

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report only if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF		CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>			
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>John William Reynolds</i>									
STREET ADDRESS <i>34 W. Elizabeth Ave.</i>									
CITY <i>Bethlehem</i>			STATE <i>PA</i>	ZIP CODE <i>18018 -</i>					
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION			
6TH TUESDAY PRE-PRIMARY 1		<i>Mayor of Bethlehem</i>			<i>D</i>	NO. DAY YEAR			
2ND FRIDAY PRE-PRIMARY 2						05 07 2013 TO 06 10 2013			
30 DAY POST-PRIMARY 3 <input checked="" type="checkbox"/>						FOR OFFICE USE ONLY			
6TH TUESDAY PRE-ELECTION 4						CASH BALANCE AT END OF REPORTING PERIOD: \$ <i>0</i>			
2ND FRIDAY PRE-ELECTION 5						TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <i>0</i>			
30 DAY POST-ELECTION 6						AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
ANNUAL REPORT 7						TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
If statement is filed on behalf of a Candidate, the Candidate must sign here.
If statement is filed on behalf of a Contributing Lobbyist, the Contributing Lobbyist must sign here.



MICHAEL D. RECCHIONI, NORTHAMPTON COUNTY
CITY OF BETHLEHEM, NORTHAMPTON COUNTY
MY COMMISSION EXPIRES JANUARY 9, 2017

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

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

MY COMMISSION EXPIRES _____ MO. DAY YR.

SIGNATURE OF CANDIDATE

PRINTED NAME

AREA CODE

DAYTIME TELEPHONE NUMBER

Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	Report Filed By (Mark X)	Candidate	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist <i>Friends of J. William Reynolds</i>						
Street Address <i>34 W. Elizabeth Ave.</i>						
City	<i>Bethlehem</i>	State	<i>PA</i>	Zip Code	<i>18018</i>	

Type of Report (Place x under report type)

1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6 th Tuesday Pre-Election	5- 2 nd Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)		<i>05/21/13</i>	Year	<i>2013</i>	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	<i>05/07/13</i>	<i>06/10/13</i>	
A. Amount Brought Forward From Last Report	\$	<i>19,313.96</i>	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	<i>12,731.00</i>	
C. Total Funds Available (Sum of Lines A and B)	\$	<i>32,043.96</i>	
D. Total Expenditures (From Schedule III)	\$	<i>31,192.09</i>	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	<i>851.87</i>	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	<i>0</i>	
G. Unpaid Debts and Obligations (From Schedule IV)	\$		

Affidavit Section

Part 1- 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 on paper, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

19th day of *June* *2013*

provisions of the Act of June 3, 1937 (P.L. 1333, NO. 320) as

MICHAEL D. RECCHIUTI, NOTARY PUBLIC
CITY OF BETHLEHEM, NORTHAMPTON COUNTY
MY COMMISSION EXPIRES JANUARY 9, 2017

2117

SCHEDULE I Contributions and Receipts

Detailed Summary Page

Filer Identification Number	
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1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor	
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Total for the reporting period (1)	\$	621.00
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2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)	
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Contributions Received from Political Committees (Part A)	\$	250.00
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All Other Contributions (Part B)	\$	310.00
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Total for the reporting period (2)	\$	3350.00
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3. Contributions Over \$250.00 (From Part C and Part D)	
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Contributions Received from Political Committees (Part C)	\$	0.00
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All Other Contributions (Part D)	\$	8760.00
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Total for the reporting period (3)	\$	8760.00
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4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)	
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Total for the reporting period (4)	\$	0
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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 Page 1, Report Cover Page, Item B)	\$	12,731.00
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PART B
All Other Contributions
\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.
(Exclude contributions from political committees reported in Part A.)

