

Campaign Finance Report

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

Filer Identification Number :		8000634		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: NORTHAMPTON CO DEM COM												
Street Address: PO Box 22256												
City: Lehigh Valley						State: PA			Zip Code: 18002-2256			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2021		FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR	DEM 48			
						11	2	2021	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		6	8	2021		10	18	2021				
A. Amount Brought Forward From Last Report						\$ 12,154.11						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 2,132.15						
C. Total Funds Available (Sum Of Lines A and B)						\$ 14,286.26						
D. Total Expenditures (From Schedule III)						\$ 283.36						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 14,002.90						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 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

Name of Filing Committee or Candidate	Reporting Period
NORTHAMPTON CO DEM COM	From: <u>6/8/2021</u> To: <u>10/18/2021</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 676.65

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)	\$ 755.50
TOTAL for the Reporting Period (2)	\$ 755.50

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)	\$ 700.00
TOTAL for the Reporting Period (3)	\$ 700.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 2,132.15
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	0.00

PART B
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 or Candidate NORTHAMPTON CO DEM COM	Reporting Period From: <u>6/8/2021</u> To: <u>10/18/2021</u>
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DATE	AMOUNT
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Full Name of Contributor			MO	DAY	YEAR	\$7.00
Mark Reynolds						
Mailing Address			6	23	2021	
14 Aztec St						
City	San Francisco	State				
		CA				
		Zip Code (Plus 4)				
		94110				

Full Name of Contributor				MO	DAY	YEAR	\$ 16.00
Mark Reynolds							
Mailing Address				6	16	2021	
14 Aztec St		State	Zip Code (Plus 4)				
City	San Francisco	CA	94110				

Full Name of Contributor				MO	DAY	YEAR	\$ 14.00
Mark Reynolds							
Mailing Address 14 Aztec St				6	9	2021	
City	San Francisco	State	Zip Code (Plus 4)				
		CA	94110				

Full Name of Contributor				MO	DAY	YEAR	\$ 62.50
Gretchen Elias							
Mailing Address				6	12	2021	
9 N Park Dr		State	Zip Code (Plus 4)				
City	Montpelier	VT	056022000				

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Thomas Kelly							
Mailing Address 683 Bean Rd				6	30	2021	
City Plainfield	State VT	Zip Code (Plus 4) 05667					

Full Name of Contributor Mark Reynolds			MO	DAY	YEAR	\$ 13.00
Mailing Address 14 Aztec St			7	13	2021	
City San Francisco	State CA	Zip Code (Plus 4) 94110				

Full Name of Contributor Mark Reynolds			MO	DAY	YEAR	\$ 6.00
Mailing Address 14 Aztec St			7	6	2021	
City San Francisco	State CA	Zip Code (Plus 4) 94110				

Full Name of Contributor Mark Reynolds			MO	DAY	YEAR	\$ 7.00
Mailing Address 14 Aztec St			6	30	2021	
City San Francisco	State CA	Zip Code (Plus 4) 94110				

Full Name of Contributor Mark Reynolds			MO	DAY	YEAR	\$ 9.00
Mailing Address 14 Aztec St			8	9	2021	
City San Francisco	State CA	Zip Code (Plus 4) 94110				

Full Name of Contributor Mark Reynolds			MO	DAY	YEAR	\$ 6.00
Mailing Address 14 Aztec St			7	27	2021	
City San Francisco	State CA	Zip Code (Plus 4) 94110				

Full Name of Contributor Mark Reynolds			MO	DAY	YEAR	\$ 11.00
Mailing Address 14 Aztec St			7	21	2021	
City San Francisco	State CA	Zip Code (Plus 4) 94110				

Full Name of Contributor Mark Reynolds			MO	DAY	YEAR	\$ 9.00
Mailing Address 14 Aztec St			9	24	2021	
City San Francisco	State CA	Zip Code (Plus 4) 94110				

Full Name of Contributor Mark Reynolds			MO	DAY	YEAR	\$ 9.00
Mailing Address 14 Aztec St			9	21	2021	
City San Francisco	State CA	Zip Code (Plus 4) 94110				

Full Name of Contributor Mark Reynolds			MO	DAY	YEAR	\$ 9.00
Mailing Address 14 Aztec St			9	16	2021	
City San Francisco	State CA	Zip Code (Plus 4) 94110				

