#### **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 :			port ed B		CAND	DATE		СОМ	<b>4ITTEE</b>	<b>✓</b>	LOBE	YIST				
Name of Filing C	Committee, Candid	late or L	obbyist:		Nort	than	npton	County	Dem C	omm	ittee					
Street Address:	2117 MONTG	OMERY	ST													
City:	BETHLEHEM							State:	PA			<b>Zip Code:</b> 18017				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY I PRIMARY	PRIMARY PRE- 2.X 3					POST- 3.			AMENDM REPORT		Yes	No	<b>~</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- !	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2010		FILING METHOD ( ) CHECK ONE						PAPER		$\checkmark$	DISKE	TTE	
Name of Office S	Sought by Candida	ite:						DATE C	F ELE	CTIO	N	District Number	Office Code	Part	y Code	County Code
								МО	DAY	YE	AR	Number	Code			Code
								11		2	2010		(SEE IN	ISTRUCTIO	NS FOR C	ODES)
Summary of Expenditures	Receipts and	МО	DAY YI	EAR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
Expenditures			1 1	20	010	Т	<u> </u>	5	5	3	2010					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			2,5	04.63					
B. Total Monet	ary Contributions	And Rec	eipts (From S	che	dule	e I)	\$				42.00					
C. Total Funds Available (Sum Of Lines A and B)							\$			2,5	46.63					
D. Total Expend	ditures (From Sch	edule II	I)				\$			8	73.38					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			1,6	73.25					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	edul	le II	I)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			•		
			Α	۱FF	IDA	AVI	T SE	CTION								
	s a Committee rep	-	_								_					
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	attached sched	lules	file	d on	paper (	or by elect	tronic m	edium	, are to t	he best o	f my kno	wledge a	ind belie	f , true
Sworn to and subs	cribed before me thi day of	s	20							S	ignature	of Perso	n Submit	ting Rep	ort	
	— Signati	ıre	-				<b>-</b> -					Prin	ted Nam	e		
My Commission Ex	-											Ema	il			—
	МО	D	AY	YR			_		Ar	ea Cod	e	Daytim	e Telep	hone Nur	nber	
Part II- If this is	a report of a can	didate's	authorized Co	mm	itte	ee, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of e	ny knowle	edge and belief	this	polit	tical	commi	ittee has r	not viola	ted an	y provis	ions of the	e act of J	une 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before me this								Signature of Candidate							
	day of 						_					Dulm*-	d Name			
	Signature						-					Printe	d Name			
My Commission Exp	_											Ema	il			
	МО	D	AY	YR			-		Area	Code		Da	aytime 1	elephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	Period		
Northampton County Dem Committee	From:	<u>1/1/201</u>	<u>.0</u> To:	5/3/2010
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	42.00
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 Reporting	) 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 Reporting	) Period	(3)	\$	0.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	42.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate val							
Name of Filing Committee or Candidate				porting	Period			
			Fr	om:		То	:	
		•			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•	•		•	•	•	$\overline{}$	PAGE TOTAL

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

**PAGE TOTAL**\$ 0.00

## 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 Filling Committee of Candidate			Rep	oorting P				
Fro				From: To			<b>):</b>	
					DATE		АМ	OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					

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

**PAGE TOTAL \$** 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.

lame of Filing Committee or Candidate			Reporting Period					
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

### 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.)

lame of Filing Committee or Candidate			Repo	orting Pe				
	Fron	From: To:						
				D	ATE		A	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s <b>4</b> )					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			1	PAGE TOTAL
							<b>\$</b>	0.00

## 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	ing Perio	od				
			From:			To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	1		
Mailing Address							\$		0.00
City	State	Zip Code (	Plus 4)						
Receipt Description	·	·		•			•		
Enter Grand Total of Part E	on Schedule I. Detailer	l Summary Page.	Section	4.				PAGE TO	ΓAL
- Communication of the Ex	Januara 1/ Betained	. Jaai y 1 ago,	Dection	••			\$		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 County Dem Committee	From:	<u>1/1/2010</u> <b>To:</b>	<u>5/3/2010</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	T F)		
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,		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidat	Reporting	g Period								
	Fro					From: To:				
				DATE			AMOUNT			
Full Name of Contributor			МО	DAY	YEAR					
Mailing Address						<b>\$</b>	0.00			
City	State	Zip Code (Plus 4)								
Description of Contribution:										
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL			
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL			
						\$	0.00			

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidat	Name of Filing Committee or Candidate					porting P	Period				
					Fro	om:		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 Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00	

### STATEMENT OF EXPENDITURES

Name of Filing Committee or (	Candidate		Reporti	ng Period			
Northampton County Dem Co	ommittee		From	<u>1/:</u>	1/2010	То:	5/3/2010
				DATE			AMOUNT
<b>To Whom Paid</b> Lehigh Valley Labor Council C	CLC		МО	DAY	YEAR		
Mailing Address 526 S. Ber	rks Street		4	29	2010	\$	420.00
City Allentown State Zip Code (Plus 4) PA 18104				otion of Expoution & ha			
To Whom Paid Joe Long				DAY	YEAR		
Mailing Address 2117 Montgomery Street			4	3	2010	\$	117.94
<b>City</b> Bethlehem	State PA	<b>Zip Code (Plus 4)</b> 18017	1	otion of Exp Supplies:Re			
<b>To Whom Paid</b> Joe Long	·	·	мо	DAY	YEAR		
Mailing Address 2117 Mont	itgomery Street		4	18	2010	\$	84.78
<b>City</b> Bethlehem	State PA	<b>Zip Code (Plus 4)</b> 18017		otion of Exp			
<b>To Whom Paid</b> Verizon			МО	DAY	YEAR		
Mailing Address PO Box 28000			5	3	2010	\$	250.66
<b>City</b> Lehigh Valley	Lehigh Valley  State PA  Zip Code (Plus 4) 18002-800			otion of Exp one & Inter			
Enter Grand Total of Evneu	ter Grand Total of Expenditures on Page 1, Report Cover Page, Item I						PAGE TOTAL
Enter Grand Total of Exper	iditures on Page 1, Re	port Cover Page, Item L	<b>,</b> .			۱ ـ	072.20

873.38