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 2013	0228				port ed B		CAND	DATE		соми	1ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		FRII	END	S OF	PETER S	CHWEY	′ER							
Street Address:	PO BOX 4364																
City:	ALLENTOWN							State:	PA			Zip Cod	ie: 18	3105			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE	-	2.	30 DA PRIMA		POST-	3. X		AMENDM REPORT?		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	' PRE	≣-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	•	\
report type)	ANNUAL REPORT	7.	Year 2016					IG METH				PAPER		V	DISKE	TTE	
Name of Office S	Sought by Candida	te:	-					DATE C	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YE	AR		10000				
								11		8	2016		(SEE IN	STRUCTI	ONS FOR C	ODES)	1
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YE	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	irom:		4 12	2	016	T	0	5	5	16	2016						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			12,8	354.15						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$			3,0	00.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			15,8	354.15						
D. Total Expen	ditures (From Sch	edule II	I)				\$			1,3	356.90						
E. Ending Cash	Balance (Subtract	Line D	From Line C	:)			\$			14,4	97.25						
F. Value Of In-	Kind Contributions	Receiv	ed (From Sc	hedu	le II	I)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV))			\$				0.00			•			
				AFF	ID/	AVI	T SE	CTION									
	s a Committee rep	•	_														
I swear (or affirm) correct and complete) that this report, incl ete.	uding the	attached sch	edules	s file	ed on	paper (or by elect	tronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ıe
Sworn to and subs	cribed before me this	•	20							S	Signature	of Perso	n Submit	ting Rep	ort		-
	- Ciamatu						- -					Prin	ted Name	e			-
My Commission Ex	Signatu opires	ie										Ema	il				-
	мо	D	AY	YR					Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		_
Part II- If this is	a report of a cand	lidate's	authorized (Comn	nitte	ee, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and belie	f this	poli	itical	commi	ittee has r	not viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L.	. 1333	3,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate			- [
	day of 						-					Printe	d Name				-
	Signature						-										_
My Commission Exp	_											Ema	il				
	МО	D	AY	YR	1		•		Area	Code		Da	aytime T	elephor	e Numbe	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF PETER SCHWEYER	From:	<u>4/12/201</u>	<u>6</u> To:	<u>5/16/2016</u>
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)			\$	1,500.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting) Period	(2)	\$	1,500.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	1,000.00
All Other Contributions (Part D)			\$	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			\$	3,000.00

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	Name of Filing Committee or Candidate					Reporting Period					
FRIE	NDS OF PETER	SCHWEYER			Fre	om:	4/12/	<u>2016</u>	То	•	5/16/2016
							DATE				AMOUNT
		ting Committee				мо	DAY	YEA	\R		
LAWPA		000 N 000 OT 0								١.	250.00
	Address	800 N 3RD ST S			-	4	1	8 20)16	 \$	250.00
City	HARRISBURG		State Zip Code (Plus 4) PA 171022025								
	ime of Contribu	ting Committee DUNCIL #53				мо	DAY	YEA	\R		
Mailing	g Address	3460 N DELAWAR	DELAWARE AVE STE 310			4	1	8 20)16	 	250.00
City	PHILADELPHI	Д	State PA	Zip Code (Plus 4 191346311	4)	4	1	8 20	710		
Full Name of Contributing Committee AQUA AMERICA INC					МО	DAY	YEA	\R			
Mailing	Address 762 W LANCASTER AVE					4	2	2 20	016	\$	250.00
City	BRYN MAWR		State PA	Zip Code (Plus 4 190103402	4)						
	nme of Contribu	ting Committee		·		МО	DAY	YEA	\R		
Mailing	g Address	4001 RODNEY PA	RHAM RD			4	2	2 20)16	\$	250.00
City	LITTLE ROCK		State AR	Zip Code (Plus of 72212	4)	•	_		,,,		
		ting Committee		<u> </u>		мо	DAY	YEA	\R		
	o;L GATES, LLP Address		amp;L GATES CENT	ED							250.00
City	PITTSBURGH	210 OTT AVE RO	State	Zip Code (Plus	4)	4	1	8 20)16	\$	230.00
			PA	152222602							
Full Name of Contributing Committee AT&T PAC PENNSYLVANIA				мо	DAY	YEA	\R				
	Address	351 STANLEY DR				4	1	8 20)16	\$	250.00
	PALMYRA		State	Zip Code (Plus		4	l ¹	ا کا	,10	l	

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

PAGE TOTAL\$ 1,500.00

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 Candida	te		Reporting Period					
			Froi	m:		To) :	
					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.

