

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 : 8000634		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: NORTHAMPTON CO DEM COM											
Street Address: PO BOX 22256											
City: LEHIGH VALLEY					State: PA		Zip Code: 18002-2256				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1. <input checked="" type="checkbox"/>	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.	Year 2017	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				
					11	7	2017	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		1	1	2017		3	27	2017			
A. Amount Brought Forward From Last Report					\$ 5,567.17						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 4,191.10						
C. Total Funds Available (Sum Of Lines A and B)					\$ 9,758.27						
D. Total Expenditures (From Schedule III)					\$ 892.00						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 8,866.27						
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
NORTHAMPTON CO DEM COM	From: <u>1/1/2017</u> To: <u>3/27/2017</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 1,123.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 218.10
All Other Contributions (Part B)	\$ 600.00
TOTAL for the Reporting Period (2)	\$ 818.10

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)	\$ 2,250.00
TOTAL for the Reporting Period (3)	\$ 2,250.00

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.)	\$ 4,191.10
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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 NORTHAMPTON CO DEM COM	Reporting Period From: <u>1/1/2017</u> To: <u>3/27/2017</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee Friends of Michael Recchiuti			MO	DAY	YEAR	\$ 91.55
Mailing Address PO Box 202			2	27	2017	
City Bethlehem	State PA	Zip Code (Plus 4) 18016				

Full Name of Contributing Committee Vivian Zumas for Judge			MO	DAY	YEAR	\$ 91.55
Mailing Address 742 Main Street			3	13	2017	
City Bethlehem	State PA	Zip Code (Plus 4) 18018				

Full Name of Contributing Committee Friends of Ron Heckman			MO	DAY	YEAR	\$ 35.00
Mailing Address 2104 Huntington Street			3	27	2017	
City Bethlehem	State PA	Zip Code (Plus 4) 18017				

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

PAGE TOTAL
\$ 218.10

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 NORTHAMPTON CO DEM COM	Reporting Period From: <u>1/1/2017</u> To: <u>3/27/2017</u>
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				DATE		AMOUNT	
Full Name of Contributor Lisa Ditalia				MO	DAY	YEAR	\$ 50.00
Mailing Address 536 E Locust St				2	27	2017	
City Bethlehem	State PA	Zip Code (Plus 4) 18018					
Full Name of Contributor Lisa Ditalia				MO	DAY	YEAR	\$ 60.00
Mailing Address 536 E Locust St				3	27	2017	
City Bethlehem	State PA	Zip Code (Plus 4) 18018					
Full Name of Contributor Susan Grassi				MO	DAY	YEAR	\$ 35.00
Mailing Address 8 CREST BLVD				3	27	2017	
City Easton	State PA	Zip Code (Plus 4) 18045					
Full Name of Contributor Lori Vargo-Heffner				MO	DAY	YEAR	\$ 55.00
Mailing Address 1481 Sanbrook Ct				3	27	2017	
City Bethlehem	State PA	Zip Code (Plus 4) 18015					
Full Name of Contributor Lorraine Mineo				MO	DAY	YEAR	\$ 30.00
Mailing Address 70 Ballek Rd				3	27	2017	
City Riegelsville	State PA	Zip Code (Plus 4) 18077					

Full Name of Contributor Cindy Lopresti			MO	DAY	YEAR	\$ 30.00
Mailing Address 308 W. Pen Argyl Street			3	27	2017	
City Pen Argyl	State PA	Zip Code (Plus 4) 18072				

Full Name of Contributor Joanne Messeblehner			MO	DAY	YEAR	\$ 20.00
Mailing Address 40 Shoeneck Avenue			3	27	2017	
City Nazareth	State PA	Zip Code (Plus 4) 18064				

Full Name of Contributor Robert Munsey			MO	DAY	YEAR	\$ 100.00
Mailing Address 2728 S Grove Street			3	27	2017	
City Arlington	State PA	Zip Code (Plus 4) 22202				

Full Name of Contributor George Treisner			MO	DAY	YEAR	\$ 60.00
Mailing Address 236 E. Ettwein Street			3	22	2017	
City Bethlehem	State PA	Zip Code (Plus 4) 18018				

Full Name of Contributor Kaija Farber			MO	DAY	YEAR	\$ 60.00
Mailing Address 145 E Broad Street			3	22	2017	
City Bethelehem	State PA	Zip Code (Plus 4) 18018				

Full Name of Contributor Lorraine Pasquali			MO	DAY	YEAR	\$ 50.00
Mailing Address 827 Pine Street			3	22	2017	
City Bethlehem	State PA	Zip Code (Plus 4) 18018				

