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 2003 | 3296 | | | | port ed B | | CANDI | ANDIDATE COMMITTEE V LOBBYIST | | | | | | BYIST | | |
|--|---------------------------------|-------------|------------------------|---------|--------|--------------|----------------|-------------|-------------------------------|--------|------------|--------------------|----------------|----------|-----------|-----------|----|
| Name of Filing C | Committee, Candid | late or L | obbyist: | | EMI | RICK | JOE | СОММ ТО |) ELEC | T C/0 | JOAN | N CARD | ELLO | | | | _ |
| Street Address: | P.O. BOX 121 | Ĺ | | | | | | | | | | | | | | | |
| City: | TANNERSVILI | _E | | | | | | State: | PA | | | Zip Cod | le: 18 | 3372 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRIMARY | Y PRE | - | 2. | 30 DA PRIMA | | POST- | 3. | | AMENDM REPORT? | | Yes | No | ` | |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY ELECTION | y pre | ≣- | 5. | 30 DA ELECT | | OST- 6. | | | TERMINA REPORT? | | Yes | No | • | |
| report type) | ANNUAL REPORT | 7. X | Year 2020 | | | | | NG METHO | | | | PAPER | | \ | DISKE | TTE | |
| Name of Office S | Sought by Candida | ite: | • | | | | | DATE 0 | F ELE | CTIO | N | District Number | Office Code | Par | ty Code | Count | y |
| | - , | | | | | | | МО | DAY | YE | AR | rumber | Toode | REP | | Couc | |
| | | | | | | | | 11 | | 3 | 2020 | | (SEE IN | STRUCTIO | ONS FOR C | ODES) | _ |
| • | Receipts and | МО | DAY | YEAR | ł | | | МО | DAY | YI | EAR | FO | R OFFI | CE USE | ONLY | | |
| Expenditures | s trom: | | 11 24 | 2 | 020 | T | <u> </u> | 12 | | 31 | 2020 | | | | | | |
| A. Amount Bro | ught Forward Fro | m Last R | eport | | | | \$ | | | 134,0 |)55.88 | | | | | | |
| B. Total Monet | ary Contributions | And Rec | eipts (From | Sche | dule | e I) | \$ | | | 7 | 750.00 | | | | | | |
| C. Total Funds | Available (Sum O | f Lines A | and B) | | | | \$ | | | 134,8 | 305.88 | | | | | | |
| D. Total Expen | ditures (From Sch | edule II | I) | | | | \$ | | | | 0.00 | | | | | | |
| E. Ending Cash | Balance (Subtrac | t Line D | From Line C | C) | | | \$ | | | 134,8 | 05.88 | | | | | | |
| F. Value Of In- | Kind Contribution | s Receiv | ed (From So | chedu | le I | Ι) | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Obligations | (From S | Schedule IV |) | | | \$ | | | | 0.00 | | | • | | | |
| | | | | AFF | ID | AVI | T SE | CTION | | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, trea | surer sign h | nere. | If th | his is | a Can | ndidate re | eport, o | andi | date sig | ın here. | | | | | ı |
| I swear (or affirm) correct and comple |) that this report, inc ete. | luding the | e attached sch | nedules | s file | ed on | paper (| or by elect | ronic m | edium | , are to t | he best o | f my kno | wledge | and belie | ef , true | Э, |
| Sworn to and subs | cribed before me thi day of | s | 20 | | | | | | | S | Signature | of Perso | n Submit | ting Rep | ort | | • |
| | Signatu | ıre | | | | | - | | | | | Prin | ted Name | 9 | | | - |
| My Commission Ex | cpires | | | | | | _ | | | | | Ema | il | | | | : |
| | МО | D | AY | YR | | | | | Arc | ea Cod | le | Daytim | e Teleph | one Nu | mber | | |
| Part II- If this is | a report of a can | didate's | authorized | Comn | nitte | ee, C | andida | ate shall | sign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of red. | ny knowl | edge and belie | ef this | poli | itical | commi | ittee has n | ot viola | ted an | y provis | ions of the | e act of J | une 3,1 | 937 (P.L. | 1333, | |
| Sworn to and subso | ribed before me this | | | | | | | | | | s | ignature o | of Candid | ate | | | ۱. |
| | day of | | | | | | - | | | | | Printe | d Name | | | | - |
| | Signature | | | | | | - | | | | | F | i | | | | - |
| My Commission Exp | oires | | | | | | | | | | | Ema | | | | | |
| | МО | D | AY | YR | 1 | | • | | Area | Code | | Da | aytime T | elephon | e Numbe | er | 1 |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| | 1 | | | |
|--|-----------|-----------|---------------|------------|
| Name of Filing Committee or Candidate | Reporting | g Period | | |
| EMRICK JOE COMM TO ELECT C/O JOANN CARDELLO | From: | 11/24/202 | <u>20</u> To: | 12/31/2020 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reporting | J 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) | | | \$ | 750.00 |
| All Other Contributions (Part D) | | | \$ | 0.00 |
| TOTAL for the Reporting | J Period | (3) | \$ | 750.00 |
| 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 | | | \$ | 750.00 |

