

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

<b>Filer Identification Number :</b>		20130228		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> FRIENDS OF PETER SCHWEYER												
<b>Street Address:</b> PO BOX 4364												
<b>City:</b> ALLENTOWN						<b>State:</b> PA			<b>Zip Code:</b> 18105			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2021	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	DEM			
						11	2	2021	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		5	4	2021		6	7	2021				
<b>A. Amount Brought Forward From Last Report</b>						\$ 24,294.12						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 2,000.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 26,294.12						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 6,458.11						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 19,836.01						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 0.00						

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF PETER SCHWEYER	From: <u>5/4/2021</u> To: <u>6/7/2021</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 2,000.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 2,000.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 2,000.00
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# 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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF PETER SCHWEYER	<b>Reporting Period</b>  <b>From:</b> <u>5/4/2021</u> <b>To:</b> <u>6/7/2021</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
K&L GATES, LLP				5	13	2021	
Mailing Address 210 6TH AVE K&L GATES CENTER							
City PITTSBURGH	State PA	Zip Code (Plus 4) 152222602					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PPL PEOPLE FOR GOOD GOVERNMENT STATE ACCOUNT				5	13	2021	
Mailing Address 2 N 9TH ST							
City ALLENTOWN	State PA	Zip Code (Plus 4) 181011170					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PSCOA PAC				5	13	2021	
Mailing Address 2421 NORTH FRONT ST							
City HARRISBURG	State PA	Zip Code (Plus 4) 17110					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
Z PAC PENNSYLVANIA SOCIETY OF ANESTHESIOLOGIST PAC				5	13	2021	
Mailing Address 1400 NORTH PROVIDENCE ROAD BUILDING 2, SUITE 240							
City MEDIA	State PA	Zip Code (Plus 4) 19063					

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

<b>PAGE TOTAL</b>
\$ 2,000.00

**PART D**  
**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	Reporting Period
	From: To:

				DATE			AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00	
Mailing Address								
City	State	Zip Code (Plus 4)						
Employer Name				Occupation				
Employer Mailing Address/Principal Place of Business			City		State		Zip Code (Plus 4)	

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

<b>PAGE TOTAL</b>	
\$	0.00

## PART E 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	Reporting Period
	<div style="display: flex; justify-content: space-between;"> <span>From:</span> <span>To:</span> </div>

				DATE	AMOUNT		
Full Name				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF PETER SCHWEYER		From: <u>5/4/2021</u> To: <u>6/7/2021</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	0.00



**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

**SCHEDULE II**  
**PART G**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OVER \$250.00**

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF PETER SCHWEYER	From <u>5/4/2021</u> To: <u>6/7/2021</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
FRIENDS OF DARYL HENDRICKS				
<b>Mailing Address</b> 1149 NORTH 14TH STREET	5	5	2021	\$ 250.00
<b>City</b> ALLENTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18102	<b>Description of Expenditure</b> CONTRIBUTION	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
LIBERTY BELL BEVERAGE				
<b>Mailing Address</b> 718 N 13TH STREET	5	12	2021	\$ 44.38
<b>City</b> ALLENTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18102	<b>Description of Expenditure</b> CAMPAIGN EXPENSE -BEER	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
FRIENDS OF MARTY FLYNN				
<b>Mailing Address</b> 1633 DOROTHY ST. REAR	5	13	2021	\$ 1,000.00
<b>City</b> SCRANTON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18504	<b>Description of Expenditure</b> CONTRIBUTION	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
KC STRATEGIES, LLC				
<b>Mailing Address</b> 100 PINE STREET 4TH FLOOR SUITE 400	5	13	2021	\$ 3,554.30
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	<b>Description of Expenditure</b> EVENT CONSULTING AND REIMBURSEMENT	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
MAILCHIMP.COM				
<b>Mailing Address</b> 675 PONCE DE LEON AVE NE SUITE 5000	5	13	2021	\$ 38.15
<b>City</b> ATLANTA	<b>State</b> GA	<b>Zip Code (Plus 4)</b> 30308	<b>Description of Expenditure</b> MONTHLY SUBSCRIPTION SERVICE	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
UNION AND FINCH				
<b>Mailing Address</b> 1528 W UNION ST.	5	13	2021	\$ 26.00
<b>City</b> ALLENTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18102	<b>Description of Expenditure</b> CAMPAIGN EXPENSE - ELECTION DAY EXPENSE	

To Whom Paid			MO	DAY	YEAR	\$ 175.20
MCCALL COLLECTIVE BREWING COMPANY						
Mailing Address 102 E SUSQUEHANNA STREET			5	17	2021	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18103	Description of Expenditure MAYOR'S RALLY-EVENT TICKET			

To Whom Paid			MO	DAY	YEAR	\$ 440.00
MARY ANN DONUT KITCHEN						
Mailing Address 1621 W LIBERTY ST			5	18	2021	
City ALLENTOWN	State PA	Zip Code (Plus 4) 181022000	Description of Expenditure ELECTION DAY EXPENSE - DONUTS			

To Whom Paid			MO	DAY	YEAR	\$ 95.35
U-HAUL MOVING & STORAGE						
Mailing Address 1428 E LIVINGSTON STREET			5	23	2021	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18103	Description of Expenditure CAMPAIGN EXPENSE - STORAGE UNIT			

To Whom Paid			MO	DAY	YEAR	\$ 259.00
ALLENTOWN SCHOOL DISTRICT FOUNDATION						
Mailing Address 31 S. PENN ST. PO BOX 328			5	26	2021	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18104	Description of Expenditure ANNUAL SCHLARSHIP			

To Whom Paid			MO	DAY	YEAR	\$ 350.00
CANARY TOUCHDOWN CLUB						
Mailing Address 7644 BRANDYWINE CR.			5	26	2021	
City TREXLERTOWN	State PA	Zip Code (Plus 4) 18087	Description of Expenditure AD			

To Whom Paid			MO	DAY	YEAR	\$ 27.72
THE MORNING CALL						
Mailing Address 101 NORTH 6TH STREET			5	26	2021	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18105	Description of Expenditure MONTHLY SUBSCRIPTION SERVICE			

To Whom Paid			MO	DAY	YEAR	\$ 100.00
WAHS CLASS OF 2021						
Mailing Address 126 N 17TH STREET			5	26	2021	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18102	Description of Expenditure DONATION			

To Whom Paid			MO	DAY	YEAR	\$ 18.01
STAPLES						
Mailing Address TILGHMAN SQUARE SHOPPING CENTER 4628 BROADWAY			5	28	2021	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18104	Description of Expenditure CAMPAIGN EXPENSE - OFFICE SUPPLIES			

<b>To Whom Paid</b> DAMASCUS			<b>MO</b> 6	<b>DAY</b> 3	<b>YEAR</b> 2021	<b>\$</b> 80.00
<b>Mailing Address</b> 449 N 2ND STREET						
<b>City</b> ALLENTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18102	<b>Description of Expenditure</b> CAMPAIGN EXPENSE - LUNCH MEETING			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> <b>\$</b> 6,458.11

