

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: 2117 MONTGOMERY ST												
City: BETHLEHEM						State: PA			Zip Code: 18017			
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. X	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2000	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				
						11	7	2000				
									(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		1	1	1		9	18	2000				
A. Amount Brought Forward From Last Report						\$			3,840.44			
B. Total Monetary Contributions And Receipts (From Schedule I)						\$			259.43			
C. Total Funds Available (Sum Of Lines A and B)						\$			4,099.87			
D. Total Expenditures (From Schedule III)						\$			1,737.45			
E. Ending Cash Balance (Subtract Line D From Line C)						\$			2,362.42			
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: To: <u>9/18/2000</u>

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

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 200.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 200.00

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 Period (3)	\$ 0.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 9.43

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.)	\$ 259.43
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Full Name of Contributing Committee				MO	DAY	YEAR	\$	100.00
COMMITTEE TO RE ELECT ROBERT FREEMAN								
Mailing Address				8	7	2000		
711 BURKE STREET								
City		State	Zip Code (Plus 4)					
EASTON		PA	180424247					

Full Name of Contributing Committee				MO	DAY	YEAR	\$	100.00
OBRIEN FOR CONGRESS COMMITTEE								
Mailing Address				8	7	2000		
SHIRLEY AND ED OBRIEN 175 CHAPEL AVENUE								
City		State	Zip Code (Plus 4)					
ALLENTOWN		PA	18103					

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

PAGE TOTAL	
\$	200.00

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 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	Reporting Period
	From: To:

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
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.

PAGE TOTAL
\$ 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 NORTHAMPTON CO DEM COM	Reporting Period From: To: <u>9/18/2000</u>
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				DATE	AMOUNT
Full Name NAZARETH NATIONAL BANK				MO	DAY
Mailing Address P O BOX 112				8	31
City NAZARETH	State PA	Zip Code (Plus 4) 180640112	YEAR		
Receipt Description BANK INTEREST SINCE LAST REPORT \$8.09 SINCE MAY 2000				\$ 8.09	

Full Name NAZARETH NATIONAL BANK				MO	DAY	YEAR	\$ 1.34
Mailing Address				3	1	2000	
City	State	Zip Code (Plus 4)					
Receipt Description INTEREST CORRECTION FROM MARCH 2000							

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

PAGE TOTAL
\$ 9.43

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:	To: 9/18/2000
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

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
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

Name of Filing Committee or Candidate	Reporting Period
NORTHAMPTON CO DEM COM	From To: <u>9/18/2000</u>

DATE				AMOUNT
To Whom Paid AT&T	MO	DAY	YEAR	
Mailing Address P O BOX 9001310	4	26	2000	\$ 17.93
City LOUISVILLE	State KY	Zip Code (Plus 4) 402901310	Description of Expenditure LONG DISTANCE TELEPHONE SERVICE FOR PARTS	
To Whom Paid PLAINFIELD FARMERS FAIR ASSOCIATES	MO	DAY	YEAR	
Mailing Address C/O RAY MACK 1663 MACK RD	4	26	2000	\$ 25.00
City PEN ARGYL	State PA	Zip Code (Plus 4) 18072	Description of Expenditure STAND AT FAIR DEPOSIT	
To Whom Paid LV LABOR COUNCIL COPE	MO	DAY	YEAR	
Mailing Address C/O MIKE WALLUY 2779 HILL DRIVE	5	9	2000	\$ 70.00
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure 2 TICKETS FOR BENQUET LABOR COUNCIL	
To Whom Paid BELL ATLANTIC VEREIJON	MO	DAY	YEAR	
Mailing Address P O BOX 28000	5	9	2000	\$ 37.52
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 180028000	Description of Expenditure PARTY TELEPHONE BILL	
To Whom Paid AT&T	MO	DAY	YEAR	
Mailing Address P O BOX 9001310	5	27	2000	\$ 15.63
City LOUISVILLE	State KY	Zip Code (Plus 4) 412901310	Description of Expenditure LONG DISTANCE TELEPHONE SERVICE FOR PARTY	

