### **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	20103	370				port ed B		CAI	NDII	DATE		COMN	MITTEE	<b>✓</b>	LOB	BYIST		
Name of Filing C	Committee	e, Candida	ate or Lo	obbyist:		MAF	RTIN	, JIM	СОМ	TO	ELECT	-							
Street Address:	645 l	HAMILTOI	N STRE	ET STE 20	04														
City:	ALLEI	NTOWN							State	e:	PA			Zip Cod	le: 18	101	_		
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRID PRIMARY	AY PRE	-	2.	30 DA		Р	OST-	3.		AMENDM REPORT?		Yes	N	0	<b>/</b>
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRID ELECTION		E-	5. <b>X</b>	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	N	0	<b>\</b>
report type)	ANNUAL	REPORT	7.	<b>Year</b> 201	9				NG ME CHEC					PAPER		<b>\</b>	DISK	ETTE	
Name of Office S	- Sought by	Candidat	e:						DAT	E O	F ELE	CTIC	NC	District Number	Office Code	Pa	rty Cod	Cour	
									МО		DAY	Y	EAR			RE	P	39	
										11		5	2019		(SEE IN	STRUCT	ONS FOR	CODES	)
Summary of		and	МО	DAY	YEAF	2			МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	,	
Expenditures	from:			6 1	1 2	019	Т	0		10	2	21	2019						
A. Amount Bro	ught Forv	vard From	ı Last R	eport				\$				140,	104.09						
B. Total Moneta	ary Contri	ibutions A	And Rec	eipts (Fro	m Sche	edule	e I)	\$				1,	500.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$				141,	604.09						
D. Total Expend	ditures (F	rom Sche	dule II	[)				\$				24,	232.92						
E. Ending Cash	Balance	(Subtract	Line D	From Line	e C)			\$			1	117,	371.17						
F. Value Of In-	Kind Cont	ributions	Receive	ed (From	Schedu	ile II	[)	\$					0.00						
G. Unpaid Debt	s And Ob	ligations	(From S	Schedule 1	(V)			\$					0.00						
					AFF	-ID/	٩VI	T SE	CTIC	N									
PART I - If this is		•	•	_									_		6 mars Jem ar			:	
I swear (or affirm) correct and comple		ерогі, іпсіі	uaing the	attacheu s	cnedule	s me	u on	рарег	ог ву е	electr	onic me	earun	n, are to t	ne best o	г ту кпоч	vieage	and be	iei, tr	ue
Sworn to and subs	cribed befo	ore me this		20									Signature	of Persoi	n Submitt	ing Re	port		
		Signatur	·e	_				- -		•				Print	ted Name	1			_
My Commission Ex	cpires	_								•				Emai	il				_
		мо	D/	ΑY	YR						Are	ea Co	de	Daytim	e Teleph	one Nu	ımber		
Part II- If this is	a report	of a cand	idate's	authorize	d Comr	nitte	e, C	andid	ate sł	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and be	elief this	s polit	tical	comm	ittee h	as no	ot viola	ted a	ny provisi	ions of the	e act of Ju	ıne 3,1	.937 (P.	L. 133	3,
Sworn to and subsc		e me this											Si	ignature o	of Candida	ate			- $ $
	day of							-						Printe	d Name				_
	S	Signature						-											_
My Commission Exp	ires													Emai	il				
	_	МО	D	AY	YF	₹		-			Area	Code	1	Da	ytime To	elepho	ne Num	ber	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
MARTIN, JIM COM TO ELECT	From:	<u>6/11/201</u>	<u>9</u> То:	10/21/2019
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)			\$	1,500.00
TOTAL for the Reporting	) Period	(3)	\$	1,500.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	1,500.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fro	om:		То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	•	•				-		DAGE TOTAL

