#### **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	4030	<u> </u>				port ed B		CANDI	DATE	<b>√</b>	cc	MMITTEE LOBBYIST					
Name of Filing C	committe	e, Candida	ite or Lo	obbyist:		EMF	RICK	, JOE										
Street Address:																		
City:									State:				Zip Code	e:				
TYPE OF REPORT	6TH TUES		1.	2ND FRIDAY PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3. <b>X</b>		AMENDME REPORT?	NT	Yes	<b>√</b> No		l
(place X to the right of	6TH TUES		4.	2ND FRIDA' ELECTION	y pre	-	5.	30 DA ELECT		POST-	6.		TERMINAT REPORT?	TION	Yes	No	)	<b>/</b>
report type)	ANNUAL	. REPORT	7.	<b>Year</b> 2004	_				IG METH			PAPER			$\checkmark$	DISK	TTE	
Name of Office S	L Sought by	· Candidat	:e:			_			DATE C	F ELE	CTION		District Number	Office Code	Par	ty Code	Cour	
				=					МО	DAY	YEA	\R	137	STH	REP	·	48	
REPRESENTATI	VE IN IF	IE GENEK	AL ASS	EMBLY					11		2	2004	<b> </b>	(SEE INS	TRUCTI	ONS FOR	CODES	)
Summary of		s and	МО	DAY	YEAR	Ł			МО	DAY	YEA	AR	FOR OFFICE USE ONLY					
Expenditures	from:			1 1		1	Т	0	5	5	17	2004						
A. Amount Bro	ught Forv	ward From	ı Last R	eport				\$			(65	1.40)						
B. Total Moneta	ary Contr	ibutions A	Ind Rec	eipts (From	Sche	dule	e I)	\$				0.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$			(65	1.40)						
D. Total Expend	ditures (I	From Sche	dule II	[)				\$			50	0.00						
E. Ending Cash	Balance	(Subtract	Line D	From Line (	C)			\$			(1,151	.40)						
F. Value Of In-	Kind Con	tributions	Receive	ed (From So	chedu	le II	I)	\$				0.00						
G. Unpaid Debt	s And Ob	ligations	(From S	chedule IV	)			\$				0.00						
					AFF	·ID/	AVI	T SE	CTION									
PART I - If this is		-	-	_								_						
I swear (or affirm) correct and comple		report, incl	uding the	attached sch	nedule	s file	d on	paper o	or by elect	tronic m	edium, a	are to	the best of	my know	ledge	and bel	ef , tr	ue
Sworn to and subs	cribed befo	ore me this		20							Sig	nature	e of Person	Submitt	ng Rep	oort		
	_	Signatur	·e					-					Printe	ed Name				-
My Commission Ex	cpires							_					Email					_
		МО	D#	AY	YR	_	_			Ar	ea Code		Daytime	Telepho	ne Nu	mber		ᆜ
Part II- If this is	a report	of a cand	idate's	authorized	Comn	nitte	ee, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and beli	ef this	poli	tical	commi	ittee has r	ot viola	ted any	provis	ions of the	act of Ju	ne 3,1	937 (P.I	133	3,
Sworn to and subsc		re me this										s	ignature of	Candida	te			-
	day of —			_ 20				-		-			Printed	Name				-
	:	Signature						-										_
My Commission Exp	ires												Email					
	_	мо	D/	AY	YR	t .		-		Area	Code		Day	rtime Te	lephon	e Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period		
EMRICK, JOE	From:	То:	5/17/2004
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	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	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

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			From: To			o:		
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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 Filling Committee of Candidate			Re <sub>l</sub> Fro					
					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 Candi	me of Filing Committee or Candidate		Reporting Period					
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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					
			Fron	n:		То	То:		
				D	ATE		АМО	DUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address City State Zip Code (Plus 4)							\$	0.00	
City	State	Zip Code (Plu	s 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PAG	<b>GE TOTAL</b> 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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	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	From:	To:	<u>5/17/2004</u>					
L. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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)	<b>\$</b>	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** 

ull Name of Contributor		Reporting Period					
			From:			To:	
				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 Sci Section 2.	nedule II, In-Kir	nd Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTAL
occuon 2.						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate			Re	porting l	Period				
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporti				
EMRICK, JOE	From			То:	<u>5/17/2004</u>
	DATE				AMOUNT
To Whom Paid Committee to Elect Joe Emrick	МО	DAY	YEAR		

Mailing Address 2312 Blue Ja	2312 Blue Jay Drive			30	2004	\$	500.00
<b>City</b> Nazareth	State Zip Code (Plus 4) PA 18064			otion of Exp			
Enter Grand Total of Expendi		<b>.</b>	PAGE TOTAL				

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

\$ 500.00