To Whom Paid COMMITTEE TO ELECT OBRIEN FOR CONGRESS			MO	DAY	YEAR	\$ 20.00
Mailing Address P O BOX 447			6	6	2000	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18018	Description of Expenditure 1 TICKET RALLY ON THE RIVER			

To Whom Paid BELL ATLANTIC VERIEJON			MO	DAY	YEAR	\$ 33.71
Mailing Address P O BOX 28000			6	6	2000	
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 180028000	Description of Expenditure TELEPHONE BILL FOR PARTY			

To Whom Paid BETHLEHEM DEMOCRATIC COMMITTEE			MO	DAY	YEAR	\$ 25.00
Mailing Address C/O JOHN T BURKE CHAIR 47 W WASHINGTON AVE			6	6	2000	
City BETHLEHEM	State PA	Zip Code (Plus 4) 180182433	Description of Expenditure 5 TICKETS FOR PICNIC \$5 EACH			

To Whom Paid EVERGREEN LAKE RECREATIONAL AREA			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 2375 BENDER DRIVE			6	6	2000	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure RENTAL FOR PICNIC ON 9/17/2000			

To Whom Paid BELL ATLANTIC VEREIJON			MO	DAY	YEAR	\$ 44.28
Mailing Address P O BOX 28000			6	29	2000	
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 180028000	Description of Expenditure TELEPHONE BILL FOR COMMITTEE			

To Whom Paid AT&T			MO	DAY	YEAR	\$ 38.34
Mailing Address P O BOX 9001310			8	6	2000	
City LOUISVILLE	State KY	Zip Code (Plus 4) 402901310	Description of Expenditure LONG DISTANCE COMMITTEE CALLS			

To Whom Paid BELL ATLANTIC VEREIJON			MO	DAY	YEAR	\$ 40.00
Mailing Address P O BOX 28000			8	6	2000	
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 180028000	Description of Expenditure TELEPHONE BILL FOR COMMITTEE			

To Whom Paid JOANNE MESSELEHNER			MO	DAY	YEAR	\$ 66.00
Mailing Address 40 SCHOENECK AVE			8	10	2000	
City NAZARETH	State PA	Zip Code (Plus 4) 18064	Description of Expenditure STAMPS FOR PARTY PICNIC 200			

To Whom Paid AT&T			MO	DAY	YEAR	\$ 11.57
Mailing Address P O BOX 9001310			8	25	2000	
City LOUISVILLE	State KY	Zip Code (Plus 4) 402901310	Description of Expenditure LONG DISTANCE COMMITTEE CALLS			

To Whom Paid VERIZON (FORMERLY BELL ATLANTIC)			MO	DAY	YEAR	\$ 43.51
Mailing Address P O BOX 28000			8	25	2000	
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 180028000	Description of Expenditure TELEPHONE BILL FOR COMMITTEE			

To Whom Paid JOANNE MESSELEHNER			MO	DAY	YEAR	\$ 19.80
Mailing Address 40 SCHOENECK AVE			8	25	2000	
City NAZARETH	State PA	Zip Code (Plus 4) 18064	Description of Expenditure POSTAGE FOR COMMITTEE			

To Whom Paid NORTHAMPTON COUNTY FIRE POLICE ASSOC INC			MO	DAY	YEAR	\$ 100.00
Mailing Address 1230 N NEW STREET			8	25	2000	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18018	Description of Expenditure DONATION TO COUNTY FIRE POLICE			

To Whom Paid NAZARETH NATIONAL BANK			MO	DAY	YEAR	
Mailing Address P O BOX 112			4	11	2000	
City NAZARETH	State PA	Zip Code (Plus 4) 180640112	Description of Expenditure DEDUCTION FOR NEW CHECKER			

To Whom Paid CORRECTION FOR ERROR TO CHECK 623 \$15.87 SHOULD HAVE BEEN \$45.54			MO	DAY	YEAR	
Mailing Address						
City	State	Zip Code (Plus 4)	Description of Expenditure CORRECTION			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 1,737.45

