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 8000	634			Rep File	oort		CAN	DIE	DATE		COMN	1ITTEE	✓	LOBI	BYIST						
Name of Filing Committee, Candidate or Lobbyist: NORTHAMPTON CO DEM COM																						
Street Address:	PO BOX 2225	6																				
City:	LEHIGH VALLI	ΞΥ						State:		PA			Zip Cod	le: 18	3002-2	256						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	/ PRE	- 2	2. X	30 DA		P	OST-	3.		AMENDM REPORT?		Yes	No		\				
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	/ PRE	<u>-</u> !	5.	30 DA		P	OST-	6.		TERMINA REPORT?		Yes	No		\				
report type)	ANNUAL REPORT	7.	Year 2016					NG MET CHECK					PAPER		/	DISKE	TTE					
Name of Office S	- Sought by Candida	te:						DATE	OF	FELEC	CTIO	N	District Number	Office Code	Par	ty Code	Coun					
								МО		DAY	YE	AR		10000	<u> </u>		100	·				
								1	11		8	2016		(SEE IN	STRUCTI	ONS FOR	CODES)				
	Receipts and	МО	DAY	YEAR	ł			МО		DAY	YE	AR	FO	R OFFI	CE USE	ONLY						
Expenditures	from:		3 8	2	016	Т	0		4	1	.1	2016										
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				8,5	71.96	6									
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	1)	\$				2,3	344.99										
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				10,9	16.95										
D. Total Expen	ditures (From Sch	edule II	I)				\$				6	52.71										
E. Ending Cash	Balance (Subtract	t Line D	From Line (C)			\$				10,2	64.24										
F. Value Of In-	Kind Contributions	Receiv	ed (From So	hedu	le II)	\$					0.00										
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$					0.00	0									
				AFF	IDA	١٧٧	ΓSE	CTIO	N													
	s a Committee rep	•	=																			
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sch	edule	s filed	d on	paper	or by ele	ectr	onic me	dium	, are to t	he best o	f my kno	wledge	and beli	ef , tr	ue.				
Sworn to and subs	cribed before me this day of	•	20						-		s	ignature	of Perso	n Submit	ting Rep	ort		_				
			_				-		-				Prin	ted Name	e			-				
My Commission Ex	Signatu opires	re							-				Ema	il				-				
	мо	D	AY	YR			_		-	Are	a Cod	e	Daytim	e Teleph	none Nu	mber		_				
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate sha	hall sign here.													
I swear (or affirm) No 320) as amende		ny knowle	edge and belie	ef this	polit	ical	comm	ittee has	as not violated any provisions of the act of June 3,1937 (P.L. 1							. 133	3,					
Sworn to and subsc	ribed before me this								Signature of Candidate								-					
	day of						-						Printe	d Name				-				
	Signature						-		_									_				
My Commission Exp	_								_				Ema	il								
	МО	D	AY	YR	l		•		•	Area (Code		Da	aytime T	elephon	e Numb	er	-				

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	Period		
NORTHAMPTON CO DEM COM	From:	3/8/201	<u>б</u> То:	<u>4/11/2016</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	865.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	129.99
All Other Contributions (Part B)			\$	400.00
TOTAL for the Reporting) Period	(2)	\$	529.99
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	950.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	950.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J 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			\$	2,344.99

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>3/8/2016</u> To: <u>4/11/2016</u>
	DATE AMOUNT
Full Name of Contributing Committee	MO DAY YEAR

Easton Area Democratic Com	mittee		MO	DAI	ILAK	
Mailing Address PO Box	1015					\$ 49.99
City Easton	State PA	Zip Code (Plus 4) 18044	3	18	2016	
Full Name of Contributing Con Bethlehem City Democratic C			МО	DAY	YEAR	
Mailing Address 315 Ha	milton Avenue					\$ 80.00
City Bethlehem	State PA	Zip Code (Plus 4) 18017	4	11	2016	