Full Name of Contributor Megan Hull			MO	DAY	YEAR	\$ 10.00
Mailing Address 2226 Hall PI NW			10	10	2021	
City Washington	State DC	Zip Code (Plus 4) 20007				

Full Name of Contributor Megan Hull			MO	DAY	YEAR	\$ 250.00
Mailing Address 2226 Hall PI NW			9	18	2021	
City Washington	State DC	Zip Code (Plus 4) 20007				

Full Name of Contributor Gail Preuninger			MO	DAY	YEAR	\$ 200.00
Mailing Address 4004 Hummingbird Lane			9	22	2021	
City Bethlehem	State PA	Zip Code (Plus 4) 18020				

Full Name of Contributor			MO	DAY	YEAR	\$10.00
Mark Reynolds						
Mailing Address			10	10	2021	
14 Aztec St						
City	San Francisco	State				
		CA				
		Zip Code (Plus 4)				
		94110				

Full Name of Contributor			MO	DAY	YEAR	\$ 7.00
Mark Reynolds						
Mailing Address 14 Aztec St			10	7	2021	
City San Francisco	State CA	Zip Code (Plus 4) 94110				

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

PAGE TOTAL
\$ 755.50

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:	To:

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

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

PAGE TOTAL
\$ 0.00

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 NORTHAMPTON CO DEM COM	Reporting Period From: <u>6/8/2021</u> To: <u>10/18/2021</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Thomas McKnight							
Mailing Address 4201 Lee Hwy Apt 402				9	15	2021	\$ 700.00
City Arlington	State VA	Zip Code (Plus 4) 22207					
Employer Name Not Employed				Occupation Not Employed			
Employer Mailing Address/Principal Place of Business 4201 Lee Hwy Apt 402			City Arlington	State VA	Zip Code (Plus 4) 22207		

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

PAGE TOTAL
\$ 700.00

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

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

PAGE TOTAL
\$ 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	
NORTHAMPTON CO DEM COM		From: <u>6/8/2021</u> To: <u>10/18/2021</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
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: To:
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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.						PAGE TOTAL \$ 0.00

5/12/2024 4:55:05 AM

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
NORTHAMPTON CO DEM COM	From <u>6/8/2021</u> To: <u>10/18/2021</u>

DATE				AMOUNT		
To Whom Paid ActBlue			MO	DAY	YEAR	\$ 4.01
Mailing Address PO Box 441146			6	9	2021	
City Somerville	State MA	Zip Code (Plus 4) 2144	Description of Expenditure service fee			
To Whom Paid ActBlue			MO	DAY	YEAR	\$ 19.32
Mailing Address PO Box 441146			7	9	2021	
City Somerville	State MA	Zip Code (Plus 4) 2144	Description of Expenditure service fee			
To Whom Paid Plainfield Farmers Fair Association			MO	DAY	YEAR	\$ 30.00
Mailing Address 1281 Bangor Rd			7	23	2021	
City Nazareth	State PA	Zip Code (Plus 4) 18064	Description of Expenditure exhibit space			
To Whom Paid ActBlue			MO	DAY	YEAR	\$ 1.68
Mailing Address PO Box 441146			8	9	2021	
City Somerville	State MA	Zip Code (Plus 4) 2144	Description of Expenditure service fee			
To Whom Paid Blue Valley Farm Show, Inc.			MO	DAY	YEAR	\$ 160.00
Mailing Address 707 American Bangor Rd			8	14	2021	
City Bangor	State PA	Zip Code (Plus 4) 18013	Description of Expenditure exhibit space			

To Whom Paid Lookout Fire Company			MO	DAY	YEAR	
Mailing Address 123 S Main St			9	3	2021	
City Pen Argyl	State PA	Zip Code (Plus 4) 18072	Description of Expenditure exhibit space			

To Whom Paid ActBlue			MO	DAY	YEAR	
Mailing Address PO Box 441146			9	9	2021	
City Somerville	State MA	Zip Code (Plus 4) 2144	Description of Expenditure service fee			

To Whom Paid ActBlue			MO	DAY	YEAR	
Mailing Address PO Box 441146			10	9	2021	
City Somerville	State MA	Zip Code (Plus 4) 2144	Description of Expenditure service fee			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 283.36