File Identification Number: _____

Full Name of Contributor				Date (MM/DD/YYYY)	Amount
Exelon PAC					250.00
House #	Street Address		City	Date (MM/DD/YYYY)	
	PO Box 805379		Chicago		
State	Zip Code			Date (MM/DD/YYYY)	
IL	60680				
Full Name of Contributor				Date (MM/DD/YYYY)	
House #	Street Address		City	Date (MM/DD/YYYY)	
State	Zip Code			Date (MM/DD/YYYY)	
Full Name of Contributor				Date (MM/DD/YYYY)	
House #	Street Address		City	Date (MM/DD/YYYY)	
State	Zip Code			Date (MM/DD/YYYY)	
Full Name of Contributor				Date (MM/DD/YYYY)	
House #	Street Address		City	Date (MM/DD/YYYY)	
State	Zip Code			Date (MM/DD/YYYY)	
Full Name of Contributor				Date (MM/DD/YYYY)	
House #	Street Address		City	Date (MM/DD/YYYY)	
State	Zip Code			Date (MM/DD/YYYY)	

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

File Identification Number

Full Name of Contributor		Louis S. Intile		Date (MM/DD/YYYY)	05/17/2013	250.00
House #	11	Street Address	Brandywine Ct	Date (MM/DD/YYYY)		
City	Whippany	State	NJ	Zip Code	07981	
Full Name of Contributor		Robert L. Hopkins		Date (MM/DD/YYYY)	05/08/2013	150.00
House #	726e	Street Address	W. Market St.	Date (MM/DD/YYYY)		
City	Bethlehem	State	PA	Zip Code	18018	
Full Name of Contributor		Anthony & Lois Arciszewski		Date (MM/DD/YYYY)	05/09/2013	100.00
House #	508	Street Address	Baltimore Street	Date (MM/DD/YYYY)		
City	Phillipsburg	State	NJ	Zip Code	08865	
Full Name of Contributor		Michael D. Ricchiuti, Law Office		Date (MM/DD/YYYY)	05/15/2013	250.00
House #	1502	Street Address	Center St. Suite 102	Date (MM/DD/YYYY)		
City	Bethlehem	State	PA	Zip Code	18016	
Full Name of Contributor		Diane Laura LaBelle		Date (MM/DD/YYYY)	05/15/2013	100.00
House #	54	Street Address	E Church St.	Date (MM/DD/YYYY)		
City	Bethlehem	State	PA	Zip Code	18018	
Full Name of Contributor		Peter Pott		Date (MM/DD/YYYY)	05/13/2013	250.00
House #	5309	Street Address	2nd Street	Date (MM/DD/YYYY)		
City	Whitehall	State	PA	Zip Code	18052	

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number						
Full Name of Contributor		Catherine Barr Heimbach		Date [MM/DD/YYYY]	05/14/2013	100.00
House #	Street Address	7066 Dusseldorf Square		Date [MM/DD/YYYY]		
City	State	Zip Code	Bethlehem PA 18017	Date [MM/DD/YYYY]		
Full Name of Contributor		Edward P. Morgan		Date [MM/DD/YYYY]	05/15/2013	100.00
House #	Street Address	925 Prospect Ave.		Date [MM/DD/YYYY]		
City	State	Zip Code	Bethlehem PA 18018	Date [MM/DD/YYYY]		
Full Name of Contributor		Jean E. Yasso		Date [MM/DD/YYYY]	05/17/2013	75.00
House #	Street Address	1413 W. Market Street		Date [MM/DD/YYYY]		
City	State	Zip Code	Bethlehem PA 18018	Date [MM/DD/YYYY]		
Full Name of Contributor		Randy & Suzanne Zitman		Date [MM/DD/YYYY]	05/17/13	150.00
House #	Street Address	105 Pluckeberry Rd.		Date [MM/DD/YYYY]		
City	State	Zip Code	Newfoundland PA 18445	Date [MM/DD/YYYY]		
Full Name of Contributor		Anthony & Valerie Biondi		Date [MM/DD/YYYY]	05/15/13	250.00
House #	Street Address	7116 Goldexis Lane		Date [MM/DD/YYYY]		
City	State	Zip Code	Northampton PA 18067	Date [MM/DD/YYYY]		
Full Name of Contributor		Lisa A. Pektor		Date [MM/DD/YYYY]	05/17/2013	250.00
House #	Street Address	11 West 2nd St. Unit 214		Date [MM/DD/YYYY]		
City	State	Zip Code	Bethlehem PA 18015	Date [MM/DD/YYYY]		

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

File Identification Number: [Redacted]