Full Name of Contributor			MO	DAY	YEAR	\$ 50.00
Lorraine Pasquali						
Mailing Address			3	18	2017	
827 Pine Street						
City	State	Zip Code (Plus 4)				
Bethlehem	PA	18018				

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

PAGE TOTAL
\$ 600.00

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	<div>\$</div> <div>0.00</div>	
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 NORTHAMPTON CO DEM COM	Reporting Period From: <u>1/1/2017</u> To: <u>3/27/2017</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
David Mattei							
Mailing Address 3476 Westminster Way				3	22	2017	\$ 500.00
City Nazareth	State PA	Zip Code (Plus 4) 18064					
Employer Name Farmers Insurance				Occupation Insurance agent			
Employer Mailing Address/Principal Place of Business 6 S Broad St			City Nazareth		State PA	Zip Code (Plus 4) 18064	
Clyde Thomas							
Mailing Address 315 Hamilton Avenue				2	27	2017	\$ 350.00
City Bethlehem	State PA	Zip Code (Plus 4) 18017					
Employer Name Self				Occupation Self-employed			
Employer Mailing Address/Principal Place of Business 315 Hamilton Avenue			City Bethlehem		State PA	Zip Code (Plus 4) 18017	
Glenn Reibman							
Mailing Address 1231 Lieb Road				2	27	2017	\$ 350.00
City Easton	State PA	Zip Code (Plus 4) 18040					
Employer Name Retired				Occupation Retiree			
Employer Mailing Address/Principal Place of Business 1231 Lieb Road			City Easton		State PA	Zip Code (Plus 4) 18040	

Full Name of Contributor Sandy O'Brien-Werner			MO	DAY	YEAR	\$ 350.00
Mailing Address 705 Paxinosa Avenue			2	27	2017	
City Easton	State PA	Zip Code (Plus 4) 18042				
Employer Name Retired			Occupation Retiree			
Employer Mailing Address/Principal Place of Business 705 Paxinosa Avenue		City Easton	State PA	Zip Code (Plus 4) 18042		

Full Name of Contributor Larry Lauritzen			MO	DAY	YEAR	\$ 350.00
Mailing Address 147 Charles Street			2	27	2017	
City Easton	State PA	Zip Code (Plus 4) 18042				
Employer Name Lehigh Hanson Manufacturing			Occupation Land Manager			
Employer Mailing Address/Principal Place of Business 7660 Imperial Way		City Allentown	State PA	Zip Code (Plus 4) 18016		

Full Name of Contributor April Niver			MO	DAY	YEAR	\$ 350.00
Mailing Address 737 Washington Road			2	27	2017	
City Easton	State PA	Zip Code (Plus 4) 18042				
Employer Name Government/US Congress			Occupation Economic Development Director			
Employer Mailing Address/Principal Place of Business 400 Northampton Stree		City Easton	State PA	Zip Code (Plus 4) 18042		

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

PAGE TOTAL
\$ 2,250.00

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				
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	
NORTHAMPTON CO DEM COM		From: <u>1/1/2017</u> To: <u>3/27/2017</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

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
NORTHAMPTON CO DEM COM	From <u>1/1/2017</u> To: <u>3/27/2017</u>

DATE				AMOUNT		
To Whom Paid Bethlehem Township			MO	DAY	YEAR	\$ 100.00
Mailing Address 2900 Farmersville Road			1	20	2017	
City Bethlehem	State PA	Zip Code (Plus 4) 18020	Description of Expenditure Pavilion rental fee			
To Whom Paid Bethlehem Township			MO	DAY	YEAR	\$ 25.00
Mailing Address 2900 Farmersville Road			1	20	2017	
City Bethlehem	State PA	Zip Code (Plus 4) 18020	Description of Expenditure Alcohol fee			
To Whom Paid Bethlehem Township			MO	DAY	YEAR	\$ 150.00
Mailing Address 2900 Farmersville Road			2	1	2017	
City Bethlehem	State PA	Zip Code (Plus 4) 18020	Description of Expenditure Security Deposit			
To Whom Paid Nazareth Diner			MO	DAY	YEAR	\$ 375.00
Mailing Address 581 Broad Street			2	1	2017	
City Nazareth	State PA	Zip Code (Plus 4) 18064	Description of Expenditure Event Venue & Catering			
To Whom Paid USPS			MO	DAY	YEAR	\$ 142.00
Mailing Address 17 S commerce way			2	7	2017	
City Bethlehem	State PA	Zip Code (Plus 4) 18017	Description of Expenditure Mailbox renewal			

To Whom Paid Stefanos Restaurant			MO	DAY	YEAR	
Mailing Address 2970 Linden Street			2	8	2017	
City Bethlehem	State PA	Zip Code (Plus 4) 18017	Description of Expenditure Reservation Fee			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 892.00

