#### **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 200	3296			Rep File			CAN	DII	DATE		COMN	1ITTEE	<b>✓</b>	LOB	BYIST		
Name of Filing C	ommittee, Cand	idate or L	obbyist:		EMR	ICK	JOE	COMM:	ITT	EE TO	ELE	CT C/O	TREASU	IRER JO	ANN C	CARDE	LLO	
Street Address:	P.O. BOX 12	21																
City:	TANNERSVII	LLE						State:		PA			Zip Cod	le: 18	372			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2	2.	30 DA		P	OST-	3. <b>X</b>		AMENDM REPORT?		Yes	N	0	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- !	5.	30 DA		P	OST-	6.		TERMINA REPORT?		Yes	١	0	<b>/</b>
report type)	ANNUAL REPOR	<b>T</b> 7.	<b>Year</b> 2018					NG MET CHECK		_			PAPER		<b>\</b>	DISK	ETTE	
Name of Office S	ought by Candid	ate:						DATE	OI	F ELE	CTIC	N	District Number	Office Code	Par	ty Cod	e Cour	
								МО		DAY	Y	EAR			REF	)	•	
									11		6	2018		(SEE INS	TRUCTI	ONS FOI	CODES	6)
	Receipts and	МО	DAY	YEAR	l			МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	from:		5 1	2	018	Т	0		6		4	2018						
A. Amount Bro	ught Forward Fro	om Last R	leport				\$				147,	395.09						
B. Total Moneta	ary Contribution	s And Rec	eipts (Fron	n Sche	dule	I)	\$				10,	250.00						
C. Total Funds	Available (Sum (	Of Lines A	and B)				\$			:	157,	645.09						
D. Total Expend	ditures (From Sc	hedule II	Ί)				\$				1,2	232.20						
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$			1	56,4	412.89						
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	chedu	le II	)	\$				1,2	220.70						
G. Unpaid Debt	s And Obligation	s (From	Schedule IV	/)			\$					0.00		,				
				AFF	IDA	١V	T SE	CTIO	N									
PART I - If this is			_									_						
I swear (or affirm) correct and comple		iciuaing th	e attacned sc	neaules	s filed	ı on	paper	or by ele	ectr	onic me	eaium	i, are to t	ne best o	r my knov	vieage	and be	iler , tr	rue.
Sworn to and subs	cribed before me tl day of	nis	20						-			Signature	of Perso	n Submitt	ing Re <sub>l</sub>	ort		_
	Signa	ture					-		•				Prin	ted Name				
My Commission Ex	pires						_		-				Emai	il				
	МО	D	AY	YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		$\perp$
Part II- If this is	a report of a ca	ndidate's	authorized	Comn	nitte	e, C	andid	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		my knowl	edge and beli	ief this	polit	ical	comm	ittee ha	s no	ot violat	ted ar	ny provisi	ions of the	e act of Ju	ine 3,1	937 (P	.L. 133	3,
Sworn to and subsc	ribed before me thi day of	s	30									Si	ignature o	of Candida	ite			_
			_ 20				-						Printe	d Name				-
	Signature	e					-		_									_
My Commission Exp	ires												Ema	iI				
	мо	D	AY	YR			-			Area	Code		Da	ytime Te	elephor	ne Num	ber	_

## SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reportin	g Period	
EMRICK JOE COMMITTEE TO ELECT C/O TREASURER JOANN CARDELLO	From:	<u>5/1/2018</u> <b>To:</b>	6/4/2018
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	g Period	(1) \$	450.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)			
Contributions Received From Political Committees (Part A)		\$	250.00
All Other Contributions (Part B)		\$	300.00
TOTAL for the Reporting	g Period	(2) \$	550.00
3. Contributions Received Over \$250.00 (From Part C and Part D)			
Contributions Received From Political Committees (Part C)		\$	8,650.00
All Other Contributions (Part D)		\$	600.00
TOTAL for the Reporting	g Period	(3) \$	9,250.00
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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			10,250.00

