

Campaign Finance Report

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

Filer Identification Number :		20130228		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF PETER SCHWEYER												
Street Address: PO BOX 4364												
City: ALLENTOWN						State: PA			Zip Code: 18105			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2016	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR	DEM			
						11	8	2016	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:				MO	DAY	YEAR	FOR OFFICE USE ONLY					
				11	29	2016	TO	MO	DAY	YEAR		
								12	31	2016		
A. Amount Brought Forward From Last Report						\$ 10,815.16						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 0.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 10,815.16						
D. Total Expenditures (From Schedule III)						\$ 4,997.83						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 5,817.33						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 0.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF PETER SCHWEYER	From: <u>11/29/2016</u> To: <u>12/31/2016</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)	\$ 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)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 0.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 0.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	0.00

PART B

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
	From: To:

DATE			AMOUNT
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Full Name of Contributor			MO	DAY	YEAR	\$0.00
Mailing Address						
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:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 0.00

PART D
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	Reporting Period
	From: To:

			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 0.00

PART E
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	Reporting Period
	From: To:

			DATE		AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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	
FRIENDS OF PETER SCHWEYER		From: <u>11/29/2016</u> To: <u>12/31/2016</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	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: To:

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							PAGE TOTAL \$ 0.00

SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF PETER SCHWEYER	From <u>11/29/2016</u> To: <u>12/31/2016</u>

DATE				AMOUNT
To Whom Paid CENTRO	MO	DAY	YEAR	
Mailing Address 530 HAMILTON ST.	12	5	2016	\$ 100.00
City ALLENTOWN	State PA	Zip Code (Plus 4) 18101	Description of Expenditure MEETING EXPENSE	
To Whom Paid FORENSIC CONSULTANTS	MO	DAY	YEAR	
Mailing Address PO BOX 1177	12	6	2016	\$ 800.00
City PENNSAUKEN	State NJ	Zip Code (Plus 4) 081090177	Description of Expenditure PETITION REVIEW FEE	
To Whom Paid NGP VAN	MO	DAY	YEAR	
Mailing Address 1101 15TH ST NW STE 500	12	6	2016	\$ 225.00
City WASHINGTON	State DC	Zip Code (Plus 4) 200055006	Description of Expenditure QUARTERLY DATABASE FEE	
To Whom Paid LYDIA T. SEIDICK	MO	DAY	YEAR	
Mailing Address 383 VALLEY HL CT	12	6	2016	\$ 120.00
City WALNUTPORT	State PA	Zip Code (Plus 4) 180889655	Description of Expenditure 2017 WEBSITE HOSTING FEE	
To Whom Paid SOLLENBERGER'S MESSENGER SERV. INC.	MO	DAY	YEAR	
Mailing Address 200 CORPORATE CIRCLE	12	9	2016	\$ 30.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure NOTARY FEE	

To Whom Paid SUGAR HILL JAZZ HOUSE			MO	DAY	YEAR	\$ 1,589.14
Mailing Address 39 S 9TH ST.			12	9	2016	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18102	Description of Expenditure EVENT CATERING EXPENSE			

To Whom Paid DELUXE			MO	DAY	YEAR	\$ 122.96
Mailing Address PO BOX 64468			12	12	2016	
City SAINT PAUL	State MN	Zip Code (Plus 4) 551640468	Description of Expenditure REORDER CHECKS			

To Whom Paid ROAR SOCIAL CLUB			MO	DAY	YEAR	\$ 68.38
Mailing Address 732 HAMILTON STREET			12	16	2016	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18101	Description of Expenditure MEETING EXPENSE-CAMPAIGN MEETING			

To Whom Paid GREATER LEHIGH CHAMBER OF COMMERCE			MO	DAY	YEAR	\$ 125.00
Mailing Address 840 HAMILTON STREET SUITE 205			12	19	2016	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18101	Description of Expenditure CAMPAIGN EXPENSE - GIFT CARDS			

To Whom Paid REDNER'S MARKET			MO	DAY	YEAR	\$ 1,710.00
Mailing Address 2300 LEHIGH STREET			12	19	2016	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18103	Description of Expenditure CAMPAIGN EXPENSE - GIFT CARDS			

To Whom Paid WEGMAN'S			MO	DAY	YEAR	\$ 50.00
Mailing Address 3900 TILGHMAN STREET			12	22	2016	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18104	Description of Expenditure CAMPAIGN EXPENSE - GIFT CARDS			

To Whom Paid U-HAUL MOVING AND STORAGE			MO	DAY	YEAR	
Mailing Address 1428 E. LIVINGSTON ST.			12	30	2016	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18103	Description of Expenditure STORAGE UNIT PAYMENT			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 4,997.83