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	Period				
FRIENDS OF PETER SCHWEYER			From:	<u>4/1</u>	<u>2/2016</u>	То:	5/16/2016	<u>5</u>
				DA	TE		AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		
TALENPAC							\$	500.00
Mailing Address 835 HAMILTON STREET				4	18	2016		
City ALLENTOWN	State	Zip Code	e (Plus 4)		10	2010		
	PA	18101						
Full Name of Contributing Committee				мо	DAY	YEAR		
CARPENTERS PAC OF PHILA. & amp; VIC	CINITY			1-10	DAI	ILAK	\$	500.00
Mailing Address 1803 SPRING GARDE	N ST			5	9	2016		
City PHILADELPHIA	State	Zip Code	e (Plus 4)	3		2010		

191303916

 $\label{lem:constraint} \textbf{Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3. }$

PA

PAGE TOTAL\$ 1,000.00

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				
FRIENDS OF PETER SCHWEYER				Fron	n:	4/12/2	<u>016</u>	To:	<u>5</u>	5/16/2016
					D <i>A</i>	ATE			AMO	JNT
Full Name of Contributor					МО	DAY	YEA	R	\$	500.00
NELSON A. DIAZ] *	300.00
Mailing Address 4413 NEWTON CIRCLE					5	9	201	16		
City EMMAUS	State	Zip	Code (Plus	4)			20.			
	PA	18	049							
Employer Name MI CASA PROPERTIES					Occupat	ion	OWEN	IER		
Employer Mailing Address/Principal Plac	e of Business		City			State			Zip Code (I	Plus 4)
4413 NEWTON CIRCLE			EMMAUS			PA			18049	
Inter Grand Total of Part C on Schedule I, Detailed Summary Page, Se					on 3.		ſ		PAGI	E TOTAL
	, , , , , , , , , , , , , , , , , , , ,		,					\$		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 Candidate		Report	ing Peri	od			
			From:			То:		
					ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (P	lus 4)					
Receipt Description	'	,		<u> </u>	-I	_ !	•	
			· ··	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	i Summary Page, S	Section	4.			\$	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	od	
FRIENDS OF PETER SCHWEYER	From:	4/12/2016 To :	<u>5/16/2016</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 Can	Reporting Period							
			From:			To	:	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•	•	•	•		·		
					-			
Enter Grand Total of Part F or	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	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:

Full Name of Contributor					мо	DAY	YEAR		
Mailing Address							\$	0.00	
City	State		Zip Code(Plus 4)						
Employer of Contributor					Оссира	tion			
Employer Mailing Address/P	rincipal Place of Business	Cit	ty	State	e Zip	Code(Plus 4)	Descri	ption of C	Contribution
			Contributions D						PAGE TOTAL

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Commit	tee or Candidate			Reportir	ng Period					
FRIENDS OF PETER S	CHWEYER			From	<u>4/12</u>	2/2016	То:	<u>5/16/2016</u>		
					DATE			AMOUNT		
To Whom Paid				мо	DAY	YEAR				
PETER SCHWEYER										
Mailing Address 152	29 CATALINA AVE	•		4	15	2016	\$	520.19		
City ALLENTOWN		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure				
		PA	18103	REIMBURSEMENT - FOOD FOR CAMPA ANNOUNCEMENT				AIGN		
To Whom Paid				мо	DAY	YEAR				
NESTOR TATIS				1-10						
Mailing Address 196	3 SOUTH DELAW	/ARE STREET		4	15	2016	\$	420.00		
City ALLENTOWN		State	Zip Code (Plus 4)	Description of Expenditure						
	18103		ON FOR T							
To Whom Paid				мо	DAY	YEAR				
SYRIAN ARAB AMERIC	AN CHARITY ASS	OCIATION								
Mailing Address 606	N. 2ND STREET			4	19	2016	\$	250.00		
City ALLENTOWN		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure				
		PA	181022504	AD AND	EVENT TI	CKET				
To Whom Paid				МО	DAY	YEAR				
PUNTA CANA RESTAUF	RANT									
Mailing Address 801	UNION BLVD			4	20	2016	\$	20.00		
City ALLENTOWN		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure				
		PA	18109	CAMPAI	GN LUNCH	I WITH V	OLUNTEER	२		
To Whom Paid				мо	DAY	YEAR				
ALLENTOWN PARKING	AUTHORITY									
Mailing Address 603	3 W. LINDEN ST			4	21	2016	\$	1.00		
City ALLENTOWN		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	-			
		PA	18101	CAMPAI	GN EXPEN	SE - PAR	KING			
To Whom Paid				мо	DAY	YEAR				
BELL HALL										
Mailing Address 612	2 HAMILTON STR	EET		4	27	2016	\$	70.00		
City ALLENTOWN		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	-			

18101

ELECTION NIGHT EXPENSE

To Whom Paid			мо	DAY	YEAR		
JACK CALLAGHAN'S ALE HOUSE							
Mailing Address 2027 TILGHMAN S			4	27	2016	\$	27.00
City ALLENTOWN State Zip Code (Plus 4)			Description of Expenditure				
	PA	18104	ELECTION NIGHT EXPENSE				
To Whom Paid			МО	DAY	YEAR		
SHANTY ON 19TH			140		ILAK		
Mailing Address 613 NORTH 19TH STREET			4	27	2016	\$	27.50
y ALLENTOWN State Zip Code (Plus 4) Description of Expenditure					enditure		
	PA	18104	ELECTION NIGHT EXPENSE				
To Whom Paid			МО	DAY	YEAR		
STAHLEY'S CELLARETTE			МО		ILAK		
Mailing Address 1826 HANOVER AVENUE			4	27	2016	\$	21.21
City ALLENTOWN	State	Zip Code (Plus 4)	Description of Expenditure				
	PA 18109 ELECTION NIGHT EXPENS					S	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	1,356.90