#### **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 of Filing Committee or Candidate

EMRICK JOE COMMITTEE TO ELECT C/O TREASURER JOANN
CARDELLO

Reporting Period

From: 5/1/2018
To: 6/4/2018

DATE AMOUNT

Full Name of Contributing Committee PA FRATERNAL ORDER OF POLICE			МО	DAY	YEAR	
Mailing Address 2949 N. FRONT ST	г.					\$ 250.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110	5	18	2018	

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

**PAGE TOTAL \$** 250.00

### 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 Candidat	e		Rep	orting Pe	eriod		
EMRICK JOE COMMITTEE TO ELECT C CARDELLO	C/O TREASURER JO	ANN	Fro	m:	5/1/2	2 <u>018</u> To	6/4/2018
					DATE		AMOUNT
Full Name of Contributor JIN ZU ZHONG				МО	DAY	YEAR	
Mailing Address 525 S NEW ST.				_			<b>\$</b> 100.00
City NAZARETH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18064		5	18	2018	
Full Name of Contributor  MR & MRS. SHELDON KOEHLER				МО	DAY	YEAR	
Mailing Address 266 TREELINE DR.							<b>\$</b> 100.00
City PEN ARGYL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18072		5	18	2018	
Full Name of Contributor RONALD SCHAGEL				МО	DAY	YEAR	
Mailing Address 622 JAMES ST.							\$ 100.00
City EASTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18042		5	18	2018	
							PAGE TOTAL

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

300.00

#### **PART C**

#### **Contributions Received From Political Committees**

Name of Filing Committee or Candidate

**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.

**Reporting Period** 

EMRICK JOE COMMITTEE TO ELECT C/O CARDELLO	TREASURER JOANN		From:	<u>5/</u>	1/2018	То:	<u>6/4/2018</u>	
				DA	TE		AMOUNT	
Full Name of Contributing Committee PA OPTOMETRIC PAC				МО	DAY	YEAR		
Mailing Address 218 NORTH ST.				-	10	2010	\$ 30	00.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code</b> 17101	e (Plus 4)	5	18	2018		
Full Name of Contributing Committee HAPAC				МО	DAY	YEAR		
Mailing Address 30 NORTH THIRD ST		I I	(2)	5	30	2018	<b>\$</b> 30	00.00
<b>City</b> HARRISBURG	<b>State</b> PA	17101	e (Plus 4)					
Full Name of Contributing Committee CHAMBER PAC				МО	DAY	YEAR		
Mailing Address 417 WALNUT ST.							<b>\$</b> 30	00.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code</b> 17101	e (Plus 4)	5	18	2018		
Full Name of Contributing Committee PA ASSOC. OF PRIVATE SCHOOL ADMI	N PAC			МО	DAY	YEAR		
Mailing Address 224 PINE ST.							<b>\$</b> 30	00.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code</b> 17101	e (Plus 4)	5	18	2018		
Full Name of Contributing Committee B&B PAC				МО	DAY	YEAR		
Mailing Address 4075 LINGLESTOWN	RD.						<b>\$</b> 30	00.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code</b> 17112	e (Plus 4)	5	18	2018		

