### **Campaign Finance Report**

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

Filer Identification 8000634 Number :					Rep File			CAND	IDA	TE		СОММ	IITTEE	<b>✓</b>	LOBE	SYIST		
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		NOR	THA	AMPTO	ON CO I	DEM	СОМ	_			•				
Street Address:	PO BOX 2225	6																
City:	LEHIGH VALLE	ΞY						State:	PA	4			Zip Cod	le: 18	3002-2	256		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. <b>X</b>	2ND FRIDA' PRIMARY	Y PRE	- 2	2.	30 DA		POS	ST- 3	3.		AMENDMENT REPORT?		Yes	No	•	<b>/</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	Ē- 5	5.	30 DA		POS	POST- 6.			TERMINA REPORT?		Yes	No		<b>/</b>
report type)	ANNUAL REPORT	7.						NG METH CHECK (					PAPER DISI			DISKE	TTE	
Name of Office S	Sought by Candida	te:	_					DATE	OF E	ELEC	TIOI	V	District Number	Office Code	Par	ty Code	Coun	
								МО	D/	AY	YE	AR	Number	code	ļ		Couc	
							1	1	8	3	2016		(SEE IN	STRUCTIO	ONS FOR C	CODES	)	
	Receipts and	МО	DAY	YEAR	R			МО	DA	AY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		1 1	2	016	Т	0		3	7	7	2016						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				1,8	36.86						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$		9,436.50									
C. Total Funds Available (Sum Of Lines A and B)							\$			:	11,2	73.36						
D. Total Expen	ditures (From Scho	edule II	I)				\$				2,70	01.40						
E. Ending Cash	Balance (Subtract	Line D	From Line (	C)			\$				8,57	71.96						
F. Value Of In-	Kind Contributions	Receiv	ed (From Se	chedu	le II	)	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	)			\$					0.00						
				AFF	IDA	VI	ΓSE	CTION										
	s a Committee rep	-	_						=	-		_						
correct and comple	) that this report, incl ete.	uding the	attached sci	1edule:	s filed	1 on	paper	or by elec	troni	ic med	lium,	are to t	he best o	my knov	wledge a	and belie	ef , tri	ie.
Sworn to and subs	cribed before me this day of	3	20								Si	gnature	of Perso	n Submit	ting Rep	ort		_
	Signatu						- -						Prin	ted Name	<u> </u>			-
My Commission Ex	_								_				Ema	il				-
	мо	D	AY	YR						Area	Code	•	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shal	l sig	n her	e.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	comm	ittee has	not v	/iolate	d any	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 						-		_				Printe	d Name				-
	Signature						-											_ [
My Commission Exp	<del>-</del>												Ema	il				
	МО	D	AY	YR	1		•		A	Area Co	ode		Da	aytime T	elephon	e Numb	er	<sup>-</sup>

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
NORTHAMPTON CO DEM COM	From:	1/1/201	<u>6</u> To:	3/7/2016
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	506.50
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	250.00
All Other Contributions (Part B)			\$	1,355.00
TOTAL for the Reporting	g Period	(2)	\$	1,605.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	5,850.00
All Other Contributions (Part D)			\$	1,475.00
TOTAL for the Reporting	g Period	(3)	\$	7,325.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g 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			\$	9,436.50

#### **PART A**

### **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.

Name of Filing Committee or Candidate	Reporting	Period	
NORTHAMPTON CO DEM COM	From:	<u>1/1/2016</u> <b>T</b>	io: <u>3/7/2016</u>
		DATE	AMOUNT

Full Name of Contributing C Committee to Elect Robert		мо	DAY	YEAR		
Mailing Address 711 E				<b>\$</b> 150.00		
City Easton	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18042	1	30	2016	
Full Name of Contributing C	ommittee		МО	DAY	YEAR	
Mailing Address PO B	OX 754					<b>\$</b> 100.00
City MEDIA	State PA	<b>Zip Code (Plus 4)</b> 19063		30	2016	