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

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 Filing Committee o	r Candidate		Rep Fro	oorting P	eriod	To	o:	
			l		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	date		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		
MARTIN, JIM COM TO ELECT			Froi	m:	6/11/2	<u>019</u> <b>To</b>	: 10/21/2019
				D	ATE		AMOUNT
Full Name of Contributor Arthur Wright				мо	DAY	YEAR	
Mailing 2861 Golf Circle							\$ 1,000.00
City Emmaus	<b>State</b> PA	Zip Code (Plus 18049	s 4)	7	26	2019	
Employer Name Vinart Dealerships				Occupat	<b>tion</b>	rincipal	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code (Plus 4)
675 State Ave		Emmaus			PA		18049
Full Name of Contributor							
Sally A Slifer-Ryan				МО	DAY	YEAR	
Sally A Slifer-Ryan  Mailing Address  5540 Daisy Lane							\$ 500.00
Mailing 5540 Daicy Lane	State PA	Zip Code (Plus 18036	s 4)	<b>MO</b> 7	26	2019	\$ 500.00
Mailing 5540 Daisy Lane			s 4)		26		\$ 500.00
Mailing Address 5540 Daisy Lane  City Coopersburg PA 18036	PA		s 4)	7	26	2019	\$ 500.00 Zip Code (Plus 4)
Mailing Address 5540 Daisy Lane  City Coopersburg PA 18036  Employer Name Retired  Employer Mailing Address/Principal Place	PA	18036		7	26	2019	

## 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		Report	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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 Perio	d	
MARTIN, JIM COM TO ELECT	From:	6/11/2019 <b>To:</b>	10/21/2019
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	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)	\$	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** 

Name of Filing Committee or Candid	ate		Reporting	g 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 S	chedule II, In-Kir	nd Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate					Re	porting	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupa	ation			
Employer Mailing Address/Principal Plac Business	e of	City		State		Zi <sub>Į</sub> 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on School Summary Page, Section 3.	edule II, I	n-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

### **SCHEDULE III STATEMENT OF EXPENDITURES**

Name of Filing Committee or Car	ndidate		Reportir	ng Period			
MARTIN, JIM COM TO ELECT			From		<u>1/2019</u>	То:	10/21/2019
				DATE			AMOUNT
<b>To Whom Paid</b> Lehigh Valley Young Republicans	5		МО	DAY	YEAR		
Mailing Address PO Box 4342			6	24	2019	\$	100.00
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18105	1	otion of Exp or Kickball			
<b>To Whom Paid</b> People for Antonio Pineda			мо	DAY	YEAR		
Mailing Address 844 Fourth S	it		8	12	2019	\$	100.00
<b>City</b> Whitehall	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18052		otion of Exp Committee	enditure		
<b>To Whom Paid</b> FOP Golf		·	мо	DAY	YEAR		
Mailing Address PO Box 1387	,		8	15	2019	\$	100.00
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18016	1	otion of Exp			
<b>To Whom Paid</b> Shapiro For Attorney General			МО	DAY	YEAR		
Mailing Address PO Box 2263	5		8	16	2019	\$	250.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19110	<b>Descrip</b> Contrib	otion of Expoution	enditure		
<b>To Whom Paid</b> Muhlenberg College Board of As	sociates		МО	DAY	YEAR		
Mailing Address 2400 Chew S	St		9	20	2019	\$	60.00
	State	Zip Code (Plus 4)	+	otion of Exp			

