Campaign Finance Report

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

Filer Identificat Number :	ion 8000	634			Report Filed B		CANDI	DATE	СОМ	MITTEE	✓	LOBI	BYIST	
Name of Filing (Committee, Candid	ate or L	obbyist:		NORTH	AMPT	ON CO DI	EM COM	1					
Street Address:	PO Box 2225	6												
City:	Lehigh Valley						State: PA Zip Code: 18					002-2	256	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D/ PRIM		POST- 3.		AMENDMENT REPORT?		Yes	Nc	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION				AY F TION	POST- 6.		TERMIN REPORT		Yes	Nc	\checkmark
report type)	ANNUAL REPORT	7. X	Year 2023				NG METHO			PAPER		\checkmark	DISKE	TTE
Name of Office S	L Sought by Candida	te:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
							мо	DAY	YEAR			DEN	1	48
							11	-	7 2023]	(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		11 28	20	023 T	0	12	3	1 2023					
A. Amount Bro	ught Forward From	n Last R	eport			\$			15,350.21					
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$	\$ 1,976.00							
C. Total Funds	Available (Sum Of	f Lines A	and B)			\$			17,326.21					
D. Total Expen	ditures (From Sch	edule II	I)			\$			2,289.85					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$			15,036.36	-				
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	chedul	le II)	\$			0.00	-				
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	')		\$			0.00					
				AFF	IDAVI	T SE	CTION							
	s a Committee rep		-							-				
I swear (or affirm correct and compl) that this report, inc ete.	luding the	e attached sc	hedules	s filed on	paper	or by elect	ronic me	dium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and subs	scribed before me this day of	5	20						Signatur	e of Perso	on Submitt	ing Rep	oort	
	Signatu	re				-				Prir	nted Name			
My Commission E	xpires					_				Ema	ail			
	МО	D	AY	YR				Area	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee, C	andid	ate shall	sign hei	re.					
No 320) as amend		ny knowle	edge and beli	ef this	political	comm	ittee has n	ot violate	ed any provis	sions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subso	ribed before me this day of		20						9	Signature	of Candida	ite		
						-				Printe	ed Name			
My Commission Exp	Signature bires					-				Ema	ail			
	мо	D	AY	YR		-		Area C	ode	D	aytime Te	elephon	e Numb	er

SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
NORTHAMPTON CO DEM COM	From:	<u>11/28/202</u>	<u>.3</u> To:	<u>12/31/2023</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	1,096.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	250.00
All Other Contributions (Part B)	\$	630.00		
TOTAL for the Reporting	g Period	(2)	\$	880.00
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 Reporting	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
			I	
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 Pa			\$	1,976.00

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 Committe	Reporting	Reporting Period					
NORTHAMPTON CO DEM COM				<u>11/28/20</u>	:	<u>12/31/2023</u>	
		DATE			AMOUNT		
Full Name of Contributing Susan Wild for Congress	мо	DAY	YEAR				
Mailing Address 163	6 N Cedar Crest Blvd #183					\$	250.00
City Allentown) 12	4	2023				
						Г	PAGE TOTAL

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

AGE TOTAL

250.00

\$

Use this Part to ite	\$50.0 mize all othe 0.01 to \$250	.00 in the repo	s with ar orting pe	aggreg riod.				
Name of Filing Committee or Candidat	e		Reporting I	Period				
NORTHAMPTON CO DEM COM	From:	<u>11/28/</u>	2023 To	b: <u>12/31/2</u>	<u>2023</u>			
				DATE		AMOUNT		
Full Name of Contributor Baron Vanderburg			мо	DAY	YEAR			
Mailing Address 6 Starlight Drive						\$	90.00	
City _{Easton}	State	Zip Code (Plus 4)	11	28	2023			
Easton	РА	18045						
Full Name of Contributor Bev DeSignor	мо	DAY	YEAR					
Mailing Address 280 Meyer Rd						\$	100.00	
City Nazareth	State PA	Zip Code (Plus 4) 18064	11	29	2023			
Full Name of Contributor Stephen Baratta			мо	DAY	YEAR			
Mailing Address 134 West Langhorr	ne Ave					\$ 2	250.00	
City Bethlehem	State PA	Zip Code (Plus 4) 18017	11	29	2023			
Full Name of Contributor DeAnn Lawrence			мо	DAY	YEAR			
Mailing Address 3745 Brandeis Ave	nue					\$	100.00	
City Bethlehem	State PA	Zip Code (Plus 4) 18020	11	11 30 2023				
Full Name of Contributor Sharon Paige-Lisenbee			мо	DAY	YEAR			
Mailing Address 450 Lehigh Dr	Mailing Address 450 Lehigh Dr					\$	90.00	
City Easton	State PA	Zip Code (Plus 4) 18042	12	3	2023			

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 Comm	ittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n 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		AMO	UNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zij	o Code (Plus 4)					
Employer Name				Occupat	tion		·	
Employer Mailing Address/Princ Business	ipal Place of		City		State		Zip Code ((Plus 4)
Enter Grand Total of Part C o	on Schedule I, Detail	ed Sumn	nary Page, Secti	on 3.			PAG	E TOTAL
						4	5	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			Report	ting Peri	bd			
			From:			To:		
			1	C	ATE		AMOUNT	
Full Name				мо	DAY	YEAR		
Mailing Address							\$ i	0.00
City	State	Zip Code (Plus 4)					
Receipt Description					1	1		
Entor Crand Tatal of Davit E	on Schodulo I. Dotailed		Continu	4			PAGE TO	AL
Enter Grand Total of Part E	on Schedule I, Detailed	i Summary Page,	Section	4.			\$	0.00