						PAGE 6
Full Name of Contributing Commit	tee		мо	DAY	YEAR	
CPA PAC						
Mailing Address 500 N. 3RD ST	. SUITE 600A					<b>\$</b> 300.
City HARRISBURG	State	Zip Code (Plus 4)	5	18	2018	
Thursday	PA	17101				
Full Name of Contributing Commit	tee	·	мо	DAY	YEAR	
THE PA INSURANCE PAC			140	חאם	ILAK	
Mailing Address 1600 MARKET	ST. STE 1720					<b>\$</b> 300.
City PHILADELPHIA	State	Zip Code (Plus 4)	5	18	2018	
· ITILADELITIA	PA	19103				
Full Name of Contributing Commit	tee		МО	DAY	YEAR	
PA MEDICAL PAC						
Mailing Address P.O. BOX 8820			_		2010	<b>\$</b> 300.
City HARRISBURG	State	Zip Code (Plus 4)	5	18	2018	
	PA	17105				
Full Name of Contributing Commit	tee		MO	DAY	VEAD	
Full Name of Contributing Commit	tee		мо	DAY	YEAR	
EXELON PAC	tee TION AVE. NW SUI					\$ 300.
EXELON PAC  Mailing Address 101 CONSTITU			<b>MO</b> 5	<b>DAY</b> 18	<b>YEAR</b> 2018	\$ 300.
EXELON PAC  Mailing Address 101 CONSTITU	TION AVE. NW SUI	ITE 400 E.				\$ 300.
EXELON PAC  Mailing Address 101 CONSTITU  City WASHINGTON  Full Name of Contributing Committee	TION AVE. NW SUI	ITE 400 E.  Zip Code (Plus 4)				\$ 300.
EXELON PAC  Mailing Address 101 CONSTITU  City WASHINGTON  Full Name of Contributing Commits  BIKE PAC	TION AVE. NW SUI	ITE 400 E.  Zip Code (Plus 4)	- 5	18	2018	\$ 300.
EXELON PAC  Mailing Address 101 CONSTITU  City WASHINGTON  Full Name of Contributing Committee	TION AVE. NW SUI	Zip Code (Plus 4) 20001	- 5 <b>MO</b>	18 <b>DAY</b>	2018 YEAR	\$ 300. \$ 300.
EXELON PAC  Mailing Address 101 CONSTITU  City WASHINGTON  Full Name of Contributing Commits  BIKE PAC	TION AVE. NW SUI	ITE 400 E.  Zip Code (Plus 4)	- 5	18	2018	
EXELON PAC  Mailing Address 101 CONSTITU  City WASHINGTON  Full Name of Contributing Committed BIKE PAC  Mailing Address PO BOX 564	TION AVE. NW SUI	Zip Code (Plus 4) 20001	- 5 <b>MO</b>	18 <b>DAY</b>	2018 YEAR	
EXELON PAC  Mailing Address 101 CONSTITU  City WASHINGTON  Full Name of Contributing Committed BIKE PAC  Mailing Address PO BOX 564	TION AVE. NW SUI	Zip Code (Plus 4) 20001 Zip Code (Plus 4)	- 5 мо	18 DAY	2018  YEAR  2018	
EXELON PAC  Mailing Address 101 CONSTITUTE  City WASHINGTON  Full Name of Contributing Committed BIKE PAC  Mailing Address PO BOX 564  City MECHANICSBURG	TION AVE. NW SUI	Zip Code (Plus 4) 20001 Zip Code (Plus 4)	- 5 <b>MO</b>	18 <b>DAY</b>	2018 YEAR	
EXELON PAC  Mailing Address 101 CONSTITUTE  City WASHINGTON  Full Name of Contributing Committed BIKE PAC  Mailing Address PO BOX 564  City MECHANICSBURG  Full Name of Contributing Committed PAA PAC	TION AVE. NW SUI	Zip Code (Plus 4) 20001  Zip Code (Plus 4) 17055	- 5 мо	18 DAY	2018  YEAR  2018	
EXELON PAC  Mailing Address 101 CONSTITUTE  City WASHINGTON  Full Name of Contributing Committed BIKE PAC  Mailing Address PO BOX 564  City MECHANICSBURG  Full Name of Contributing Committed PAA PAC  Mailing Address 1925 N. FRONT	State DC  State PA	Zip Code (Plus 4) 20001  Zip Code (Plus 4) 17055	- 5 мо	18 DAY	2018  YEAR  2018	\$ 300.
EXELON PAC  Mailing Address 101 CONSTITUTE  City WASHINGTON  Full Name of Contributing Committed BIKE PAC  Mailing Address PO BOX 564  City MECHANICSBURG  Full Name of Contributing Committed PAA PAC	State DC  State TST. PO BOX 2955	Zip Code (Plus 4) 20001  Zip Code (Plus 4) 17055	мо - 5	18 DAY DAY	2018  YEAR  2018	\$ 300.

