST,	STE	600															
City:	ALLENT	OWN								State	e:	PA			Zip Cod	l e: 18	101			
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND F PRIMA	RIDAY ARY	PRE-	2		30 DA PRIMA		Р	OST-	3.		AMENDM REPORT?	Yes	N	0	\	
(place X to the right of	6TH TUESDA PRE-ELECTION		4.	2ND F ELECT		PRE-	- 5		30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	٨	0	\
report type)	ANNUAL RE	PORT	7. X	Year	2014					IG ME					PAPER C			DISK	ETTE	
Name of Office S	ought by Ca	andidate	e:							DAT	ΕO	F ELE	СТІС	N	District Number	Office Code	Pai	ty Cod	Code	
										МО		DAY	YI	AR		•	•			
											11		4	2014		(SEE INS	TRUCTI	ONS FOI	CODES	5)
Summary of Expenditures		and	МО	DA	Y	YEAR				МО		DAY	YI	EAR	FO	R OFFIC	E USE	ONLY	,	
			1	.1	25	20)14	T	D		12		31	2014						
A. Amount Bro	. Amount Brought Forward From Last Report \$ 4,835.6								335.67											
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 0.00																				
C. Total Funds	Available (S	Sum Of L	ines A	and B	5)				\$				4,8	35.67						
D. Total Expend	ditures (Fro	m Sched	dule III	[)					\$				5	48.00						
E. Ending Cash	Balance (S	ubtract	Line D	From I	Line C	:)			\$				4,2	87.67						
F. Value Of In-	Kind Contrib	outions	Receive	ed (Fr	om Sc	hedul	e II)		\$					0.00						
G. Unpaid Debt	s And Oblig	ations (From S	chedu	ıle IV))			\$					0.00						
						AFFI	IDA'	VI٦	ΓSE	CTIC	NC									
PART I - If this is	a Committe	ee repo	rt, trea	surer	sign h	ere. I	f this	s is	a Car	ndidat	te re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple		ort, inclu	ding the	attach	ed sch	edules	filed	on p	paper	or by e	electr	ronic m	edium	, are to t	he best of	my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before day of	me this		20									S	ignature	of Persor	1 Submitt	ing Re	oort		_
		Signature	•	•					<u>-</u>						Print	ted Name				
My Commission Ex	pires								_		•				Emai	I				
	мо)	DA	Υ		YR						Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of	a candi	date's a	authoi	rized (Comm	ittee	, Ca	ndid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		est of my	/ knowle	dge an	d belie	f this	politi	cal	comm	ittee h	as no	ot viola	ted an	y provisi	ions of the	e act of Ju	ine 3,1	937 (P	L. 133	з,
Sworn to and subsc	ribed before r day of	ne this		20										Si	ignature o	f Candida	ite			_
				20 -					•						Printe	d Name				-
	Sigi	nature							•											_
My Commission Exp	ires														Emai	ı				
	-	мо	DA	λY		YR						Area	Code		Da	ytime Te	elephor	ne Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
CITIZENS FOR URBAN RENEWAL	From:	11/25/201	<u>4</u> То:	12/31/2014
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)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
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			\$	0.00

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		Rep	oorting P	eriod			
			Fro	m:		To	o :	
					DATE		P	MOUNT
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			Repo	orting Pe	riod			
			Fron	n:		To):	
				D	ATE		A	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			1	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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		А	MOUNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	·		•			•	
Enter Grand Total of Part E on	Schedule T. Detailed	l Summary Page.	Section	4.			P	AGE TOTAL
	2, 2000		22300				\$	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	
CITIZENS FOR URBAN RENEWAL	From:	<u>11/25/2014</u> To:	12/31/2014
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR	ł .	
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, 1		\$	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

STATEMENT OF EXPENDITURES

Name of Filing Committee	or Candidate		Reporti	ng Period			
CITIZENS FOR URBAN RE	NEWAL		From	11/2	5/2014	То:	12/31/2014
				DATE			AMOUNT
To Whom Paid Committee to Elect Glenn	Eckhart		мо	DAY	YEAR		
Mailing Address 511 East Federal Street			12	15	2014	\$	500.00
City Allentown	State PA	Zip Code (Plus 4) 18103	1	otion of Exp			
To Whom Paid Buchanan Ingersoll & Roo	ney PC		МО	DAY	YEAR		
Mailing Address One Ox	xford Centre, 301 Grant Stree	et, 20th Floor	12	15	2014	\$	48.00
City Pittsburgh State Zip Code (Plus 4) PA 15219-1410				otion of Exp			

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

PAGE TOTAL

548.00