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS

THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THIN DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	od	
NORTHAMPTON CO DEM COM	From:	<u>11/28/2023</u> To:	<u>12/31/2023</u>
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	TF)		
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 Candidate R				Reporting Period					
	From:								
				DATE		АМО	UNT		
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 Schedule II, In-Kind Contributions Detaile Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	6	0.00		

PAGE 11

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

Name of Filing Committee or Candidate				Re	porting F	Period	Reporting Period				
					From: To:						
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address								\$	0.00		
City	State		Zip Code(F	Plus 4)							
Employer of Contributor			•			Occupa	tion				
Employer Mailing Address/Principal Place of City State					Zip 4)	Code(Plus	Descri	ption	of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions De				taile	ed				PAGE TOTAL		
Summary Page, Section 3.	,									0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
NORTHAMPTON CO DEM COM			From	<u>11/28</u>	<u>8/2023</u>	То:	<u>12/31/2023</u>
				DATE			AMOUNT
To Whom Paid Staples			мо	DAY	YEAR		
Mailing Address 4403 Birkland Pl			12	6	2023	\$	103.35
CityEastonStateZip Code (Plus 4)PA18045			Descrip printing	otion of Exp	penditure	1	
To Whom Paid Northeast Democratic Caucus			мо	DAY	YEAR		
Mailing Address 3046 Old Plank Rd			12	16	2023	\$	50.00
CityTowandaStateZip Code (Plus 4)PA18848				tion of Exp	penditure	1	
To Whom Paid Northampton Country Club					YEAR		
Mailing Address 5094 William Penn H	łwy		12	23	2023	\$	2,020.30
City Easton	State PA	Zip Code (Plus 4) 18045	Descrip event	tion of Exp	benditure	1	
To Whom Paid ActBlue			мо	DAY	YEAR		
Mailing Address PO Box 441146			12	7	2023	\$	7.86
City Somerville	State MA	Zip Code (Plus 4) 2144		otion of Exp ant account			
To Whom Paid ActBlue			мо	DAY	YEAR		
Mailing Address PO Box 441146	Mailing Address PO Box 441146			8	2023	\$	13.64
City Somerville	State MA	Zip Code (Plus 4) 2144		otion of Exp ant account			

To Whom Paid ActBlue				мо	DAY	YEAR		
Mailing Address PO Box 441146				12	18	2023	\$	0.75
City Somerville		State	Zip Code (Plus 4)	Decerin	l otion of Exp	l		
City Somerville		МА	2144		int account			
To Whom Paid ActBlue					DAY	YEAR		
Mailing Address PO Box 441146				11	28	2023	\$	46.15
City Somerville	State Zip Code (Plus 4)			Descrip	tion of Ex	, Denditure		
		МА	2144	Description of Expenditure merchant account + service fees				
To Whom Paid ActBlue					DAY	YEAR		
Mailing Address PO Box 441146				11	30	2023	\$	3.56
City Somerville	State Zip Code (Plus 4)				tion of Ex	, Denditure		
		МА	2144	Description of Expenditure merchant account + service fees				
To Whom Paid ActBlue				мо	DAY	YEAR		
	PO Box 441146			мо 12	DAY	YEAR 2023	\$	19.11
ActBlue Mailing Address		State	Zip Code (Plus 4)	12	1	2023		19.11
ActBlue Mailing Address		State MA	Zip Code (Plus 4) 2144	12 Descrip		2023 penditure		19.11
ActBlue Mailing Address				12 Descrip	1 otion of Exp	2023 penditure		19.11
ActBlue Mailing Address City Somerville To Whom Paid				12 Descrip mercha	1 ption of Exp ant account	2023 penditure t + servic		0.50
ActBlue Mailing Address City Somerville To Whom Paid ActBlue Mailing Address	PO Box 441146			12 Descrip mercha MO	1 otion of Exp ant account DAY 1	2023 Denditure t + servic YEAR 2023	se fees	
ActBlue Mailing Address City Somerville To Whom Paid ActBlue Mailing Address	PO Box 441146	МА	2144	12 Descrip mercha MO 12 Descrip	1 btion of Exp int account DAY	2023 Denditure t + servic YEAR 2023 Denditure	se fees	
ActBlue Mailing Address City Somerville To Whom Paid ActBlue Mailing Address	PO Box 441146	MA	2144 Zip Code (Plus 4)	12 Descrip mercha MO 12 Descrip	1 ation of Exp DAY 1 ation of Exp	2023 Denditure t + servic YEAR 2023 Denditure	se fees	
ActBlue Mailing Address City Somerville To Whom Paid ActBlue Mailing Address City Somerville To Whom Paid	PO Box 441146	MA	2144 Zip Code (Plus 4)	12 Descrip mercha MO 12 Descrip mercha	1 ation of Exp Int account DAY 1 ption of Exp int account	2023 Denditure t + servic YEAR 2023 Denditure t fee	se fees	
ActBlue Mailing Address City Somerville To Whom Paid ActBlue Mailing Address City Somerville To Whom Paid ActBlue	PO Box 441146	MA	2144 Zip Code (Plus 4)	12 Descrip mercha 12 Descrip mercha MO	1 ption of Exp int account DAY 1 ption of Exp int account DAY	2023 Denditure t + servic YEAR 2023 Denditure t fee YEAR 2023	s fees	0.50

To Whom Paid ActBlue				DAY	YEAR		
Mailing Address PO Box 441146				5	2023	\$	2.75
City Somerville	State MA	Zip Code (Plus 4) 2144	Description of Expenditure merchant account + service fees				
To Whom Paid ActBlue				DAY	YEAR		
Mailing Address PO Box 441146			12	6	2023	\$	11.89
City Somerville	State MA	Zip Code (Plus 4) 2144	Description of Expenditure merchant account + service fees				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
	\$	2,289.85					