18104

PΑ

Board of Associates dues

To Whom Paid Minsi Trail Council, BSA  Mailing Address PO Box 20624  City Lehigh Valley  State PA  Zip Code (Plus 4) 18002  Parkland Friends of Scouting Breakfast	100.00 t 9/26/19
City Lehigh Valley  State PA    Description of Expenditure   Parkland Friends of Scouting Breakfast   Parkland Friends	
PA 18002 Parkland Friends of Scouting Breakfast	t 9/26/19
To Whom Paid Lehigh Valley Labor Council  MO DAY YEAR	
Mailing Address 510 W Franklin St 9 20 2019 \$	100.00
City Topton State Zip Code (Plus 4) Description of Expenditure PA 19562 Golf Tournament	
To Whom Paid Citizens for Dennis Nemes  MO DAY YEAR	
Mailing Address   4691 Boxwood Circle   9   20   2019	100.00
City Emmaus  State PA  Zip Code (Plus 4) Description of Expenditure Contribution	
To Whom Paid Judge Peck for Superior Court  MO DAY YEAR	
MO  DAY  YEAR	500.00
Judge Peck for Superior Court  Mo DAY YEAR  Mailing Address 2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2	500.00
Judge Peck for Superior Court  Mo DAY YEAR  Mailing Address PO Box 624  State Zip Code (Plus 4) Description of Expenditure	500.00
Judge Peck for Superior Court  Mo DAY YEAR  Mailing Address PO Box 624  State Zip Code (Plus 4) Description of Expenditure Contribution  To Whom Paid  MO DAY YEAR  MO DAY YEAR	500.00 250.00
Judge Peck for Superior Court  Mo DAY YEAR  Mailing Address PO Box 624  9 20 2019 \$  City Harrisburg State PA 17108  To Whom Paid Bill Sugra Memorial Fund  Mo DAY YEAR  PA 2ip Code (Plus 4) Description of Expenditure Contribution  To Whom Paid Bill Sugra Memorial Fund	
Judge Peck for Superior Court  Mo DAY YEAR  Mailing Address PO Box 624  State PA Zip Code (Plus 4) 17108  To Whom Paid Bill Sugra Memorial Fund  Mo DAY YEAR  Mo DAY YEAR  Mo DAY YEAR  State Contribution  To Whom Paid Bill Sugra Memorial Fund  Mo DAY YEAR  Mo DAY YEAR  State Contribution  To Whom Paid Bill Sugra Memorial Fund  Mo DAY YEAR  Mo DAY YEAR  State City Allentown  State Zip Code (Plus 4) Description of Expenditure	
Judge Peck for Superior Court  Mailing Address PO Box 624  State PA Zip Code (Plus 4) 17108  To Whom Paid Bill Sugra Memorial Fund  Mo DAY YEAR  Mo DAY YEAR  To Whom Paid Supera Memorial Fund  State PA Zip Code (Plus 4) 17108  Mo DAY YEAR  State PA Zip Code (Plus 4) 17108  State PA Zip Code (Plus 4) 18103  Description of Expenditure Sponsor Golf Tournament  To Whom Paid  Mo DAY YEAR  YEAR  PA Description of Expenditure Sponsor Golf Tournament  To Whom Paid	

To Whom Boid							PAC	GE 13	
To Whom Paid The International Freemason Lodges of Allentown				МО	DAY	YEAR			
Mailing Address 634 N 10th St			8	16	2019	\$	100.00		
<b>City</b> Allentowr	1	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18102		<b>Description of Expenditure</b> Ad in Mason Pennsylvania Bulletin				
<b>To Whom Paid</b> James B Martin				мо	DAY	YEAR			
Mailing Address 3845 Hawthorne Dr			10	2	2019	\$	851.16		
<b>City</b> Center Va	alley	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18034	Reimbu	Description of Expenditure  Reimbursement Annual Chief of Police Picnic for food and drinks				
To Whom Paid Committee to Elect Glenn Eckhart			мо	DAY	YEAR				
Mailing Address	Address 511 East Federal St			10	2	2019	\$	250.00	
<b>City</b> Allentown	۱	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18103	Description of Expenditure Contribution					
To Whom Paid EPATEMS				МО	DAY	YEAR			
Mailing Address PO Box 85									
Mailing Address	PO Box 85			10	2	2019	\$	150.00	
Mailing Address  City Orefield	PO Box 85	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18069	Descrip	2 Sponsor/	enditure		150.00	
	PO Box 85			Descrip	tion of Exp	enditure		150.00	
City Orefield  To Whom Paid	PO Box 85  3845 Hawthorne Dr	PA		<b>Descrip</b> Bronze	Sponsor/	<b>penditure</b> Golf Tour			
City Orefield  To Whom Paid  James B Martin	3845 Hawthorne Dr	PA		Descrip Bronze  MO  10  Descrip	Sponsor/ DAY  8	YEAR 2019	nament \$	180.14	
City Orefield  To Whom Paid James B Martin  Mailing Address  City Center Va  To Whom Paid	3845 Hawthorne Dr	PA  State PA	18069  Zip Code (Plus 4)	Descrip Bronze  MO  10  Descrip	Sponsor/ DAY  8	YEAR 2019	nament \$	180.14	
City Orefield  To Whom Paid James B Martin  Mailing Address  City Center Va  To Whom Paid	3845 Hawthorne Dr alley	PA  State PA	18069  Zip Code (Plus 4)	MO  10  Descrip Reimbu	DAY  8  stion of Exp  Represent C	YEAR  2019  Denditure  2019  Denditure  Door Prize	nament \$	180.14	