							PAGE	/
Full Name of C	ontributing Committee							
HIGHMARK PA	AC .			МО	DAY	YEAR		
Mailing Addres	1800 CENTER ST.						\$	300.00
City CAMP I	HTII	State	Zip Code (Plus 4)	5	18	2018		
CAMP	HILL	PA	17089					
	ontributing Committee			мо	DAY	YEAR		
FIRST ENERGY	Y PAC							
Mailing Addres	76 S. MAIN ST.						\$	300.00
City AKRON	N	State	Zip Code (Plus 4)	5	18	2018		
		ОН	44308					
Full Name of C	contributing Committee			МО	DAY	YEAR		
Mailing Addres	2301 MARKET ST.						\$	500.00
City PHTLA	DELPHIA	State	Zip Code (Plus 4)	5	18	2018		
City PHILAL								
PHILAL		PA	19103					
THICAL	ontributing Committee	PA	19103	МО	DAY	YEAR		
Full Name of C	Contributing Committee	PA	19103		DAY	YEAR	\$	300.00
Full Name of C UGI UTILITIES Mailing Addres	Sontributing Committee S PAC P.O. BOX 12677	PA	19103   Zip Code (Plus 4)	<b>MO</b> 5	<b>DAY</b> 18	<b>YEAR</b> 2018	\$	300.00
Full Name of C UGI UTILITIES Mailing Addres	Sontributing Committee S PAC P.O. BOX 12677						\$	300.00
Full Name of C UGI UTILITIES Mailing Addres City READI	Sontributing Committee S PAC P.O. BOX 12677	State PA	Zip Code (Plus 4)				\$	300.00
Full Name of C UGI UTILITIES Mailing Addres City READI	Contributing Committee S PAC S P.O. BOX 12677 NG Contributing Committee SURSE ANESTHETISTS PA	State PA	Zip Code (Plus 4)	5	18	2018	\$	300.00
Full Name of C UGI UTILITIES  Mailing Addres  City READI  Full Name of C PA ASSN OF N  Mailing Addres	Sontributing Committee S PAC S P.O. BOX 12677 NG Contributing Committee BURSE ANESTHETISTS PA 401 N. SECOND ST.	State PA	Zip Code (Plus 4)	5	18	2018		
Full Name of C UGI UTILITIES  Mailing Addres  City READI  Full Name of C PA ASSN OF N  Mailing Addres	contributing Committee S PAC SS P.O. BOX 12677 NG Contributing Committee UURSE ANESTHETISTS PA	State PA	<b>Zip Code (Plus 4)</b> 19612	мо	18 <b>DAY</b>	2018 YEAR		
Full Name of C UGI UTILITIES  Mailing Addres  City READI  Full Name of C PA ASSN OF N  Mailing Addres  City HARRI	contributing Committee S PAC SS P.O. BOX 12677 NG Contributing Committee BURSE ANESTHETISTS PA SS 401 N. SECOND ST. SBURG Contributing Committee	State PA  CC	Zip Code (Plus 4) 19612  Zip Code (Plus 4)	мо	18 <b>DAY</b>	2018 YEAR		
Full Name of C UGI UTILITIES  Mailing Addres  City READII  Full Name of C PA ASSN OF N  Mailing Addres  City HARRI:	contributing Committee S PAC S P.O. BOX 12677  NG Contributing Committee BURSE ANESTHETISTS PA S 401 N. SECOND ST. SBURG Contributing Committee C. PAC	State PA  CC	Zip Code (Plus 4) 19612  Zip Code (Plus 4)	5 <b>MO</b> 5	18 DAY	2018  YEAR  2018		
Full Name of C UGI UTILITIES  Mailing Addres  City READI  Full Name of C PA ASSN OF N  Mailing Addres  City HARRI  Full Name of C CRESCI ASSO  Mailing Addres	contributing Committee S PAC S P.O. BOX 12677 NG Contributing Committee URSE ANESTHETISTS PA S 401 N. SECOND ST. SBURG Contributing Committee C. PAC	State PA  CC	Zip Code (Plus 4) 19612  Zip Code (Plus 4)	5 <b>MO</b> 5	18 DAY	2018  YEAR  2018	\$	300.00