Full Name of Contributor				Date [MM/DD/YYYY]	
James Byszewski				05/17/2013	250.00
House #	Street Address			Date [MM/DD/YYYY]	
11e	University Ave				
City	State	Zip Code		Date [MM/DD/YYYY]	
Chatham	NJ	07928			
Full Name of Contributor				Date [MM/DD/YYYY]	
Amy Cramer				05/09/2013	100.00
House #	Street Address			Date [MM/DD/YYYY]	
413	West Market Street				
City	State	Zip Code		Date [MM/DD/YYYY]	
Bethlehem	PA	18018			
Full Name of Contributor				Date [MM/DD/YYYY]	
Michael Faccinotto				05/09/2013	150.00
House #	Street Address			Date [MM/DD/YYYY]	
320	W. Broad Street				
City	State	Zip Code		Date [MM/DD/YYYY]	
Bethlehem	PA	18018			
Full Name of Contributor				Date [MM/DD/YYYY]	
Donald Mites				05/13/2013	75.00
House #	Street Address			Date [MM/DD/YYYY]	
1814	Homestead Avenue				
City	State	Zip Code		Date [MM/DD/YYYY]	
Bethlehem	PA	18018			
Full Name of Contributor				Date [MM/DD/YYYY]	
Robert G. Vidoni				05/15/2013	60.00
House #	Street Address			Date [MM/DD/YYYY]	
555	Spring Street Apt 806				
City	State	Zip Code		Date [MM/DD/YYYY]	
Bethlehem	PA	18018			
Full Name of Contributor				Date [MM/DD/YYYY]	
Helene Whitaker				05/16/2013	100.00
House #	Street Address			Date [MM/DD/YYYY]	
1852	Main Street				
City	State	Zip Code		Date [MM/DD/YYYY]	
Bethlehem	PA	18017			

1852
735

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number: [Redacted]

Full Name of Contributor					Date [MM/DD/YYYY]	\$
Loren Speziale					05/17/2013	100.00
House #	Street Address				Date [MM/DD/YYYY]	\$
1322	Mutton Hollow Road					
City	State	Zip Code		Date [MM/DD/YYYY]	\$	
Stroudsburg	PA	18360				
Full Name of Contributor					Date [MM/DD/YYYY]	\$
Susan Bahnick					05/20/2013	250.00
House #	Street Address				Date [MM/DD/YYYY]	\$
185	Brookside Lane					
City	State	Zip Code		Date [MM/DD/YYYY]	\$	
Nazareth	PA	18064				
Full Name of Contributor					Date [MM/DD/YYYY]	\$
House #	Street Address				Date [MM/DD/YYYY]	\$
City	State	Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributor					Date [MM/DD/YYYY]	\$
House #	Street Address				Date [MM/DD/YYYY]	\$
City	State	Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributor					Date [MM/DD/YYYY]	\$
House #	Street Address				Date [MM/DD/YYYY]	\$
City	State	Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributor					Date [MM/DD/YYYY]	\$
House #	Street Address				Date [MM/DD/YYYY]	\$
City	State	Zip Code		Date [MM/DD/YYYY]	\$	

PART D
All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C)

Filer Identification Number: [Redacted]

Full Name of Contributor		Murat Guzel		Date [MM/DD/YYYY]	05/14/2013	1000.00
House #	Street Address	E. Union Blvd		Date [MM/DD/YYYY]		
City	State	Zip Code		Date [MM/DD/YYYY]		
Bethlehem	PA	18018				
Employer Name	Nimeks Organics		Occupation	owner		
Employer Mailing Address / Principal Place of Business	52 E. Union Blvd Bethlehem PA 18018					
Full Name of Contributor		Scott B. Reynolds		Date [MM/DD/YYYY]	05/17/2013	1000.00
House #	Street Address	Woodstock Drive		Date [MM/DD/YYYY]		
City	State	Zip Code		Date [MM/DD/YYYY]		
Bethlehem	PA	18018				
Employer Name	Aetna		Occupation			
Employer Mailing Address / Principal Place of Business	980 Jolly Road Blue Bell, PA 19422					
Full Name of Contributor		Stradley, Ronan, Stevens & Young		Date [MM/DD/YYYY]	05/10/2013	500.00
House #	Street Address	Market St. Suite 2600		Date [MM/DD/YYYY]		
City	State	Zip Code		Date [MM/DD/YYYY]		
Philadelphia	PA	19103				
Employer Name	Stradley, Ronan, Stevens & Young		Occupation	attorneys		
Employer Mailing Address / Principal Place of Business						
Full Name of Contributor		Leo & Wanda DeLong		Date [MM/DD/YYYY]	05/16/2013	500.00
House #	Street Address	Hidden Meadow Lane		Date [MM/DD/YYYY]		
City	State	Zip Code		Date [MM/DD/YYYY]		
Easton	PA	18049				
Employer Name	Bucks Development, owner		Occupation	developer		
Employer Mailing Address / Principal Place of Business	559 Main Street, Bethlehem, PA 18018					

