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 8000	634			Rep File	ort ed B		CA	NDI	DATE		COM	AITTEE	V	LUE	90113	•	
Name of Filing C	ommittee, Candid	ate or L	obbyist:	•	NOR	TH/	AMPT(ON C	O DE	EM CO	М	•		•			•	
Street Address:	2117 MONTG	OMERY	ST															
City:	BETHLEHEM							State	e:	PA			Zip Co	de: 18	8017			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2	2.	30 DA		P	POST-	3.		AMENDN REPORT	MENDMENT Yes EPORT?				
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	<u>-</u> 5	5.	30 DA		P	POST-	6. X		TERMINATION REPORT?		Yes		No	\
report type)	ANNUAL REPORT	7.	Year 2004				FILIN	IG ME					PAPER		\	DIS	KETTI	E
Name of Office S	- Sought by Candida	te:						DAT	ΈΟ	F ELE	CTIO	N	District Number	Office Code	Pa	arty Co	de Co Co	unty de
								МО		DAY	YE	AR		•	•			
									11		2	2004		(SEE IN	ISTRUCT	IONS F	OR COD	ES)
	Receipts and	мо	DAY	YEAR	2			МО		DAY	YE	EAR	FC	R OFFI	CE US	E ONI	Υ.	
Expenditures	from:		1 1		1	Т	0		11	7	22	2004						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$	•		•	7,3	308.35						
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule	I)	\$				5,1	186.01						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				12,4	194.36						
D. Total Expend	ditures (From Sch	edule II	I)				\$				3	37.78						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$				12,1	56.58						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$					0.00			•			
							T SE											
I swear (or affirm)	that this report, inc	-	_									_		f my kno	wledge	e and b	elief ,	true <u>.</u>
correct and comple	ete. cribed before me this	ī										·:	- f D	Cbi	D			
	day of		_ 20				-					ngnature	of Perso	n Submii	ting Ke	ерогі		
	Signatu	re					-						Prin	ted Nam	е			
My Commission Ex	rpires						_		•				Ema	il				
	МО	D	AY	YR						Area Code Daytime Telephone Number								_
	a report of a can					•				_					_			
No 320) as amende		ny knowl	edge and bel	ief this	polit	ical	comm	ittee i	nas n	ot viola	ed an	y provis	ions of th	e act of J	June 3,	1937 (P.L. 13	333,
SWOFN TO AND SUBSC	ribed before me this day of		20									S	ignature (of Candid	late			
			_				-						Printe	d Name				
My Commission Exp	Signature ires												Ema	il				-
	МО	D	AY	YR			-			Area	Code		D	aytime 1	Telepho	ne Nu	mber	$-\mid$

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

· -			
Name of Filing Committee or Candidate	Reporting Period		
NORTHAMPTON CO DEM COM	From:	To:	11/22/2004
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	Period (1)	\$	85.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)			
Contributions Received From Political Committees (Part A)		\$	100.00
All Other Contributions (Part B)		\$	0.00
TOTAL for the Reporting	Period (2)	\$	100.00
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)		\$	5,000.00
TOTAL for the Reporting	Period (3)	\$	5,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reporting	Period (4)	\$	1.01
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 Page		\$	5,186.01

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	Reporting Period		
NORTHAMPTON CO DEM COM	From:	То:	11/22/2004
	DATE		AMOUNT

Full Name of Contributing Committe FRIENDS OF BARBARA HAFER	МО	DAY	YEAR			
Mailing Address P O BOX 304						\$ 100.00
City HARRISBURG	State	Zip Code (Plus 4)	10	20	2004	
	PA	17108				

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

PAGE TOTAL \$ 100.00

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 of Candidate				Reporting Period From: To:				
					DATE		AN	40UNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$ \$	0.00
City	State	Zip Code (Plus 4)	1					

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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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.

Name of Filing Committee or Candidate

(Exclude contributions from political committees reported in Part C.)

Reporting Period

NORTHAMPTON CO DEM COM			Fron	m:		To	:	11/22/2004
				D/	ATE		AN	MOUNT
Full Name of Contributor JOHN A LEVIN				мо	DAY	YEAR		
Mailing 1 ROCKAFELLER PLAZ Address	ZA 25TH FLOOR						\$	5,000.00
City NEW YORK	State NY	Zip Code (Plus 10022	s 4)	10	29	2004		
Employer Name JOHN A. LEVIN & CO.	INC			Occupat	ion I	NVESTM	1ENT	
Employer Mailing Address/Principal Plac Business	e of	City		•	State		Zip Cod	e (Plus 4)
ONE ROCKAFELLER PLAZA 25TH FLOOF	₹	NY			NY		10022	
Enter Grand Total of Part C on Sche	dule I, Detailed So	ummary Page,	Section	on 3.				AGE TOTAL 5,000.00

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 Candida	ite		Report	ing Perio	d			
NORTHAMPTON CO DEM COM			From:			To:		11/22/2004
				D	ATE			AMOUNT
Full Name KNBT				мо	DAY	YEAR		
Mailing Address PO BOX 25012							\$	1.01
City LEHIGH VALLEY	State PA	Zip Code (1800250		10	31	2004	1	
Receipt Description INTEREST (ON BANK ACC'T							
Enter Grand Total of Part E on Sch	edule I, Detailed	l Summary Page,	Section	4.				PAGE TOTAL
	,						\$	1.01

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		
NORTHAMPTON CO DEM COM	From:	To:	11/22/2004
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 Candid	ate		Reporting	g Period			
			From:			To:	
				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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name 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				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	andidate		Reporti	ng Period			
NORTHAMPTON CO DEM COM			From			То:	11/22/2004
				AMOUNT			
To Whom Paid JOE LONG			мо	DAY	YEAR		
Mailing Address 2117 MOTGOMERY ST			11	17	2004	\$	137.78
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017		otion of Exp			
To Whom Paid USWA LOCAL 2599			МО	DAY	YEAR		
Mailing Address 53 E. LEHIG	GH ST		11	18	2004	\$	200.00
				otion of Exp	enditure		

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

PAGE TOTAL

337.78