						PAGE	0
Full Name of Contributing Committee			мо	DAY	YEAR		
GENESIS HEALTHCARE - PAC			МО	DAI	ILAK		
Mailing Address 101 STATE ST.						\$	250.00
City KENNETT SQUARE	State	Zip Code (Plus 4)	5	18	2018		
	PA	19348					
Full Name of Contributing Committee			мо	DAY	YEAR		
GENESIS HEALTHCARE - PAC			МО	DAT	TEAR		
Mailing Address 101 STATE ST.						\$	300.00
City KENNETT SQUARE	State	Zip Code (Plus 4)	5	17	2018		
	PA	19348					
Full Name of Contributing Committee PENNSYLVANIA HEALTHCARE ASSOC.	PAC 2		мо	DAY	YEAR		
Mailing Address 315 N. 2ND ST.				10	2010	\$	500.00
City HARRISBURG	State	Zip Code (Plus 4)	5	18	2018		
CITY HARRISBURG							
, HAKKISBURG	PA	17107					
Full Name of Contributing Committee VERIZON COMM. INC.	PA	17107	МО	DAY	YEAR		
Full Name of Contributing Committee		17107	МО	DAY	YEAR	\$	300.00
Full Name of Contributing Committee  VERIZON COMM. INC.		17107  Zip Code (Plus 4)	<b>MO</b> 5	<b>DAY</b> 18	<b>YEAR</b> 2018	\$	300.00
Full Name of Contributing Committee  VERIZON COMM. INC.  Mailing Address 417 WALNUT ST. 13	ST FLOOR					\$	300.00
Full Name of Contributing Committee  VERIZON COMM. INC.  Mailing Address 417 WALNUT ST. 13	ST FLOOR State	Zip Code (Plus 4)				\$	300.00
Full Name of Contributing Committee  VERIZON COMM. INC.  Mailing Address 417 WALNUT ST. 13  City HARRISBURG  Full Name of Contributing Committee	ST FLOOR  State PA	Zip Code (Plus 4)	5	18 <b>DAY</b>	2018 YEAR	\$	300.00
Full Name of Contributing Committee  VERIZON COMM. INC.  Mailing Address 417 WALNUT ST. 12  City HARRISBURG  Full Name of Contributing Committee  OUTDOOR ADV. PAC	ST FLOOR  State PA	Zip Code (Plus 4)	5	18	2018		
Full Name of Contributing Committee  VERIZON COMM. INC.  Mailing Address 417 WALNUT ST. 12  City HARRISBURG  Full Name of Contributing Committee  OUTDOOR ADV. PAC  Mailing Address 200 N. THIRD ST. 5	ST FLOOR  State PA  SUITE 1500	<b>Zip Code (Plus 4)</b> 17101	5	18 <b>DAY</b>	2018 YEAR		
Full Name of Contributing Committee  VERIZON COMM. INC.  Mailing Address 417 WALNUT ST. 12  City HARRISBURG  Full Name of Contributing Committee  OUTDOOR ADV. PAC  Mailing Address 200 N. THIRD ST. 5	ST FLOOR  State PA  SUITE 1500  State	Zip Code (Plus 4) 17101  Zip Code (Plus 4)	5 <b>MO</b> 5	18 DAY	2018  YEAR  2018		
Full Name of Contributing Committee VERIZON COMM. INC.  Mailing Address 417 WALNUT ST. 12  City HARRISBURG  Full Name of Contributing Committee OUTDOOR ADV. PAC  Mailing Address 200 N. THIRD ST. 5	ST FLOOR  State PA  SUITE 1500  State PA	Zip Code (Plus 4) 17101  Zip Code (Plus 4)	5	18 <b>DAY</b>	2018 YEAR		
Full Name of Contributing Committee  VERIZON COMM. INC.  Mailing Address 417 WALNUT ST. 12  City HARRISBURG  Full Name of Contributing Committee  OUTDOOR ADV. PAC  Mailing Address 200 N. THIRD ST. 55  City HARRISBURG	ST FLOOR  State PA  SUITE 1500  State PA  RS PAC	Zip Code (Plus 4) 17101  Zip Code (Plus 4)	5 <b>MO</b>	18 DAY DAY	2018  YEAR  2018		
Full Name of Contributing Committee  VERIZON COMM. INC.  Mailing Address 417 WALNUT ST. 12  City HARRISBURG  Full Name of Contributing Committee  OUTDOOR ADV. PAC  Mailing Address 200 N. THIRD ST. 5  City HARRISBURG  Full Name of Contributing Committee  PA COALITION OF NURSE PRACTIONER	ST FLOOR  State PA  SUITE 1500  State PA  RS PAC	Zip Code (Plus 4) 17101  Zip Code (Plus 4)	5 <b>MO</b> 5	18 DAY	2018  YEAR  2018	\$	300.00

