# **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			Repor Filed		:	CANDI	DATE		СОММ	<b>1ITTEE</b>	✓	LOBE	BYIST		
Name of Filing C	Committee, Candi	date or L	obbyist:			-		Co Dem	Com	_							
Street Address:	2117 MONTO	GOMERY	ST														
City:	BETHLEHEM							State:	PA			Zip Co	<b>de:</b> 18	017			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	ay pre	- 2.		) DA RIMA		POST-	3.		AMENDN REPORT		Yes	N	C	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	DN ELECTION ELEC						Y P TON	POST- 6.			TERMIN/ REPORT		Yes	N	0	$\checkmark$
report type)	ANNUAL REPOR	<b>T</b> 7.	<b>Year</b> 2010	)				IG METHO				PAPER		$\checkmark$	DISK	TTE	
Name of Office S	L Sought by Candid	ate:						DATE O	DF ELECTION District Number				Office Code	Par	ty Code	Cour	
								мо	DAY	YEA	R					48	
								11	:	2	2010		(SEE INS	TRUCTI	ONS FOR	CODES	)
	Receipts and	мо	DAY	YEAR	Ł			мо	DAY	YE/	AR	FC	R OFFIC	E USE	ONLY		
Expenditures	s from:		1 :	1 2	010	ГО		10	1	8	2010						
A. Amount Bro	ught Forward Fro	om Last R	eport				\$			94	8.16						
B. Total Monet	ary Contributions	And Rec	eipts (Froi	m Sche	dule I)		\$			2,39	92.00						
C. Total Funds	Available (Sum C	Of Lines A	and B)				\$			3,34	10.16						
D. Total Expen	ditures (From Sc	hedule II	I)				\$			1,60	6.75						
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$			1,73	3.41						
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	Schedu	le II)		\$				0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule I	V)			\$				0.00						
				AFF	IDAV	IT S	SE	CTION									
PART I - If this is		• •	-						• •		_						
I swear (or affirm correct and comple	) that this report, in ete.	cluding the	e attached so	chedules	s filed or	ı pap	oer o	or by electi	ronic me	dium, a	are to t	he best o	f my know	vledge	and bel	ief , tr	ue
Sworn to and subs	cribed before me th day of	is	20							Sig	nature	e of Perso	n Submitt	ing Rep	oort		_
	Signat	ure				_						Prin	ted Name				-
My Commission Ex	2											Ema	il				-
	мо	D	AY	YR					Area	a Code		Daytin	e Teleph	one Nu	mber		
Part II- If this is	a report of a car	ndidate's	authorized	d Comn	nittee, (	Cane	dida	ate shall s	sign hei	re.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and be	lief this	political	l cor	mmi	ttee has no	ot violate	ed any	provisi	ions of th	e act of Ju	ine 3,19	937 (P.	L. 133	з,
Sworn to and subso	ribed before me this day of	S	20								Si	ignature	of Candida	ite			-
						_						Printe	d Name				-
My Commission Exp	Signature	3				_						Ema	il				-
	-					_											_
	МО	D	AY	YR					Area C	ode		D	aytime Te	elephon	e Numl	ber	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: <u>1/1/2010</u> **To:** Northampton Co Dem Com 10/18/2010 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 1,942.00 **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 450.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 450.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 2,392.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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 Candida	te		Reporti	ng Po	eriod				
Northampton Co Dem Com			From:		<u>1/1/20</u>	) <u>10</u> To	:	<u>10/18/2010</u>	
				DATE AMOUN					
Full Name of Contributing Committee District Council 88 AFSCME			мо		DAY	YEAR			
Mailing Address 3031 Walton Road Building C, Suite 300							\$	100.00	
City Plymouth Meeting	<b>State</b> PA	Zip Code (Plus	4)	9	14	2010			
Full Name of Contributing Committee Citizens for John M. Morganelli			мо		DAY	YEAR			
Mailing Address PO Box 1426							\$	250.00	
City Bethlehem	<b>State</b> PA	Zip Code (Plus 18016-142	4)	9	17	2010			
Full Name of Contributing Committee United Steelworkers Union Local 2599			мо		DAY	YEAR			
Mailing Address 53 East Lehigh S	treet						\$	100.00	
City Bethlehem	<b>State</b> PA	Zip Code (Plus 18018	4)	9	17	2010			
								PAGE TOTAL	
Enter Grand Total of Part A on Sch	edule I, Detaile	ed Summary Page, S	ection 2.				\$	450.00	

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

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			orting P	eriod			
			Fro	m:		Тс	):	
					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	2.		\$	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	Name of Filing Committee or Candidate			) 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		АМ	OUNT
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 P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	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	ing Perio	od				
			From:			То:			
				D	ATE			AMOUN <sup>-</sup>	г
Full Name				мо	DAY	YEAR			
Mailing Address							-	\$	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description							•		
Enter Grand Total of Part E on Sche	dule T. Detailed !	Summary Page	Section	4				PAGE TO	TAL
							\$		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 Co Dem Com	From:	<u>1/1/2010</u> <b>то:</b>	<u>10/18/2010</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, 3		\$	0.00

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

## VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate Re			g Period			
			From:			То:	
				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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

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

Name of Filing Committee or Candidate					Rep	porting P	eriod			
					From: To:					
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State				Zip Code(Plus 4) Description (			ption o	f 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 Candida	te		Reporti	ng Period			
Northampton Co Dem Com			From	<u>1/</u>	<u>1/2010</u>	То:	<u>10/18/2010</u>
				DATE			AMOUNT
<b>To Whom Paid</b> Verizon			мо	DAY	YEAR		
Mailing Address PO Box 28000			9	28	2010	\$	99.75
CityLehigh ValleyStateZip Code (Plus 4)PA18002-800			<b>Descrip</b> Telepho	otion of Exp	penditure		
<b>To Whom Paid</b> Tri-Boro Sportsman			мо	DAY	YEAR		
Mailing Address Box 71			9	19	2010	\$	1,355.00
City Northampton	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18067	-	<b>stion of Ex</b> Meeting P			
<b>To Whom Paid</b> GJ Green			мо	DAY	YEAR		
Mailing Address 53 East Lehigh St	reet		9	28	2010	\$	150.00
City Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18018		<b>otion of Exp</b> ainment for			
<b>To Whom Paid</b> KNBT Bank			мо	DAY	YEAR		
Mailing Address P.O. Box 547			9	30	2010	\$	2.00
CityBoyertownStateZip Code (Plus 4)PA19512			<b>Descrip</b> Bank F	<b>otion of Ex</b> ee	penditure	1	
Enter Grand Total of Expenditure	s on Page 1. Re	port Cover Page. Item (	).				PAGE TOTAL
	uge 1/ K					\$	1,606.75

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