PAGE TOTAL \$ 129.99

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	e		Rep	orting Pe	eriod			
NORTHAMPTON CO DEM COM			Fron	m:	3/8/2	<u>2016</u> To):	<u>4/11/2016</u>
					DATE			AMOUNT
Full Name of Contributor Lori Vargo Heffner				МО	DAY	YEAR		
Mailing Address 555 No Mailing				,	10	2016	\$	250.00
City Hanover Twp	State PA	Zip Code (Plus 4) 18706		3	18	2016		
Full Name of Contributor Blandine Mballa-Fonkeu+Mengue				МО	DAY	YEAR		
Mailing Address 1730 Wagon Wheel	Drive				,	2016	\$	150.00
City Easton	State PA	Zip Code (Plus 4) 18040		3	18	2016		

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

PAGE TOTAL \$ 400.00

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	of Filing Committee or Candidate Repo				Reporting Period					
NORTHAMPTON CO DEM COM			From:	<u>3/</u>	<u>/8/2016</u>	То:	<u>4</u>	<u>}/11/2016</u>		
				DA	TE		Α	MOUNT		
Full Name of Contributing Committee Easton Area Democratic Committee				мо	DAY	YEAR				
Mailing Address PO Box 1015				3	18	2016	\$	250.00		
City Easton	State PA	Zip Code 18044	e (Plus 4)	3	10	2010				
Full Name of Contributing Committee Easton Area Democratic Committee				МО	DAY	YEAR				
Mailing Address PO Box 1015							\$	700.00		
City Easton	State PA	Zip Code 18044	e (Plus 4)	3	18	2016				
								PAGE TOTAL		
Enter Grand Total of Part C on Sch	edule I, Detailed Sun	nmary Pa	ige, Sectio	n 3.			\$	950.00		

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	•			Rep	orting Pe	riod			
				Fror	n:		То):	
					D	ATE		A	MOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•	•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip Cod	le (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	O.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	d Summary Page	Section	4			P	AGE TOTAL
	2, 200 0000		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 Period		
NORTHAMPTON CO DEM COM	From:	3/8/2016 To:	<u>4/11/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
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 Contributor				Reporting 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 Sum	mary Pag	ле Г		PAGE TOTAL		
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL		
						\$	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	e				Re	porting F	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	taile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee	or Candidate		Reporti	ng Period			
NORTHAMPTON CO DEM (СОМ		From	<u>3/8</u>	<u>3/2016</u>	То:	4/11/2016
				DATE			AMOUNT
To Whom Paid Sandra O'Brien-Werner			МО	DAY	YEAR		
Mailing Address 705 Pa	xinosa Avenue		3	22	2016	\$	216.00
City Easton	State PA	Zip Code (Plus 4) 18042		otion of Exp Outreach M			es
To Whom Paid Lorraine Mineo			МО	DAY	YEAR		
Mailing Address 70 Ball	ak Road		3	22	2016	\$	282.33
City Riegelsville	State PA	Zip Code (Plus 4) 18077		otion of Exp Outreach T			inders
To Whom Paid Franklin Hill Vineyards	·		мо	DAY	YEAR		
Mailing Address 3625 N	azareth Road		3	22	2016	\$	107.52
City Easton	State PA	Zip Code (Plus 4) 18045	1	otion of Exp			
To Whom Paid April Niver			МО	DAY	YEAR		
Mailing Address 1210 C	hidsey Street		3	22	2016	\$	19.84
City Easton	State PA	Zip Code (Plus 4) 18042		otion of Exp			
To Whom Paid April Niver			мо	DAY	YEAR		
Mailing Address 1210 C	hidsey Street		3	22	2016	\$	18.01
	T	The Code (Blood)	+	<u> </u>	I	·	

Zip Code (Plus 4)

18042

Description of Expenditure

Pulse of Primary / Basket

State

PΑ

City

Easton

								TAGE 12
To Whom Paid Sandra O'Brien-Werner					DAY	YEAR		
Mailing Address 705 Paxinosa Avenue					11	2016	\$	9.01
City	Easton	State PA	Zip Code (Plus 4) 18042	Description of Expenditure Coasters for Country Basket				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							\$	PAGE TOTAL 652.71