Full Name of Contributing Committee  Z PAC PA SOCIETY OF ANESTHESIOLOG	GIST		МО	DAY	YEAR	
Mailing Address 50 SO PROVIDENCE						<b>\$</b> 300.00
City MEDIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19063	5	18	2018	
<b>Full Name of Contributing Committee</b> PAW PAC			МО	DAY	YEAR	
Mailing Address 800 W. HERSHEY PAGE  City HERSHEY	CK DR.  State PA	<b>Zip Code (Plus 4)</b> 17033	5	18	2018	\$ 500.00
Full Name of Contributing Committee PPL PEOPLE FOR GOOD GOV'T			мо	DAY	YEAR	
Mailing Address 2 NO. 9TH ST.  City ALLENTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18101	5	18	2018	\$ 300.00
Mailing Address 2 NO. 9TH ST.			5	18	2018 YEAR	\$ 300.00
Mailing Address 2 NO. 9TH ST.  City ALLENTOWN  Full Name of Contributing Committee	PA					\$ 300.00 \$ 300.00

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

**PAGE TOTAL** 8,650.00

#### **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			Rep	orting Pe	riod			
EMRICK JOE COMMITTEE TO ELECT C, CARDELLO	O TREASURER JOAN	NN	Fron	n:	<u>5/1/2</u>	018 <b>To</b>	g <b>To</b> : 6/4/2018	
				D	ATE		AMOUNT	
Full Name of Contributor  J M ULIANA & DSSOC. LLC				МО	DAY	YEAR		
Mailing 2571 BOGLYOS CIRC	LE B20						\$ 300.00	
City BETHLEHEM	State	Zip Code (Plus	s 4)	5	18	2018		
	PA	18020						
Employer Name	1			Occupat	tion L	OBBYIS	Т	
Employer Mailing Address/Principal Plac Business	ce of	City			State		Zip Code (Plus 4)	
Full Name of Contributor				мо	DAY	YEAR		
GUY SALTON								
Mailing Address 3051 GREEN POND R	D.						\$ 300.00	
Mailing 3051 CDEEN DOND B	D. State	Zip Code (Plus	s 4)	5	18	2018	\$ 300.00	
Mailing 3051 GREEN POND R		Zip Code (Plus	s 4)	5	18	2018	\$ 300.00	
Mailing 3051 GREEN POND R	State PA		s 4)	5 Occupat	tion	2018 PRES.	\$ 300.00	
Mailing 3051 GREEN POND R  City EASTON	State PA ORIAL SHRINE		s 4)		tion		\$ 300.00 Zip Code (Plus 4)	
Mailing Address 3051 GREEN POND R  City EASTON  Employer Name NORTHAMPTON MEM  Employer Mailing Address/Principal Place	State PA ORIAL SHRINE	18045	s 4)		tion P			
Mailing Address 3051 GREEN POND R  City EASTON  Employer Name NORTHAMPTON MEM  Employer Mailing Address/Principal Place Business	State PA  ORIAL SHRINE ce of	18045		Occupat	tion P			
Mailing Address 3051 GREEN POND R  City EASTON  Employer Name NORTHAMPTON MEM  Employer Mailing Address/Principal Place	State PA  ORIAL SHRINE ce of	18045		Occupat	tion P		Zip Code (Plus 4)  PAGE TOTAL	

