

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 : 2010370		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: MARTIN, JIM COM TO ELECT											
Street Address: 645 HAMILTON STREET STE 204											
City: ALLENTOWN				State: PA		Zip Code: 18101					
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.X	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	REP 39			
					11	7	2017	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		6	6	2017		10	23	2017			
A. Amount Brought Forward From Last Report					\$ 73,463.39						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 0.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 73,463.39						
D. Total Expenditures (From Schedule III)					\$ 4,531.57						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 68,931.82						
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
MARTIN, JIM COM TO ELECT	From: <u>6/6/2017</u> To: <u>10/23/2017</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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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:
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			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	
MARTIN, JIM COM TO ELECT		From: <u>6/6/2017</u> To: <u>10/23/2017</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:
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				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
MARTIN, JIM COM TO ELECT	From <u>6/6/2017</u> To: <u>10/23/2017</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
James Martin				
Mailing Address 3845 Hawthorne Rd	7	20	2017	\$ 63.43
City Center Valley	State PA	Zip Code (Plus 4) 18034	Description of Expenditure	
			Reimbursement lunch with Mayor Donchez 7/5/17	
To Whom Paid	MO	DAY	YEAR	
Kelly Ann Rooney Memorial Foundation				
Mailing Address 3897 Firebrick Rd	7	6	2017	\$ 150.00
City Macungie	State PA	Zip Code (Plus 4) 18062	Description of Expenditure	
			Contribution	
To Whom Paid	MO	DAY	YEAR	
Lafayette Ambassador Bank				
Mailing Address 2005 City Line Rd	9	30	2017	\$ 8.00
City Bethlehem	State PA	Zip Code (Plus 4) 18017	Description of Expenditure	
			Bank Charges 6/30/17-9/30/17	
To Whom Paid	MO	DAY	YEAR	
PSP-HEMC				
Mailing Address 187 E Hershey Park Drive	7	20	2017	\$ 175.00
City Harrisburg	State PA	Zip Code (Plus 4) 17033-9528	Description of Expenditure	
			Tee Sponsor	
To Whom Paid	MO	DAY	YEAR	
Hyman for Mayor				
Mailing Address 118 South 16th St	8	7	2017	\$ 250.00
City Allentown	State PA	Zip Code (Plus 4) 18102	Description of Expenditure	
			Contribution/Reception 8/17/17	

To Whom Paid Republican State Committee of PA			MO	DAY	YEAR	\$ 250.00
Mailing Address 112 State St			8	7	2017	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure Contribution			

To Whom Paid Easter Seals, Eastern PA			MO	DAY	YEAR	\$ 100.00
Mailing Address 1501 Lehigh St Ste 201			8	7	2017	
City Allentown	State PA	Zip Code (Plus 4) 18103	Description of Expenditure Sponsorship Mary Ellen Golf Tournament			

To Whom Paid Cetornia Ambulance Corps			MO	DAY	YEAR	\$ 125.00
Mailing Address 4300 Broadway			8	7	2017	
City Allentown	State PA	Zip Code (Plus 4) 18104	Description of Expenditure Contribution 9/11/17 Golf Tournament			

To Whom Paid Police Athletic League			MO	DAY	YEAR	\$ 300.00
Mailing Address 425 Hamilton St			8	7	2017	
City Allentown	State PA	Zip Code (Plus 4) 18101	Description of Expenditure Contribution Golf Tournament			

To Whom Paid Good Shepherd Rehab			MO	DAY	YEAR	\$ 500.00
Mailing Address 850 South 5th St			8	7	2017	
City Allentown	State PA	Zip Code (Plus 4) 18103	Description of Expenditure Sponsorship Fall Classic Golf Tournament			

To Whom Paid Muhlenberg College			MO	DAY	YEAR	\$ 60.00
Mailing Address 2400 Chew St			8	7	2017	
City Allentown	State PA	Zip Code (Plus 4) 18104-9951	Description of Expenditure Board of Associates dues			

To Whom Paid PA Sheriff's Association			MO	DAY	YEAR	\$ 25.00
Mailing Address 2426 N Second St			8	7	2017	
City Harrisburg	State PA	Zip Code (Plus 4) 17110	Description of Expenditure Honorary membership			

To Whom Paid St Thomas More Society Diocese of Allentown			MO	DAY	YEAR	\$ 125.00
Mailing Address PO Box 8744			8	7	2017	
City Allentown	State PA	Zip Code (Plus 4) 18105	Description of Expenditure Sponsorship Red Mass			

To Whom Paid Ashley Inc			MO	DAY	YEAR	\$ 250.00
Mailing Address 800 Tydings Lane			9	19	2017	
City Havre de Grace	State MD	Zip Code (Plus 4) 21078	Description of Expenditure Attend 10/26/17 event			

To Whom Paid Giordano for Judge			MO	DAY	YEAR	\$ 500.00
Mailing Address 2601 N Front St Ste 101			9	19	2017	
City Harrisburg	State PA	Zip Code (Plus 4) 17110	Description of Expenditure Host Committee 9/20/17 Reception			

To Whom Paid Miracle League LV			MO	DAY	YEAR	\$ 300.00
Mailing Address 4460 Parkview Drive Apt T8			9	19	2017	
City Schnecksville	State PA	Zip Code (Plus 4) 18078	Description of Expenditure Attend annual Gala			

To Whom Paid James Martin			MO	DAY	YEAR	\$ 800.14
Mailing Address 3845 Hawthorne Dr			9	19	2017	
City Center Valley	State PA	Zip Code (Plus 4) 18034	Description of Expenditure Reimbursement Lehigh County Police Chiefs Event 9/7/17			

To Whom Paid PA BAR- PAC			MO	DAY	YEAR	
Mailing Address 100 South St PO Box 186			10	5	2017	
City Harrisburg	State PA	Zip Code (Plus 4) 17108-0186	Description of Expenditure Contribution			

To Whom Paid Stedman for Judge			MO	DAY	YEAR	
Mailing Address PO Box 624			10	5	2017	
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Contribution			

To Whom Paid DASPOP			MO	DAY	YEAR	
Mailing Address PO Box 153			10	5	2017	
City Myerstown	State PA	Zip Code (Plus 4) 17067	Description of Expenditure Drug & Alcohol donation/dinner			

To Whom Paid The Foundation for Enhancing Communities			MO	DAY	YEAR	
Mailing Address PO Box 465			10	5	2017	
City Hummelstown	State PA	Zip Code (Plus 4) 17036	Description of Expenditure Contribution			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 4,531.57

