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 :	on 800	0634				port ed B		CANDI	DATE		СОМ	ITTEE	✓	LOB	BYIST		
Name of Filing C	Committee, Candi	date or L	obbyist:		Nor	than	npton	County [Dem C	omm	ittee						
Street Address:	2117 MONTO	OMERY	ST														
City:	BETHLEHEM							State:	PA			Zip Cod	ie: 18	3017			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3. X		AMENDM REPORT?		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	≣-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	•	\
report type)	ANNUAL REPORT	7.	Year 2010					IG METHO				PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candida	ate:	-					DATE O	F ELE	CTIO	N	District Number	Office Code	Pai	rty Code	Coun	
								МО	DAY	YE	AR	Ivamber	Couc	l l		couc	
								11		2	2010		(SEE IN	ISTRUCTI	ONS FOR	CODES)	
Summary of Expenditures	Receipts and	МО	DAY	YEAR	ł		_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures			1 1	2	010	Т	0	6		7	2010						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			1,6	573.25						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	ı)	\$			1,0	00.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 2,673.25																	
D. Total Expenditures (From Schedule III) \$ 1,186.67																	
E. Ending Cash	Balance (Subtra	ct Line D	From Line (C)			\$			1,4	86.58						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Se	chedu	le II	[)	\$				0.00						
G. Unpaid Debt	s And Obligations	s (From S	Schedule IV)			\$				0.00			•			
				AFF	IDA	٩VI	T SE	CTION									
	s a Committee rep	•	_								_						
I swear (or affirm) correct and complete) that this report, inc ete.	cluding the	e attached scl	hedule	s file	d on	paper o	or by electi	ronic m	edium	, are to t	the best o	f my kno	wledge	and beli	ef , tru	ıe
Sworn to and subs	cribed before me th day of	is	20							S	ignature	of Perso	n Submit	ting Re	port		-
							-					Prin	ted Name	e			-
My Commission Ex	Signat pires	ıre						,				Ema	il				-
	МО	D.	AY	YR			-		Are	ea Cod	e		e Telepi	none Nu	mber		-
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	e, C	andida	ate shall :	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of	my knowle	edge and beli	ef this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subso	ribed before me this	;									s	ignature o	of Candid	ate			-
	day of		_ 20				_										_
	Cirt.						_					Printe	d Name				
My Commission Exp	Signature ires											Ema	il				-
	мо	D.	AY	YR	ł		-		Area	Code		Da	aytime T	elephor	ne Numb	er	·

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Detailed Summary Luge				
Name of Filing Committee or Candidate	Reporting	Period		
Northampton County Dem Committee	From:	1/1/201	<u>0</u> To:	6/7/2010
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	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 Reporting	Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	1,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	1,000.00
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 Page 1, 2,3 and 4; also enter this amount on Page1, Report Cover Page 2, 2, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3,			\$	1,000.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			From: To:				То:	
		1			DATE			AMOUNT
Full Name of Contribution	ng 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

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	e or Candidate		Rep	porting P	eriod			
				From: T			·o:	
			•		DATE		Α	MOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	١					

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.

Name of Filing Committee or Candidate	Candidate Reporting Period				
Northampton County Dem Committee	From:	1/1/2010	То:	6/7/2010	

DATE AMOUNT

Full Name of Contributing Committee IUOE Local 542	-					
Mailing Address 1375 Virgina Dr., Suite #100						\$ 1,000.00
City Fort Washington	City Fort Washington State PA 2ip Code (Plus 4) 19034		5	19	2010	

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

PAGE TOTAL \$ 1,000.00

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.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod				
			From:				То:		
				D	ATE		ı	AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus	s 4)						
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.			l	PAGE TOTAL	
							\$	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	ting Perio	bd			
			From:			To:		
				D	ATE		AMOUNT	
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description		•		•				
Enter Grand Total of Part E	on Schedule T. Detailer	d Summary Page	Section	4			PAGE TOTAL	
Enter Grana Total of Fait E	on senedare 1, Betanet	a Summary rage,	Section				\$ 0.0	0

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> To:	<u>6/7/2010</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 Candid	III Name of Contributor				Reporting Period					
			From:			То:				
				DATE			AMOUNT			
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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL			
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL			
						\$	0.00			

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting l	Period			
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or C	Candidate		Reporti	ng Period			
Northampton County Dem Co	ommittee		From	1/2	<u>1/2010</u>	То:	6/7/2010
				DATE			AMOUNT
To Whom Paid John Callahan for Congress Co	ommittee		МО	DAY	YEAR		
Mailing Address PO Box 138	86		5	24	2010	\$	1,000.00
State Zip Code (Plus 4) PA 18016			1	otion of Exp			
To Whom Paid Verizon			МО	DAY	YEAR		
Mailing Address PO Box 286	000		6	1	2010	\$	126.67
City Lehigh Valley	State PA	Zip Code (Plus 4) 18002-800	1	Description of Expenditure Telephone & Internet			
To Whom Paid Active Data Exchange, Inc			МО	DAY	YEAR		
Mailing Address 190 Brodhead Road			6	7	2010	\$	60.00
City Bethlehem State PA Zip Code (Plus 4) 18017				otion of Expet Hosting	enditure		
	l .	l					PAGE TOTAL

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

1,186.67