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	5				port		CAN	DIE	DATE	ATE COMMITTEE LOBBYIST							
Name of Filing C	ommitte	e, Candida	ate or Lo	obbyist:	!	EMI	RICK	, JOE										_	
Street Address:																			
City:									State:					Zip Code	e:				
TYPE OF REPORT	6TH TUES		1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA PRIMA		P	OST-	3.		AMENDME REPORT?	NT	Yes	√ N	O	
(place X to the right of	6TH TUES		4.	2ND FRIDA ELECTION	Y PRE	≣-	5. X	30 DA		P	OST-	6.		TERMINATION Yes No REPORT?					\
report type)	ANNUAL	REPORT	7.	Year 2004					IG MET					PAPER		\checkmark	DISK	ETTE	
Name of Office S	L Sought by	Candidat	 re:					. ,	DATE			CTION	1	District	Office	Par	ty Code		
									МО		DAY	YEA	\R	Number 137	Code STH	REP	1	48	e
REPRESENTATI	VE IN TH	ie gener	AL ASS	EMBLY					1	11		2	2004	┢──	(SEE INS	TRUCTI	ONS FOR	CODES	5)
Summary of		and	МО	DAY	YEAR	R			МО		DAY	YEA	\R	FOF	OFFIC	E USE	ONLY		
Expenditures	from:			1 1		1	Т	0		10	1	.8	2004						
A. Amount Bro	ught Forv	vard From	ı Last R	eport				\$	-			(1,15	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)								\$				(1,15	1.40)						
D. Total Expend	ditures (F	rom Sche	dule II	I)				\$				1,50	0.00						
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$				(2,651	.40)						
F. Value Of In-	Kind Con	tributions	Receive	ed (From S	chedu	le I	I)	\$					0.00						
G. Unpaid Debt	s And Ob	ligations	(From S	Schedule IV)			\$					0.00		,				
					AFF	ID	AVI	T SE	CTIO	N									
PART I - If this is		-	-	_									_						
I swear (or affirm) correct and comple		report, incl	uding the	attached scl	hedule	s file	d on	paper (or by ele	ectr	onic me	edium, a	are to	the best of	my know	ledge	and bel	ief , tr	ue
Sworn to and subs	cribed befo	ore me this		20						-		Sig	nature	e of Person	Submitti	ng Rep	ort		_
	_	Signatur	·e					-		-				Printe	ed Name				
My Commission Ex	pires							_						Email					
		МО	D/	AY	YR						Are	a Code		Daytime	Telepho	one Nu	mber		ᆜ
Part II- If this is	a report	of a cand	idate's	authorized	Comn	nitte	ee, C	andida	ate sha	ıll s	ign he	re.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and beli	ef this	poli	itical	commi	ittee has	s no	t violat	ed any	provis	ions of the	act of Ju	ne 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before day of	re me this		20									s	ignature of	Candida	te			_
	— uay oi							-						Printed	Name				-
		Signature						-		-									_
My Commission Exp	ires													Email					
	_	МО	D	AY	YR	t .		-		,	Area (Code		Day	time Te	lephon	e Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
EMRICK, JOE	From:	То:	10/18/2004
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	•		
TOTAL for the Reporting	g 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	g 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
		1	
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						
				From: To			ɔ :		
		<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					Reporting Period From: To:				
			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	ame of Filing Committee or Candidate			Reporting Period						
				Fror	n:		To	То:		
					D	ATE		AI	MOUNT	
Full Name of Contributor						DAY	YEAR			
Mailing Address								\$	0.00	
City State Zip Code (Plus 4)										
Employer Name	•				Occupation					
Employer Mailing Address/Principal Place of Business City						State		Zip Cod	e (Plus 4)	
Enter Grand Total of Part C on Sch	edule I, Detailed S	Summary	Page,	Section	on 3.			P \$	AGE TOTAL 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	Candidate		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	MOUNT
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. Detailed	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 1, Betanet	. Jammar y r uge,	500.011				\$	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:	10/18/2004
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)	\$	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 Candidat	:e		Reporting	g Period				
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						\$	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 Candidat	e				Re	porting F	Period				
					From:				То:		
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•		•			Occupa	tion		•		
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					ed				PAGE TOTAL 0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
EMRICK, JOE	From			То:	10/18/2004		
		AMOUNT					
To Whom Paid COMMITTEE TO ELECT JOE EMRICK			МО	DAY	YEAR		
Mailing Address 2312 BLUE JAY DR			7	28	2004	\$	1,500.00
City NAZARETH State Zip Code (Plus 4) PA 18064				Description of Expenditure			
Futor Crand Tatal of Free and itures					PAGE TOTAL		
Enter Grand Total of Expenditures	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	1,500.00