<b>To Whom Paid</b> Pinebrook Family Answers	МО	DAY	YEAR			
Mailing Address 402 N Fulton St	10	8	2019	\$		160.00
City Allentown State Zip Code (Plus 4) PA 18102	<b>Descrip</b> Recepti	cription of Expenditure				
To Whom Paid The Foundation for Enhancing Communities	МО	DAY	YEAR			
Mailing Address PO Box 465	10	8	2019	\$		100.00
City Hummelstown PA Zip Code (Plus 4) 17036		ption of Expenditure on The Conley Cushing's Fund				
To Whom Paid Copeland for DA	МО	DAY	YEAR			
Mailing Address 115 State St. Ste 200	10	8	2019	\$		250.00
City Media State Zip Code (Plus 4) PA 10063	Description of Expenditure Contribution					
<b>To Whom Paid</b> PBS 39	МО	DAY	YEAR			
	10	21	2019	\$		300.00
Mailing Address 839 Sesame St	10	1	tion of Expenditure eighbors Awards Dinner 11/1/19			
Mailing Address 839 Sesame St  City Bethlehem State PA 18015	Descrip			nner 1	1/1/19	
City Bethlehem State Zip Code (Plus 4)	Descrip			nner 1	1/1/19	
City Bethlehem State PA 18015  To Whom Paid	<b>Descrip</b> Good N	eighbors <i>A</i>	wards Di	nner 1:	1/1/19	500.00
City Bethlehem  State   Zip Code (Plus 4)   18015  To Whom Paid   Citizens for Pat Browne	Descrip Good N MO	DAY  21	YEAR 2019		1/1/19	500.00
City Bethlehem  State   Zip Code (Plus 4)   18015  To Whom Paid   Citizens for Pat Browne  Mailing Address   PO Box 90307  City   Allentown   State   Zip Code (Plus 4)	Descrip Good N  MO  10  Descrip	DAY  21	YEAR 2019		1/1/19	500.00
City Bethlehem  State PA 18015  To Whom Paid Citizens for Pat Browne  Mailing Address PO Box 90307  City Allentown  PA 2ip Code (Plus 4) 18015  Zip Code (Plus 4) 18109  To Whom Paid	Descrip Good N  MO  10  Descrip Contrib	DAY  21  tion of Expution	YEAR 2019 penditure		1/1/19	500.00

To Whom Paid Lafayette/ Fulton Bank  Mailing Address 2005 City Line Rd			МО	DAY	YEAR		
			9	30	2019	\$	8.00
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18017	Description of Expenditure Bank Service Charge 6/30/19-9/30/19				
Enter Grand Total of Expe	nditures on Page 1, Re	eport Cover Page, Item D	-			\$	<b>PAGE TOTAL</b> 24,232.92
					·		