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 :	ion 8000	634			Repo Filed		<i>ı</i> :	CANDI	DATE		СОМ	MITTEE	✓	LOB	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		NORT	HAI	мртс	DN CO DE		4							
Street Address:	2117 MONTG	OMERY	ST														
City:	BETHLEHEM							State:	PA			Zip Co	de: 18	017			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY					Y F Ary	POST- 3.			AMENDMENT REPORT?		Yes	N	0	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					30 DA ELECT		POST- 6. X			TERMINATION REPORT?		Yes	N	0	\checkmark
report type)	ANNUAL REPORT	7.	Year 2005					IG METHO				PAPER		\checkmark	DISK	ETTE	
Name of Office S	L Sought by Candidat	te:						DATE O	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	Cou	
								мо	DAY	YE	AR					1002	
								11		8	2005	i	(SEE INS	TRUCTI	ONS FOR	CODES	5)
Summary of	Receipts and	мо	DAY	YEAR	Ł			мо	DAY	Y	EAR	FC	OR OFFIC	e use	ONLY		
Expenditures	s from:		1 1		1	тс)	11	2	28	2005						
A. Amount Bro	ught Forward From	n Last R	eport				\$			10,6	599.04						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$				2.20						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			10,7	701.24						
D. Total Expen	ditures (From Sch	edule II	I)				\$			6,7	745.93						
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)			\$			3,9	55.31						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	Schedu	le II)		\$				0.00						
G. Unpaid Deb	ts And Obligations	(From S	Schedule I\	/)			\$		0.00								
				AFF	IDAV	/IT	SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign	here.	If this	is a	a Can	didate re	eport, c	andi	date sig	gn here.					
I swear (or affirm correct and compl) that this report, incl ete.	uding the	attached sc	hedules	s filed o	on pa	aper o	or by elect	ronic me	dium	, are to t	the best o	f my know	ledge	and be	ief , tı	rue <u>.</u>
Sworn to and subs	scribed before me this day of	5	20							S	Signature	e of Perso	n Submitt	ing Rep	oort		_
	Signatu	re				_						Prin	ted Name				
My Commission E	-											Ema	il				_
	мо	D	AY	YR					Are	a Cod	le	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	l Comn	nittee,	Ca	ndida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amendo) that to the best of n ed.	ny knowle	edge and bel	ief this	politica	al c	ommi	ittee has n	ot violat	ed an	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subso	ribed before me this										s	ignature	of Candida	te			-
	day of											Printe	ed Name				-
	Signature																_
My Commission Exp	bires											Ema					
	мо	D	AY.	YR	1				Area	Code		D	aytime Te	lephor	ne Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
NORTHAMPTON CO DEM COM	From:	То:	<u>11/28/2005</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reportin	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 Reportin	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 Reportin	g Period (3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)			
TOTAL for the Reportin	g Period (4)	\$	2.20
Total Monetary Contributions and Receipts During this Reporting Period (Add a totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover P		\$	2.20

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					
			Fro	om:		То	:		
					DATE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus	4)						
								PAGE TOTAL	

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

\$

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 Candidat	e		Rep	orting P	eriod					
			Fro	m:		Τα):			
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4)								
								PAGE TOTAL		
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	<u>.</u>		\$	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 Ca	ndidate		Reporting) Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Com	mittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	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	Reporting Period	
	From:	То:

				D	ATE		АМС	DUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion	-		
Employer Mailing Address/Principal Business	Place of		City		State		Zip Code ((Plus 4)
Enter Grand Total of Part C on S	chedule I, Deta	iled Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
							\$	0.00

I

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 Candidat	e		Report	ting Perio	d			
NORTHAMPTON CO DEM COM			From:			То:		<u>11/28/2005</u>
				D	ATE			AMOUNT
Full Name KNBT				мо	DAY	YEAR		
Mailing Address PO BOX 25012							\$	2.20
City LEHIGH VALLEY	State PA	Zip Code (18002	Plus 4)	10	31	2005	5	
Receipt Description INTEREST		·						
Enter Grand Total of Part E on Sche	dulo T. Dotailo/	d Summary Page	Section	А		[PAGE TOTAL
	auter, Detailet	z Sammary Page,	Section				\$	2.20

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:	То:	<u>11/28/2005</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 Candidate R				Reporting Period					
	From:			То:					
				DATE		АМС	DUNT		
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	5	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						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State	Zip Code(Plus 4)								
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption of	Contribution

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate		Reporting Period						
NORTHAMPTON CO DEM COM			From			То:	<u>11/28/2005</u>	
				DATE			AMOUNT	
To Whom Paid PA DEMOCRATIC PARTY			мо	DAY	YEAR			
Mailing Address 510 NORTH 3RD ST			11	1	2005	\$	5,950.00	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure MAILING					
To Whom Paid JOE LONG			мо	DAY	YEAR			
Mailing Address 2117 MONTGOMERY ST			11	16	2005	\$	247.38	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure REIMBURSE FOR TONER, PAPER, ABC PRINTING BILL, ENVELOPES					
To Whom Paid SPORTS SATURDAY			мо	DAY	YEAR			
Mailing Address C/O ELLIS WEITZMAN 117 W WAYNE AVE			11	16	2005	\$	120.00	
City EASTON	State PA	Zip Code (Plus 4) 18042	Description of Expenditure RADIO SPOTS					
To Whom Paid VERIZON			мо	DAY	YEAR			
Mailing Address PO BOX 28000			11	16	2005	\$	64.95	
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 18002	Description of Expenditure TELEPHONE					
To Whom Paid ED O'BRIEN DINNER DANCE FUND			мо	DAY	YEAR			
Mailing Address 1701 SPRING ST			11	28	2005	\$	75.00	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18018	Description of Expenditure CONTRIBUTION					

To Whom Paid JOE LONG			мо	DAY	YEAR		
Mailing Address 2117 MONTGOMERY ST			11	28	2005	\$	63.60
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure PRINTING REIMBURSEMENT				
To Whom Paid DJ JERRY GREEN			мо	DAY	YEAR		
Mailing Address 1701 SPRING ST			11	28	2005	\$	225.00
City BETHLEHEM	State PA	Zip Code (Plus 4) 18018	Description of Expenditure ENTERTAINMENT				
Enter Grand Total of Expenditures	on Page 1 Pen	ort Cover Bage Item D					PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							6,745.93

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