\$3000

**PART D
All Other Contributions**

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C)

Filer Identification Number:

Full Name of Contributor		Raymond C. Yee			Date (MM/DD/YYYY)	05/16/2013	2,000.00
House #	Street Address	5380 Green Meadow Rd.			Date (MM/DD/YYYY)		
City	State	PA	Zip Code	18067	Date (MM/DD/YYYY)		
Employer Name				Occupation			
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor		Anthony D. Scaccia Jr.			Date (MM/DD/YYYY)	05/15/2013	1,000.00
House #	Street Address	3253 Honeysuckle Road			Date (MM/DD/YYYY)		
City	State	PA	Zip Code	18015	Date (MM/DD/YYYY)		
Employer Name	Allied Building Corporation			Occupation	President		
Employer Mailing Address / Principal Place of Business	574 Main Street Suite 200 Bethlehem, PA 18018						
Full Name of Contributor		Edward P. Roski			Date (MM/DD/YYYY)	05/22/2013	1,000.00
House #	Street Address	13191 Crossroads Parkway North Sixth floor			Date (MM/DD/YYYY)		
City	State	CA	Zip Code	91746	Date (MM/DD/YYYY)		
Employer Name	Majestic Realty			Occupation	Real estate		
Employer Mailing Address / Principal Place of Business	13191 Crossroads Parkway North, City of Industry CA						
Full Name of Contributor		James G. Petrucci			Date (MM/DD/YYYY)	05/22/2013	1,500.00
House #	Street Address	171 State Rt 173 # 201			Date (MM/DD/YYYY)		
City	State	NJ	Zip Code	08802	Date (MM/DD/YYYY)		
Employer Name	J.G. Petrucci Co Inc.			Occupation	attorney		
Employer Mailing Address / Principal Place of Business	22 S. Commerce Way Suite 7 Beth PA 18018						

5,800

PART D
All Other Contributions
Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C)

Filer Identification Number: [Redacted]

Full Name of Contributor		Robert G. Vidoni		Date [MM/DD/YYYY]	05/15/2013	\$	260.00
House #	555	Street Address	Spring Street	Date [MM/DD/YYYY]		\$	
City	Bethlehem	State	MA	Zip Code	0618	Date [MM/DD/YYYY]	\$
Employer Name	Diehrick Group Property Management		Occupation	principal, general council			
Employer Mailing Address / Principal Place of Business	5100 W. Tilghman Street Suite 320 Allentown PA 18104						
Full Name of Contributor				Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Employer Name			Occupation				
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor				Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Employer Name			Occupation				
Employer Mailing Address / Principal Place of Business							
Full Name of Contributor				Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Employer Name			Occupation				
Employer Mailing Address / Principal Place of Business							

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.

File Identification Number	
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Full Name	
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House #	Street Address
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City	State	Zip Code	Date [MM/DD/YYYY]
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Receipt Description	
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Full Name	
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House #	Street Address
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City	State	Zip Code	Date [MM/DD/YYYY]
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Receipt Description	
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Full Name	
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House #	Street Address
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City	State	Zip Code	Date [MM/DD/YYYY]
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Receipt Description	
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Full Name	
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House #	Street Address
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City	State	Zip Code	Date [MM/DD/YYYY]
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Receipt Description	
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Full Name	
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House #	Street Address
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City	State	Zip Code	Date [MM/DD/YYYY]
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Receipt Description	
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Full Name	
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House #	Street Address
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City	State	Zip Code	Date [MM/DD/YYYY]
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Receipt Description	
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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

