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 20	10370			Repo			CAI	NDII	DATE		COMN	1ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, Cand	idate or L	.obbyist:		MAR	ΓIN	, JIM	COM	то	ELECT	-							
Street Address:	1524 LINDE	EN ST																
City:	ALLENTOW	N						State	:	PA		Zip Code: 18102-4251						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2		30 DA PRIMA		Р	OST-	3.		AMENDM REPORT?		Yes	N)	√
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	- 5		30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	N)	\
report type)	ANNUAL REPOR	7.	Year 2010					NG ME			•		PAPER		√	DISK	TTE	
Name of Office S	ought by Candi	date:	•		•			DAT	E O	F ELE	CTIC	ON	District Number	Office Code	Par	ty Code	Cour	
								МО		DAY	Y	EAR		•	REF)	39	
									11		2	2010		(SEE INS	STRUCTI	ONS FOR	CODES)
Summary of		МО	DAY	YEAR	1			МО		DAY	Υ	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	Trom:		1 1	. 20	010	T	o 		10	:	18	2010						
A. Amount Bro	ught Forward Fr	om Last F	Report				\$				31,	364.80						
B. Total Moneta	ary Contribution	s And Red	ceipts (Fron	n Sche	dule 1	I)	\$					0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 31,364.80																		
D. Total Expenditures (From Schedule III) \$ 638.79																		
E. Ending Cash Balance (Subtract Line D From Line C)							\$				30,	726.01						
F. Value Of In-	Kind Contribution	ns Receiv	ed (From S	chedu	le II)		\$					0.00						
G. Unpaid Debt	s And Obligation	ns (From	Schedule I\	/)			\$					0.00			•			
				AFF	IDA'	VI	ΓSE	CTIC	N									
PART I - If this is		-	_									_						
I swear (or affirm) correct and comple		ncluding th	e attached sc	hedules	s filed	on p	paper	or by e	lectr	onic m	ediun	n, are to t	he best o	f my knov	vledge	and bel	ief , tr	ue
Sworn to and subs	cribed before me t day of	his	20									Signature	of Perso	n Submitt	ing Re	ort		_
	Signa	iture					<u>-</u>						Prin	ted Name	ŀ			
My Commission Ex	pires						_		•				Emai	i				
	МО	D	PAY	YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	indidate's	authorized	Comm	nittee	, Ca	ndid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		f my knowl	ledge and bel	ief this	politio	cal	comm	ittee h	as no	ot viola	ted a	ny provisi	ions of the	e act of Ju	ıne 3,1	937 (P.	L. 133	з,
Sworn to and subsc		is	20									Si	ignature o	of Candida	ate			- $ $
-	day of												Printe	d Name				-
	Signatur	e					•											_
My Commission Exp	ires												Ema	il				
	МО	D	PAY	YR						Area	Code		Da	ytime Te	elephor	ne Numi	er	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
MARTIN, JIM COM TO ELECT	From:	1/1/201	<u>0</u> To:	10/18/2010
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)			\$	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			\$	0.00

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			
			Fre	om:		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 or Candi	date		Reporting Period From: To:						
					DATE		ı	AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0	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.

Name 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.)

Name of Filing Committee or Candidate			Repo	orting Pe	riod			
			Fron	n:		To):	
				D	ATE		A	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.			1	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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AM	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T. Detailer	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	Section	•			\$	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		
MARTIN, JIM COM TO ELECT	From:	<u>1/1/2010</u> To:	<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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidat	:e		Reporting	g 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 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 Candida	te				Re	porting	Period					
					Fro	m:		То	:			
							DATE				AMOUNT	
Full Name of Contributor						мо	DAY	YEAR	1			
Mailing Address										\$		0.00
City	State		Zip Code(F	Plus 4)								
Employer of Contributor	•		•			Occupa	ation					
Employer Mailing Address/Principal P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	cripti	ion of (Contributio	on
Enter Grand Total of Part G on S	chedule II, I	In-Kind	Contributi	ons De	taile	ed					PAGE TOT	ΓAL
Summary Page, Section 3.												0.00

