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 :		Rep File			CAN	DII	DATE		СОМ	IITTEE	✓	LOBE	BYIST					
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		FRIE	NDS	S OF	PETER	SC	CHWEY	ER							
Street Address:	PO BOX 4364																	
City:	ALLENTOWN				State:					PA			Zip Cod	le: 18	3105			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	/ PRE	- 2		30 DA PRIMA		Р	OST-	3.		AMENDM REPORT?		Yes	No	•	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	/ PRE	- 5		30 DA ELECT		Р	OST-	6.		TERMINA REPORT?		Yes	No	•	\
report type)	ANNUAL REPORT	7. X	Year 2014					NG MET				PAPER / DISI					TTE	
Name of Office S	- Sought by Candida	te:						DATE	0	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
								МО		DAY	YE	AR		DEM				
									11		4	2014		(SEE IN	STRUCTIO	ONS FOR O	CODES)
	Receipts and	МО	DAY	YEAR	2			МО		DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:	1	11 25	2	014	T	0		12	3	31	2014						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				1,6	89.86						
B. Total Monetary Contributions And Receipts (From Schedule I							\$	\$ 1,000.00										
C. Total Funds Available (Sum Of Lines A and B)											2,6	89.86						
D. Total Expenditures (From Schedule III)										1,4	48.36							
E. Ending Cash Balance (Subtract Line D From Line C)											1,2	41.50						
F. Value Of In-	Kind Contributions	Receive	ed (From So	hedu	le II))	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$					0.00						
				AFF	'IDA'	VIT	ſ SE	CTIO	N									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	nere. I	If this	s is	a Car	ndidate	e re	port, c	andio	date sig	n here.					
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sch	edules	s filed	on p	paper (or by el	ectr	onic me	dium	, are to t	he best o	f my knov	wledge a	and belie	ef , trı	ue.
Sworn to and subs	cribed before me this day of	i	20						•		s	ignature	of Perso	n Submit	ting Rep	ort		-
							•		•				Prin	ted Name	<u> </u>			-
My Commission Ex	Signatu opires	re							-				Ema	il				-
	мо	DA	AY	YR			-		•	Are	a Cod	e	Daytim	e Teleph	one Nu	mber		_
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nittee	e, Ca	ndid	ate sh	all s	sign he	re.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and belie	ef this	politi	cal	comm	ittee ha	s no	ot violat	ed an	y provisi	ons of the	e act of J	une 3,19	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this											Si	gnature o	of Candida	ate			- [
	day of		_ 20										Drinto	d Name				_
	Signature												Fillice					_
My Commission Exp	-								-				Ema	il				_
	МО	D	AY	YR						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		
FRIENDS OF PETER SCHWEYER	From:	11/25/2014	<u>4</u> To:	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)			\$	1,000.00
TOTAL for the Reporting) Period	(3)	\$	1,000.00
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			\$	1,000.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Name of Filing Comm	Reporti	ng Period					
			From:		То	:	
		I		DATE			AMOUNT
Full Name of Contribut	ing Committee		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

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 Filing Committee or Candidate					eriod	To	o:	
			l		DATE			AMOUNT
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 Candidate	lame of Filing Committee or Candidate			Period				
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	nmary 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	Name of Filing Committee or Candidate								
FRIENDS OF PETER SCHWEYER			Fron	n:	11/25/2	<u>014</u> To	To: 12/31/2014		
				D/	ATE		AM	IOUNT	
Full Name of Contributor MATTHEW T. CROSLIS				мо	DAY	YEAR			
Mailing 2030 TILGHMON ST. SUITE 100					10	2014	\$	1,000.00	
City ALLENTOWN	State PA	Zip Code (Plus 18104	5 4)	12	10	2014			
Employer Name CROSLIS LAW OFFIC	ES			Occupation ATTORNEY					
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.		4		1,000.00	

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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AM	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T. Detailer	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	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 Per	iod	
FRIENDS OF PETER SCHWEYER	From:	<u>11/25/2014</u> To:	12/31/2014
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)	\$	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 Candid	Name of Filing Committee or Candidate Re						
	From:		То:				
				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	Schedule II, In-Kir	nd Contributions Deta	iled Sum	ımary Pag	je,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	ame of Filing Committee or Candidate					porting P	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion			
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 Candidate	Name of Filing Committee or Candidate										
FRIENDS OF PETER SCHWEYER	FRIENDS OF PETER SCHWEYER					From <u>11/25/2014</u> To: <u>12/31/2</u>					
	DATE AMOU										
To Whom Paid NGP VAN	мо	DAY	YEAR								
Mailing Address 1101 15TH ST NW STE 500				10	2014	\$	225.00				
City WASHINGTON	State DC	Zip Code (Plus 4) 200055006	_	etion of Exp							
To Whom Paid PETER SCHWEYER			мо	DAY	YEAR						
Mailing Address 1529 CATALINA AVE			12	15	2014	\$	1,223.36				
				otion of Exp							

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

PAGE TOTAL

1,448.36