Filer Identification Number	
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR

TOTAL for the reporting period	(1)	\$	0
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2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)

TOTAL for the reporting period	(2)	\$	0
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3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)

TOTAL for the reporting period	(3)	\$	0
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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, Report Cover Page, Item F)		\$	0
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SCHEDULE II
PART F
In-Kind Contributions Received
VALUE OF \$50.01 TO \$250

File Identification Number	
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Full Name of Contributor		Date (MM/DD/YYYY)	\$	
House #	Street Address	Date (MM/DD/YYYY)	\$	
City	State	Zip Code	Date (MM/DD/YYYY)	\$
Description of Contribution				

0

Full Name of Contributor		Date (MM/DD/YYYY)	\$	
House #	Street Address	Date (MM/DD/YYYY)	\$	
City	State	Zip Code	Date (MM/DD/YYYY)	\$
Description of Contribution				

Full Name of Contributor		Date (MM/DD/YYYY)	\$	
House #	Street Address	Date (MM/DD/YYYY)	\$	
City	State	Zip Code	Date (MM/DD/YYYY)	\$
Description of Contribution				

Full Name of Contributor		Date (MM/DD/YYYY)	\$	
House #	Street Address	Date (MM/DD/YYYY)	\$	
City	State	Zip Code	Date (MM/DD/YYYY)	\$
Description of Contribution				

Full Name of Contributor		Date (MM/DD/YYYY)	\$	
House #	Street Address	Date (MM/DD/YYYY)	\$	
City	State	Zip Code	Date (MM/DD/YYYY)	\$
Description of Contribution				

SCHEDULE III
Statement of Expenditures

Filer Identification Number [Redacted]

To Whom Paid	Markham Group			Date (MM/DD/YYYY)	05/08/13	\$	11,994.97
House #	1000	Street Address	W. 3rd Street	Description of Expenditure			
City	Little Rock	State	AK	Zip Code	72201	mail & postage	
To Whom Paid	KNBT Bank			Date (MM/DD/YYYY)	05/08/13	\$	25.00
House #	920	Street Address	W. Broad Street	Description of Expenditure			
City	Bethlehem	State	PA	Zip Code	18018	wire transfer fee	
To Whom Paid	KNBT Bank			Date (MM/DD/YYYY)	05/08/13	\$	57.00
House #	920	Street Address	W. Broad St.	Description of Expenditure			
City	Bethlehem	State	PA	Zip Code	18018	checks	
To Whom Paid	USPS			Date (MM/DD/YYYY)	05/08/13	\$	46.00
House #	535	Street Address	Wood Street	Description of Expenditure			
City	Bethlehem	State	PA	Zip Code	18016	stamps	
To Whom Paid	Dollar Tree			Date (MM/DD/YYYY)	05/09/13	\$	6.36
House #		Street Address		Description of Expenditure			
City	Bethlehem	State	PA	Zip Code	18018	misc. supplies	
To Whom Paid	Bethlehem Chapter of UNICO			Date (MM/DD/YYYY)	05/10/13	\$	50.00
House #		Street Address		Description of Expenditure			
City	Bethlehem	State	PA	Zip Code		ad in program book	
To Whom Paid	Paypal			Date (MM/DD/YYYY)	05/15/13	\$	5.00
House #	2211	Street Address	N. 1st Street	Description of Expenditure			
City	San Jose	State	CA	Zip Code	95131	payment, services	
To Whom Paid	Facebook			Date (MM/DD/YYYY)	05/15/13	\$	98.24
House #	15e	Street Address	University Ave	Description of Expenditure			
City	Palo Alto	State	CA	Zip Code	94301	ad promotions	