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

**PAGE TOTAL \$** 250.00

## 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					
NORTHAMPTON CO DEM COM			Fro	m:	1/1/2	2016 To	<b>)</b> :	<u>3/7/2016</u>		
					DATE			AMOUNT		
Full Name of Contributor Abraham Kassis				МО	DAY	YEAR				
Mailing Address 4430 Easton Avenu	e						\$	150.00		
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18020		2	17	2016				
Full Name of Contributor Sheila Gallagher				МО	DAY	YEAR				
Mailing Address 2805 N. Delaware D	Drive						\$	50.00		
City Easton	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18040		2	17	2016				
Full Name of Contributor Becky Ann Bartlett				МО	DAY	YEAR				
Mailing Address 127 4th Street							\$	40.00		
<b>City</b> Nazareth	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18064		1	30	2016				
Full Name of Contributor Becky Ann Bartlett				МО	DAY	YEAR				
Mailing Address 127 4th Street				,	25	2016	\$	60.00		
<b>City</b> Nazareth	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18064		2	25	2016				
Full Name of Contributor Pamela Pearson				МО	DAY	YEAR				
lailing Address 105 Fern Court							\$	20.00		
City Easton	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045		1	30	2016				

Full Name	of Contributor							
Blandine M	1balla-Fonkeu+	-Mengue			МО	DAY	YEAR	
Mailing Add	dress 1730	) Wagon Wheel	Drive					\$ 150.00
City Eas	ston		State	Zip Code (Plus 4)	1	30	2016	
			PA	18040				
	<b>of Contributor</b> 1balla-Fonkeu+	-Mengue			МО	DAY	YEAR	
Mailing Add	dress 1730	Wagon Wheel	Drive					\$ 50.00
City Fas	ston		State	Zip Code (Plus 4)	1	11	2016	
			PA	18040				
Full Name of David How	of Contributor vell				мо	DAY	YEAR	
Mailing Add	dress 537 F	Paxinosa Road						\$ 40.00
City Eas	ston		State	Zip Code (Plus 4)	1	30	2016	
			PA	18040				
Full Name of Contributor Lorraine Mineo								
					мо	DAY	YEAR	
	lineo	allek Road		<u> </u>	МО	DAY		\$ 150.00
Lorraine Mi	dress 70 Ba	allek Road	State	Zip Code (Plus 4)	<b>MO</b>	<b>DAY</b> 30	<b>YEAR</b> 2016	\$ 150.00
Lorraine Mi	lineo	allek Road	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18077				\$ 150.00
Lorraine Mi Mailing Add City Rie	dress 70 Basegelsville	allek Road						\$ 150.00
Lorraine Mi Mailing Add City Rie	dress 70 Ba	allek Road Pine Street			1	JAY	2016 YEAR	\$ 150.00 150.00
City Rie  Full Name of Lorraine Parameters Mailing Add	dress 70 Basegelsville  of Contributor asquali dress 827 B				1	30	2016	
City Rie  Full Name of Lorraine Parameters Mailing Add	dress 70 Ba		PA	18077	1 мо	JAY	2016 YEAR	
Lorraine Mi Mailing Add City Rie  Full Name of Lorraine Pa Mailing Add City Bet	dress 70 Basegelsville  of Contributor asquali dress 827 Basegelsville		PA	18077  Zip Code (Plus 4)	1 мо	JAY	2016 YEAR	
Lorraine Mi Mailing Add City Rie  Full Name C Lorraine Pa Mailing Add City Bet	dress 70 Basegelsville  of Contributor asquali dress 827 Basegelsville		PA	18077  Zip Code (Plus 4)	MO 1	30 DAY	2016  YEAR  2016	
Lorraine Mi Mailing Add City Rie  Full Name of Lorraine Pa Mailing Add City Bet  Full Name of Adrian Sha Mailing Add	dress 70 Basegelsville  of Contributor asquali dress 827 Basegelsville  of Contributor anker  dress 2628	Pine Street	PA	18077  Zip Code (Plus 4)	MO 1	30 DAY	2016  YEAR  2016	\$ 150.00
Lorraine Mi Mailing Add City Rie  Full Name of Lorraine Pa Mailing Add City Bet  Full Name of Adrian Sha Mailing Add	dress 70 Basegelsville  of Contributor asquali dress 827 Basegelsville	Pine Street	State PA	18077    Zip Code (Plus 4)   18018	1 MO	30 DAY	2016  YEAR  2016	\$ 150.00

