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 8	80006	34				oort		CANDI	DATE		СОМ	4ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Car	ndida	te or Lo	bbyist:		NOR	RTHA	AMPTO	ON CO D	ЕМ СО	М							
Street Address:	PO BOX 2	2256	ı															
City:	LEHIGH V	'ALLE	Y						State:	PA			Zip Cod	de: 18	3002-2	256		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRIDA' PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	•	\
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND FRIDAY ELECTION	y pre	≣- !	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	•	\
report type)	ANNUAL REPO	ORT	7. X	Year 2016					NG METH				PAPER		/	DISKE	TTE	
Name of Office S	ought by Cand	didate	e:						DATE C	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
									МО	DAY	YE	AR	Number	Couc			Couc	
									11		8	2016		(SEE IN	ISTRUCTI	ONS FOR (CODES)
Summary of Expenditures		d	МО	DAY	YEAR			_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
			1	.1 29	2	016	I	0	12		31	2016						
A. Amount Bro	ught Forward	From	Last Re	eport				\$			6,2	226.12						
B. Total Monet	ary Contributio	ons A	nd Rece	eipts (From	Sche	dule	I)	\$				0.00						
C. Total Funds	Available (Sun	n Of I	Lines A	and B)				\$			6,2	226.12						
D. Total Expend	ditures (From	Sche	dule III	:)				\$			6	58.95						
E. Ending Cash	Balance (Subt	tract	Line D I	From Line (C)			\$			5,5	67.17						
F. Value Of In-	Kind Contribut	tions	Receive	ed (From So	chedu	le II)	\$				0.00						
G. Unpaid Debt	s And Obligati	ions (From S	chedule IV)			\$				0.00			•			
					AFF	IDA	١٧٧	T SE	CTION									
PART I - If this is		-	-	_								_						
I swear (or affirm) correct and comple		, inclu	ding the	attached sch	nedule	s filed	d on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , trı	ue.
Sworn to and subs	cribed before me day of	e this		20							s	ignature	of Perso	n Submit	ting Rep	ort		_
								- -					Prin	ted Name	e			-
My Commission Ex	-	nature	=										Ema	il				-
	мо		DA	Υ	YR			_		Are	ea Cod	le	Daytim	e Teleph	none Nu	mber		_
Part II- If this is	a report of a	candi	date's a	authorized	Comn	nitte	e, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende		t of my	y knowle	dge and beli	ef this	polit	ical	commi	ittee has r	ot viola	ted an	y provisi	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me	this										Si	ignature o	of Candid	ate			-
	day of 							-					Drinta	d Name				_
	Signat	ure						-						.a maine				
My Commission Exp	_	-											Ema	il				
	мо)	DA	ίΥ	YR	l		•		Area	Code		Da	aytime T	elephor	e Numb	er	⁻

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
NORTHAMPTON CO DEM COM	From:	11/29/202	<u>16</u> To:	<u>12/31/2016</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	g 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	g Period	(3)	\$	0.00
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			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Name of Filing Committe	e or Candidate		Reporting	Period			
			From:		То	:	
		L		DATE			AMOUNT
Full Name of Contributing	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 Candida	ite		Rep	oorting P	eriod			
			From: 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.

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			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	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				Rep	orting Pe	riod				
				Fror	n:		To	o:		
					D	ATE			AMOUNT	
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 C	ode (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	TAL 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	Candidate		Report	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	-	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z</i>	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	od	
NORTHAMPTON CO DEM COM	From:	<u>11/29/2016</u> To:	<u>12/31/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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 Candidat	:e		Reporting	g Period			
			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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		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

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee of	or Candidate		Reporti	ng Period			
NORTHAMPTON CO DEM C	ОМ		From	11/2	9/2016	То:	12/31/2016
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Jerry Green							
Mailing Address 53 E Lel	nigh Street		12	2	2016	\$	150.00
City Bethlehem	State	Zip Code (Plus 4)	Descrip	tion of Ex	penditure	<u>'</u>	
	PA	18018	Music E	ntertainm	ent / Pic	nic	
To Whom Paid Matt Munsey			МО	DAY	YEAR		
Mailing Address 1210 W	ashington Street		12	12	2016	\$ \$	100.00
City Easton	State	Zip Code (Plus 4)	Descrip	tion of Ex	penditure	<u> </u>	
	18042	1	Cashed Che				
To Whom Paid Matt Munsey			МО	DAY	YEAR		
Mailing Address 1210 W	ashington Street		12	12	2016	\$	400.00
City Easton	State	Zip Code (Plus 4)	Descrip	tion of Ex	penditure	<u>'</u>	
	PA	18042	BB&T V	isa Gift Ca	ard/Camp	oaign	
To Whom Paid BB&T			МО	DAY	YEAR		
Mailing Address 2000 Su	ıllivan Trail		12	12	2016	\$	3.95
City Easton	State	Zip Code (Plus 4)	Descrip	tion of Ex	penditure	:	
	PA	18040	BB&T V	isa Gift Ca	ard Fee		
To Whom Paid Voter Registration N 09-06	/ Ngp Van		МО	DAY	YEAR		
Mailing Address 48 Grov	e Street Suite 202		12	6	2016	\$	5.00
City Somerville	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure	<u> </u>	
251161 1116	MA	02144		ctivation 6			
	·	1	•				PAGE TOTAL
Enter Grand Total of Exp	enditures on Page 1, Re	port Cover Page, Item I	D.			1	