SCHEDULE III
Statement of Expenditures

Election Identification Number:			
To Whom Paid	USPS	Date (MM/DD/YYYY)	\$ 209.00
House #	535	Street Address	Wood Street
City	Bethlehem	State	PA
		Zip Code	18016
Description of Expenditure	stamps		
To Whom Paid	WFMZ	Date (MM/DD/YYYY)	\$ 3028.00
House #	300	Street Address	East Rock Road
City	Allentown	State	PA
		Zip Code	18103
Description of Expenditure	TV		
To Whom Paid	Exxon Mobile	Date (MM/DD/YYYY)	\$ 23.14
House #	1125	Street Address	N. Broad Street
City	Bethlehem	State	PA
		Zip Code	18018
Description of Expenditure	gas, travel expense		
To Whom Paid	Machs Guitte	Date (MM/DD/YYYY)	\$ 160.00
House #	713	Street Address	Linden Street
City	Bethlehem	State	PA
		Zip Code	18018
Description of Expenditure	campaign event		
To Whom Paid	Liberty Athletic Club	Date (MM/DD/YYYY)	\$ 100.00
House #	1115	Street Address	Linden Street
City	Bethlehem	State	PA
		Zip Code	18018
Description of Expenditure	golf contribution		
To Whom Paid	WFMZ	Date (MM/DD/YYYY)	\$ 2624.00
House #	300	Street Address	East Rock Road
City	Allentown	State	PA
		Zip Code	18103
Description of Expenditure	TV		
To Whom Paid	Votebuilder, NBPVAN, Inc.	Date (MM/DD/YYYY)	\$ 205.11
House #	48	Street Address	Grove Street Suite 202
City	Somerville	State	MA
		Zip Code	02144
Description of Expenditure	Robo-calls		
To Whom Paid	Intuit Website	Date (MM/DD/YYYY)	\$ 19.99
House #	2632	Street Address	Marino Way
City	Mountain View	State	CA
		Zip Code	94043
Description of Expenditure	website monthly fee		

SCHEDULE III
Statement of Expenditures

File Identification Number: _____

To Whom Paid	Hyatt Place			Date (MM/DD/YYYY)	05/21/13	\$	905.11
House #	45	Street Address	W. North Street	Description of Expenditure			
City	Bethlehem	State	PA	Zip Code	18018	election night party	
To Whom Paid	USPS			Date (MM/DD/YYYY)	05/20/13	\$	4.60
House #	535	Street Address	Wood Street	Description of Expenditure			
City	Bethlehem	State	PA	Zip Code	18016	stamps	
To Whom Paid	GJ Green-O'Brien			Date (MM/DD/YYYY)	05/19/13	\$	100.00
House #	53	Street Address	E. Lehigh Street	Description of Expenditure			
City	Bethlehem	State	PA	Zip Code	18018	dinner ticket	
To Whom Paid	Maggie Corber			Date (MM/DD/YYYY)	05/24/13	\$	1000.00
House #	526	Street Address	Prospect Ave.	Description of Expenditure			
City	Bethlehem	State	PA	Zip Code	18018	employee	
To Whom Paid	Laura Collins			Date (MM/DD/YYYY)	05/29/13	\$	1000.00
House #	529	Street Address	16th Ave	Description of Expenditure			
City	Bethlehem	State	PA	Zip Code	18018	employee	
To Whom Paid	Roosevelt's 21st			Date (MM/DD/YYYY)	06/03/13	\$	532.57
House #		Street Address	Elizabeth Ave	Description of Expenditure			
City	Bethlehem	State	PA	Zip Code	18018	campaign appreciation event	
To Whom Paid	Markham Group			Date (MM/DD/YYYY)	05/23/13	\$	4600.00
House #	160	Street Address	W. 3rd Street	Description of Expenditure			
City	Little Rock	State	AK	Zip Code	72201	mail & postage	
To Whom Paid	JEA Polling & Strategic Design			Date (MM/DD/YYYY)	05/24/13	\$	5000.00
House #	7790	Street Address	Andora Drive	Description of Expenditure			
City	Sarasota	State	FL	Zip Code	34238	polling	

SCHEDULE IV

Statement of Unpaid Debts

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Filer Identification Number: _____

Name of Creditor				Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)		\$
City	State	Zip Code		
Description of Debt				

Name of Creditor				Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)		\$
City	State	Zip Code		
Description of Debt				

Name of Creditor				Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)		\$
City	State	Zip Code		
Description of Debt				

Name of Creditor				Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)		\$
City	State	Zip Code		
Description of Debt				

Name of Creditor				Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)		\$
City	State	Zip Code		
Description of Debt				

Name of Creditor				Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED (MM/DD/YYYY)		\$
City	State	Zip Code		
Description of Debt				