								17.62 0
Full Na	ame of Contri	butor			мо	DAY	YEAR	
JoAnn	e Messenlehr	ner			МО	DAT	TEAR	
Mailing	g Address	40 Schoeneck Aven	ue					<b>\$</b> 150.00
City	Nazareth		State	Zip Code (Plus 4)	1	30	2016	
			PA	18064				
	ame of Contri e O'Donnell	butor			МО	DAY	YEAR	
Mailing	g Address	401 Heritage Lane						<b>\$</b> 40.00
City	Nazareth		State	Zip Code (Plus 4)	1	30	2016	
	Nuzuren		PA	18064				
	ame of Contri Cohen	butor			МО	DAY	YEAR	
Mailing	g Address	3101 Emrick Blvd						<b>\$</b> 150.00
City	Bethlehem		State	Zip Code (Plus 4)	1	30	2016	
			PA	18020				
	ame of Contri arie Panella	butor			МО	DAY	YEAR	
Mailing	g Address	15 Marc Lane						<b>\$</b> 25.00
City	Easton		State	Zip Code (Plus 4)	1	30	2016	
			PA	18045				
	ame of Contri Glessner	butor			МО	DAY	YEAR	
Mailing	g Address	2024 Schweitzer Av	⁄e					<b>\$</b> 25.00
City	Bethlehem		State	Zip Code (Plus 4)	1	30	2016	
			PA	18020				
Full Name of Contributor Jo Ellen Litz				МО	DAY	YEAR		
Mailing	g Address	2302 Gwilford Stree	et					<b>\$</b> 25.00
City	Lebanon		State	Zip Code (Plus 4)	1	30	2016	
			PA	17046				
				1				i

<b>Full Name of Contr</b> Kaija Farber	МО	DAY	YEAR				
Mailing Address	Mailing Address 145 E Broad Street						<b>\$</b> 40.00
City Bethlehem		State	Zip Code (Plus 4)	1	30	2016	
		PA	18018				

**PAGE TOTAL \$** 1,355.00

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

#### **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	Reporting	eporting Period						
NORTHAMPTON CO DEM COM			From:	1/	<u>/1/2016</u>	То:		<u>3/7/2016</u>
				DA	TE		A	MOUNT
Full Name of Contributing Committee Friends of Lisa Boscola				мо	DAY	YEAR		
Mailing Address 385 Palmetto Drive					20	2016	<b>\$</b>	1,500.00
<b>City</b> Easton	<b>State</b> PA	1	30	2016				
Full Name of Contributing Committee AFSCME DISTRICT COUNCIL 88	МО	DAY	YEAR					
Mailing Address 3031 WALTON RD,				1	30	2016	\$	2,500.00
City PLYMOUTH MEETING	<b>State</b> PA	<b>Zip Code</b> 19462	e (Plus 4)	1	30	2010	<b>'</b>	
Full Name of Contributing Committee  Carpenters PAC of Philadelphia & Vicin	ity			МО	DAY	YEAR		
Mailing Address 1803 Spring Garder	n Street						\$	1,500.00
<b>City</b> Philadelphia	State PA	<b>Zip Code</b> 19130	e (Plus 4)	1	30	2016	5	
Full Name of Contributing Committee Lehigh Valley Labor Council				МО	DAY	YEAR		
Mailing Address 2774 Hill Drive							\$	350.00
City Bath	<b>State</b> PA	<b>Zip Codo</b> 18014	e (Plus 4)	1	30	2016	5	
							•	PAGE TOTAL
Enter Grand Total of Part C on Sche	dule I, Detailed Sur	nmary Pa	age, Sectio	n 3.			\$	5,850.00