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

| Name of Filing Committee or Candidate | | | Reporti | ng Period | | | |
|---------------------------------------|-------------|-------------------|---------|-----------|------|----|--------|
| | | | From: | | То | : | |
| | | L | | DATE | | | AMOUNT |
| Full Name of Contributin | g Committee | | МС | 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

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 | e or Candidate | | Rep | oorting P | eriod | | | |
|--------------------------|----------------|-------------------|-----|-----------|-------|------|------------|--------|
| | | | Fro | m: | | To |) : | |
| | | | | | DATE | | A | 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 Candidate | Reporting P | Period | | |
|---|-------------|------------|-----|------------|
| EMRICK JOE COMM TO ELECT C/O JOANN CARDELLO | From: | 11/24/2020 | То: | 12/31/2020 |

DATE AMOUNT

| Full Name of Contributing Committee WIND CREEK BETHLEHEM LLC | | | | DAY | YEAR | |
|--|--------------------|-----------------------------------|----|-----|------|------------------|
| Mailing Address 77 WIND CREEK BLVD | | | | | | \$ 750.00 |
| City BETHLEHEM | State PA | Zip Code (Plus 4) 18015 | 12 | 4 | 2020 | |

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

PAGE TOTAL \$ 750.00

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 | | | | riod | Reporting Period | | | | | |
|---|--------------------------------------|----------------|---------|---------|-------|------------------|------------|-------------|--|--|--|
| | | | Fron | n: | | To |) : | | | | |
| | | | | D | ATE | | ı | AMOUNT | | | |
| Full Name of Contributor | | | | МО | DAY | YEAR | | | | | |
| Mailing Address | | | | | | | \$ | 0.00 | | | |
| City | State | Zip Code (Plus | s 4) | | | | | | | | |
| Employer Name | | | | Occupat | tion | | | | | | |
| Employer Mailing Address/Principal Plac Business | e of | City | | | State | | Zip Co | de (Plus 4) | | | |
| Enter Grand Total of Part C on Sche | dule I, Detailed Su | ımmary Page, | Section | on 3. | | | l | PAGE 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 Perio | od | |
|--|-----------------|------------------------------|------------|
| EMRICK JOE COMM TO ELECT C/O JOANN CARDELLO | From: | <u>11/24/2020</u> To: | 12/31/2020 |
| 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, 1 | | \$ | 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: | | | 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 Sch | edule II, In-Kin | d Contributions Deta | iled Sum | mary Pac | ie, F | | PAGE TOTAL |
| Section 2. | , | | | , | | \$ | 0.00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | 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 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or (| Candidate | | Reporti | | | | |
|-------------------------------|------------------------|-------------------------|---------|-------------|-----------|----|------------|
| | From | | | То: | | | |
| | | | | DATE | | | AMOUNT |
| To Whom Paid | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) | Descri | ption of Ex | penditure | | |
| - | | | | | | | PAGE TOTAL |
| Enter Grand Total of Expen | laitures on Page 1, Re | port Cover Page, Item D |). | | | \$ | 0.00 |