## 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 Ca	ndidate		Repor	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 on	Schedule T Detailed	l Summary Page	Section	4			ı	PAGE TOTAL
zinci. Grana rotal or rait z on	ocilculate 1, Detailet	. Janimary rage,	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 Period		
EMRICK JOE COMMITTEE TO ELECT C/O TREASURER JOANN CARDELLO	From:	<u>5/1/2018</u> <b>To:</b>	6/4/2018
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)	\$	1,220.70
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, 3		\$	1,220.70

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidate		Reporting Period					
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	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 Candidate

EMRICK JOE COMMITTEE TO ELECT C/O TREASURER JOANN CARDELLO

From: 5/1/2018 To: 6/4/2018

					DATE		AMOUNT	
Full Name of Contributor HRCC				мо	DAY	YEAR		
Mailing Address P.O. BOX 11	.787						<b>\$</b> 1,220.70	
City HARRISBURG	State		Zip Code(Plus 4)	5	25	2018		
	PA		17108					
Employer of Contributor	•			Occupat	tion	•	•	
Employer Mailing Address/Principal Place of Business		City	State	Zip 4)	Zip Code(Plus 4)		Description of Contribution  DATA LISTS & Company (1988) POSTCARDS	
Enter Grand Total of Part G Summary Page, Section 3.	on Schedule II,	In-Kind	Contributions Detai	iled		. 5516	PAGE TOTAL 1,220.70	

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate		Reporting Period					
EMRICK JOE COMMITTEE TO ELECT C/O TREASURER JOANN CARDELLO	From	5/1/2018	To:	6/4/2018			

				DATE	AMOUNT		
To Whom Paid OLD TOWN DELI			мо	DAY	YEAR		
Mailing Address 512 N. 3RD ST			5	1	2018	\$	265.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	Description of Expenditure BREAKFAST FUNDRAISER				
To Whom Paid VIVID IMPRESSIONS			МО	DAY	YEAR		
Mailing Address 391A NAZARET	ГН РІКЕ		5	2	2018	\$	169.60
City BETHLEHEM	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18020	Description of Expenditure ENVELOPES				
<b>To Whom Paid</b> USPS			мо	DAY	YEAR		
Mailing Address 9 N. MAIN ST.			5	14	2018	\$	150.00
City NAZARETH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18064	Description of Expenditure STAMPS				
To Whom Paid HRCC	•		МО	DAY	YEAR		
Mailing Address 500 N. 3RD ST.			5	18	2018	\$	247.60
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	Description of Expenditure INVITATIONS				
To Whom Paid HRCC	•		МО	DAY	YEAR		
Mailing Address 500 N. 3RD ST.			6	4	2018	\$	400.00
			Description of Expenditure DONATION				
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	1		oenditure	ı	