## 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 C	ommittee or Candidate				Rep	orting Pe	riod			
NORTHAMPTON	CO DEM COM				Fror	m:	<u>1/1/2</u>	016 To	<b>)</b> :	<u>3/7/2016</u>
						D	ATE		АМ	OUNT
Full Name of Cor Sandra O'Brien-						мо	DAY	YEAR		
Mailing Address	705 Paxinosa Avenue								\$	350.00
City Easton		State	Zip	Code (Plus	<b>34)</b>	1	30	2016	5	
		PA	18	042						
Employer Name	NA					Occupation Retired				
Employer Mailing Business	Address/Principal Plac	e of		City		State Zip Code			(Plus 4)	
NA	NA						PA		18042	
Full Name of Cor Sandra O'Brien-						МО	DAY	YEAR		
Mailing Address	705 Paxinosa Avenue								\$	75.00
City Easton		State PA		Ocode (Plus	<b>(4)</b>	2	17	2016	5	
Employer Name	NA					Occupation Retired				
Employer Mailing Business	Address/Principal Plac	e of		City		<u> </u>	State		Zip Code	(Plus 4)
NA				NA			PA		18042	
Full Name of Cor	ntributor						DAY	YEAR		
April Niver						МО	DAT	TEAR		
Mailing Address	1210 Chidsey Street								\$	350.00
City Easton		State PA		Ocode (Plus 042	s <b>4</b> )	1	30	2016	5	
Employer Name House of Representatives				Occupation Economic Development Coordin				oment Coordinat		
Employer Mailing Address/Principal Place of Business City				State Zip Code (Plu			(Plus 4)			
17th District		Easton					PA 18042			

								Г	AGE 10
Full Name of Cor Anne Lauritzen	ntributor				мо	DAY	YEAR		
Anne Lauritzen								Ц	
Mailing Address	147 Charles Street							\$	350.00
City Easton		State	Zi	p Code (Plus 4)	1	30	2016		
		PA	18	3042					
Employer Name	House of Representa	tives			Occupat				
Employer Mailing Business	g Address/Principal Plac	ce of		City	1	State Zip Code (			(Plus 4)
17th District				PA		18042			
Full Name of Contributor					мо	DAY	YEAR		
Glenn Reibman					МО	DAT	TEAR		
Mailing Address	1231 Lieb Road							\$	350.00
City Easton		State	Zi	p Code (Plus 4)	1	30	2016		
		PA	18	3040					
Employer Name NA						Occupation Retired			
Employer Mailing Address/Principal Place of City Business				1	State		Zip Code (Plus 4)		
NA	A NA							18040	
Enter Grand To	otal of Part C on Scho	odulo I. Dotailod	Sum	nary Dago Socti	on 3		Γ	PA	GE TOTAL
Linter Grand IC	nter Grand Total of Part C on Schedule I, Detailed Summary Page, Sect							<b>±</b>	1 475 00

PAGE TOTAL
\$ 1,475.00

## 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	Candidate		Report	ing Perio	od				
			From:			To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	1		
Mailing Address	Mailing Address						\$		0.00
City	State	Zip Code (	Plus 4)						
Receipt Description	·	·		•			•		
Enter Grand Total of Part E	on Schedule I. Detailer	l Summary Page.	Section	4.				PAGE TO	ΓAL
- Communication of the Ex	Januara 1/ Betained	. Jaai y 1 ago,	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 Perio	d						
NORTHAMPTON CO DEM COM	From:	<u>1/1/2016</u> <b>To:</b>	3/7/2016					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR							
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candidate				Reporting Period					
	From:			То:					
				DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						<b>\$</b>	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 Sum	mary Pag	те Г		PAGE TOTAL		
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL		
						\$	0.00		

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate			Reporting Period						
Fro						From: To:			
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address							\$	0.00	
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.									PAGE TOTAL 0.00

## STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period						
NORTHAMPTON CO DE	ЕМ СОМ				From	<u>1/:</u>	<u>1/2016</u>	То:	3/7/2016	
						DATE			AMOUNT	
<b>To Whom Paid</b> Whitetail Golf Club							YEAR			
Mailing Address 2679 Klein Road					1	7	2016	\$	200.00	
City Bath State Zip Code (Plus 4)				Descrip	tion of Exp	enditure	·			
PA 18014					iting Depo					
To Whom Paid Northampton Country Club					МО	DAY	YEAR			
Mailing Address 5049 William Penn Hwy					1	25	2016	\$	250.00	
City Easton State Zip Code (Plus 4)					Descrip	tion of Exp	enditure	: :		
		PA		18045		p Deposit				
<b>To Whom Paid</b> Forks Diner					мо	DAY	YEAR			
Mailing Address 331	5 Sullivan Trail				1	30	2016	\$	509.00	
City Easton		State		Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u>'</u>		
Laston		PA		18040		Breakfast				
<b>To Whom Paid</b> Blandine Mballa-Fonked	ı+Mengue				МО	DAY	YEAR			
Mailing Address 173	0 Wagon Wheel D	rive			1	30	2016	\$	150.00	
City Easton	!	State		Zip Code (Plus 4)	Descrip	tion of Exp	enditure	· :		
		PA		18040	Petition Breakfast/Seeding Money					
To Whom Paid USPS	·				мо	DAY	YEAR			
Mailing Address 17 S	6 Commerce Way				2	1	2016	\$	112.00	
<b>City</b> Bethlehem		State		Zip Code (Plus 4)	Descrin	tion of Exp	) Denditure	<u>'</u>		
Decinenti					- 35 5. 1	2A		-		

18017

PO Box Service Renewal

PΑ

							FAGL	10
<b>To Whom Paid</b> Malissa Davis				мо	DAY			
Mailing Address 428	82 Windswept Dri	ve		3	4	2016	\$	25.00
<b>City</b> Bethlehem		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18020		otion of Exp Picnic / Ale			
<b>To Whom Paid</b> USPS				МО	DAY	YEAR		
Mailing Address 17	3	3	2016	\$	225.00			
City Bethlehem State Zip Code (Plus 4) PA 18017					otion of Exp ermit Rene			
<b>To Whom Paid</b> Clyde Thomas				МО	DAY	YEAR		
Mailing Address 31!	5 Hamilton Avenu	е		2	29	2016	\$	90.00
<b>City</b> Bethlehem		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18017		otion of Exp	m Booklet		
<b>To Whom Paid</b> Clyde Thomas				МО	DAY	YEAR		
Mailing Address 31	5 Hamilton Avenu	e		2	29	2016	\$	90.00
<b>City</b> Bethlehem		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18017	Description of Expenditure Pulse of the Primary / Program Booklet				
<b>To Whom Paid</b> Kevin Spigler				МО	DAY	YEAR		
Mailing Address 190	0 S Greenwood A	venue		2	29	2016	\$	625.40
City         Easton         State         Zip Code (Plus 4)           PA         18045					otion of Exp		me Verte	
<b>To Whom Paid</b> Blandine Mballa-Fonke	eu+Mengue			мо	DAY	YEAR		
					l 5-	2016		
Mailing Address 173	30 Wagon Wheel	Drive		2	25	2016	\$	75.00

To Whom Paid Malissa Davis	мо	DAY	YEAR					
Mailing Address 4282 Windswept Drive				18	2016	\$	100.00	
City Bethlehem State Zip Code (Plus 4) PA 18020				Description of Expenditure Family Picnic / Pavillion Payment				
To Whom Paid TeenWorks				DAY	YEAR			
Mailing Address 1110 American Parkway NE				10	2016	\$	250.00	
City Allentown State Zip Code (Plus 4) Description of Expenditure PA 18109 John Mitchell Sponsorship								
Enter Grand Total of Evnenditus	os on Dago 1. Da	mort Cover Bage Item D					PAGE TOTAL	
Enter Grand Total of Expenditu	es on Paye 1, Re	port cover rage, item D	•			\$	2,701.40	