STATEMENT OF EXPENDITURES

No	Name of Filing Committee or C	andidate		Reporti	ng Period			
TO Whom Paid CITIZENS FOR PAT BROWNE Mailing Address PO BOX 90307 State PA ALLENTOWN State PA ALLENTOWN State PA ALLENTOWN MO DAY YEAR Zip Code (Plus 4) Description of Expenditure 10/11/10 RECEPTION TO Whom Paid JAMES B. MARTIN MO DAY YEAR MO DAY YEAR State PA ALLENTOWN MO DAY YEAR State PA ALLENTOWN MO DAY YEAR State PA ALLENTOWN MO DAY YEAR Zip Code (Plus 4) Description of Expenditure REIMBURSEMENT 9/10/10 LEHIGH COUNTRY CLUE BREAKFAST MEETING TO Whom Paid CHARLIE DENT FOR CONGRESS Mailing Address PO BOX 442 City ALLENTOWN State PA ALLENTOWN State PA ALLENTOWN State PA ALLENTOWN PA DESCRIPTION OF Expenditure REIMBURSEMENT 9/10/10 LEHIGH COUNTRY CLUE BREAKFAST MEETING TO Whom Paid LAFAYETTE AMBASSADOR BANK MO DAY YEAR Zip Code (Plus 4) Description of Expenditure HOST COMMITTEE FUNDRAISER EVENT 10/14/10 TO Whom Paid LAFAYETTE AMBASSADOR BANK MO DAY YEAR Zip Code (Plus 4) Description of Expenditure HOST COMMITTEE FUNDRAISER EVENT 10/14/10 TO Whom Paid LAFAYETTE AMBASSADOR BANK Mailing Address 19TH & LIBERTY ST. State Zip Code (Plus 4) BANK SERVICE CHARGE PAGE TOTAL	MARTIN, JIM COM TO ELECT			From	1/	1/2010	То:	10/18/2010
Mailing Address PO BOX 90307 State PA ALLENTOWN State PA BIRDON Paid PA BIRDON PA BI					DATE			AMOUNT
City ALLENTOWN State PA	To Whom Paid CITIZENS FOR PAT BROWNE			МО	DAY	YEAR		
To Whom Paid JAMES B. MARTIN Mailing Address 3845 HAWTHORNE DRIVE City CENTER VALLEY State PA 1809 To Whom Paid CHARLIE DENT FOR CONGRESS Mailing Address PO BOX 442 City ALLENTOWN State PA 18105-044 To Whom Paid CHARLIE FUNDRAISER EVENT 10/14/10 To Whom Paid CLAFAYETTE AMBASSADOR BANK Mailing Address 19TH & LIBERTY ST. City ALLENTOWN State PA 2Ip Code (Plus 4) PA 18105-044 MO DAY VEAR Description of Expenditure HOST COMMITTEE FUNDRAISER EVENT 10/14/10 To Whom Paid LAFAYETTE AMBASSADOR BANK Mailing Address 19TH & LIBERTY ST. City ALLENTOWN State PA 2Ip Code (Plus 4) PA 18105-044 Description of Expenditure HOST COMMITTEE FUNDRAISER EVENT 10/14/10 Description of Expenditure BANK SERVICE CHARGE PAGE TOTAL	Mailing Address PO BOX 90:	307		9	27	2010	\$	300.00
MAILING Address 3845 HAWTHORNE DRIVE State PA 18034 PA 21p Code (Plus 4) Description of Expenditure REIMBURSEMENT 9/10/10 LEHIGH COUNTRY CLUE BREAKFAST MEETING To Whom Paid CHARLIE DENT FOR CONGRESS Mailing Address PO BOX 442 State PA 21p Code (Plus 4) Description of Expenditure REIMBURSEMENT 9/10/10 LEHIGH COUNTRY CLUE BREAKFAST MEETING To Whom Paid LAFAYETTE AMBASSADOR BANK Mailing Address 19TH & LIBERTY ST. State PA 21p Code (Plus 4) Description of Expenditure HOST COMMITTEE FUNDRAISER EVENT 10/14/10 To Whom Paid LAFAYETTE AMBASSADOR BANK Mailing Address 19TH & LIBERTY ST. State PA 21p Code (Plus 4) Description of Expenditure BANK SERVICE CHARGE PAGE TOTAL	City ALLENTOWN							
City CENTER VALLEY State PA PA State 18034 Description of Expenditure REIMBURSEMENT 9/10/10 LEHIGH COUNTRY CLUE BREAKFAST MEETING To Whom Paid CHARLIE DENT FOR CONGRESS Mo DAY VEAR City ALLENTOWN State Zip Code (Plus 4) Description of Expenditure HOST COMMITTEE FUNDRAISER EVENT 10/14/10 To Whom Paid LAFAYETTE AMBASSADOR BANK Mo DAY VEAR Mailing Address 19TH & LIBERTY ST. 9 15 2010 \$ 21.13 City ALLENTOWN State Zip Code (Plus 4) Description of Expenditure HOST COMMITTEE FUNDRAISER EVENT 10/14/10 To Whom Paid LAFAYETTE AMBASSADOR BANK Mo DAY VEAR VEAR	To Whom Paid JAMES B. MARTIN			МО	DAY	YEAR		
PA 18034 REIMBURSEMENT 9/10/10 LEHIGH COUNTRY CLUE BREAKFAST MEETING TO Whom Paid CHARLIE DENT FOR CONGRESS Mailing Address PO BOX 442 10 8 2010 \$ 250.00 City ALLENTOWN State PA 18105-044 MO DAY YEAR Description of Expenditure HOST COMMITTEE FUNDRAISER EVENT 10/14/10 TO Whom Paid LAFAYETTE AMBASSADOR BANK Mo DAY YEAR Mo DAY YEAR Mo DAY YEAR City ALLENTOWN State PA 2100 \$ 21.13 City ALLENTOWN State PA 18104 Description of Expenditure BANK SERVICE CHARGE PAGE TOTAL	- 3043 HAWTHORNE DRIVE			9	27	2010	\$	67.66
CHARLIE DENT FOR CONGRESS Mailing Address PO BOX 442 10 8 2010 \$ 250.00 City ALLENTOWN State PA 18105-044 MO DAY YEAR Description of Expenditure HOST COMMITTEE FUNDRAISER EVENT 10/14/10 To Whom Paid LAFAYETTE AMBASSADOR BANK Mailing Address 19TH & LIBERTY ST. 9 15 2010 \$ 21.13 City ALLENTOWN State PA 18104 Description of Expenditure HOST COMMITTEE FUNDRAISER EVENT 10/14/10 PA 21.13	City CENTER VALLEY			REIMBI	REIMBURSEMENT 9/10/10			COUNTRY CLUB
City ALLENTOWN State PA State PA State PA State PA State PA	To Whom Paid CHARLIE DENT FOR CONGRES	5		мо	DAY	YEAR		
To Whom Paid LAFAYETTE AMBASSADOR BANK Mailing Address 19TH & LIBERTY ST. State PA Zip Code (Plus 4) Description of Expenditure HOST COMMITTEE FUNDRAISER EVENT 10/14/10 MO	Mailing Address PO BOX 44:	2		10	8	2010	\$	250.00
LAFAYETTE AMBASSADOR BANK Mo DAY YEAR Mailing Address 19TH & LIBERTY ST. 9 15 2010 \$ 21.13 City ALLENTOWN PA 21.13 PAGE TOTAL	City ALLENTOWN							ENT 10/14/10
City ALLENTOWN State Zip Code (Plus 4) Description of Expenditure PA 18104 BANK SERVICE CHARGE PAGE TOTAL	To Whom Paid LAFAYETTE AMBASSADOR BAN	K		мо	DAY	YEAR		
PA 18104 BANK SERVICE CHARGE PAGE TOTAL	Mailing Address 19TH & LIBERTY ST.		9	15	2010	\$	21.13	
	City ALLENTOWN			1	_		1	
								PAGE TOTAL

638.79