Commonwealth of Pennsylvania - Campaign Finance Report (Note: This report must be clear and legible. It should be typed)

Filer Identification		Report Filed		ate	Committee		Lobbyist			
Number		(Mark X)	10.00		H 40 H					
Name of Filing Committee, Candida Lobbyist	ite or	Friends of Michael D. Recchiuti								
Street Address		P.O. Box 202								
City Bethlehem			State	PA	Zip Code	18016				
	h drum of						*			
Type of Report (Place x under report			1 22			20				
1- 6 th Tuesday 2- 2 nd Friday 3- 30 Pre-Primary Pre-Primary Prim		१- 6 th Tuesda Pre- Election	145 CON	(3)	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election			
	$\overline{\mathbf{X}}$									
Date Of Election (MM/DD/YYYY)	/19/15	Year	2015	Amendment Report		Termination Report				
			Marine Service	перы	السسا					
Summary of Receipts and Expenditures From	m Date	To Da	6/8/2015		For	Office Use Only				
A. Amount Brought Forward From I	5/5/2015 ast Report	1\$	10732.00		-V					
B. Total Monetary Contributions an	d Receipts	\$	2275.00	-						
(From Schedule I) C. Total Funds Available		\$	2275.00							
(Sum of Lines A and B)		7	13007.00							
D. Total Expenditures		\$	5849.59							
(From Schedule III) E. Ending Cash Balance		\$		-						
(Subtract Line D from Line C)			7157.41							
F. Value of In-Kind Contributions Re (From Schedule II)	ceived	\$	3901.33							
G. Unpaid Debts and Obligations (From Schedule IV)		\$	0.00				4			
			Affidavit S							
Part 1- If this is a Committee report, trea I swear (or affirm) that this report, include					den and balint s					
Sworn to and subscribed before me this	ing the attach	ieu scrieuuies	on paper, is to the	e best of my knowled	age and benefit	rue, correct and comple	rte.			
			All Labor							
θ										
My										
Part										
SWear (or arming that to the		HALL S	Park Sacret	The state of the s			0) as			
amended.	10 15 15			Value de la companya						
Swar										
-										
Mu C										
My C	County									
My Commission Expires Feb. 1. MEMBER, PENNSYLVANIA ASSOCIATION	, 2010									

SCHEDULE I

Contributions and Receipts

Detailed Summary Page

Filer Identification Number	Friends of Michael D. Recchiuti			100
1.Unitemized Contribution	s and Receipts-\$50.00 or Less per Contributor			
	Total for the reporting period	(1)	\$	325.00
2. Contributions of \$50.01 Part A and Part B)	to \$250.00 (From		A COMP	
Contributions Received from	n Political Committees (Part A)		\$	0.00
All Other Contributions (Par	t B)		\$	450.00
	Total for the reporting period	(2)	\$	450.00
3. Contributions Over \$250	0.00 (From Part C and Part D)			
Contributions Received from	n Political Committees (Part C)		\$	0.00
All Other Contributions (Par	t D)		\$	1500.00
	Total for the reporting period	(3)	\$	1500.00
4. Other Receipts-Refunds,	Interest Earned, Returned Checks, ETC. (From Part E)			
, i,	Total for the reporting period	(4)	\$	0.00

2275.00

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)

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:			11.	
	Friends of Michael D. Recchiuti			

Full Nan	F			-15		The state of the s	1 4	Section of the sectio
	ne of Contributor	110000000000000000000000000000000000000				Date [MM/DD/YYYY]	\$	250.00
		Herman and Clair Rij				5/7/2015		250.00
House #	2705 Str	eet Address Bridle Pa	th Place			Date [MM/DD/YYYY]	\$	
City	Bethlehem	Sta	PA PA	Zip Code	18017	Date [MM/DD/YYYY]	\$	
Full Nan	ne of Contributor					Date [MM/DD/YYYY]	\$	
		Richard Master				2/20/15		200.00
House #	250 Stre	eet Address E. Macad	la Road			Date [MM/DD/YYYY]	\$	
City	Bethlehem	Sta	PA PA	Zip Code	18017	Date [MM/DD/YYYY]	\$	
Full Nam	ne of Contributor		Mari			Date [MM/DD/YYYY]	\$	
House #	Str	eet Address	•			Date [MM/DD/YYYY]	\$	
City	1.00	Sta	ite	Zip Code		Date [MM/DD/YYYY]	\$	
Eull Nor		THE REAL PROPERTY AND ADDRESS OF THE PARTY.						
run wam	ne of Contributor					Date [MM/DD/YYYY]	\$	
		eet Address	Per VI			Date [MM/DD/YYYY] Date [MM/DD/YYYY]	\$	
House #		eet Address Sta	te	Zip Code				
House #			ite	Zip Code		Date [MM/DD/YYYY]	\$	
House #	Stre ne of Contributor		te	Zip Code		Date [MM/DD/YYYY] Date [MM/DD/YYYY]	\$	
House # City Full Nam	Stre ne of Contributor	Sta		Zip Code		Date [MM/DD/YYYY] Date [MM/DD/YYYY] Date [MM/DD/YYYY]	\$	
House # City Full Nam House #	Stre ne of Contributor	Sta				Date [MM/DD/YYYY] Date [MM/DD/YYYY] Date [MM/DD/YYYY]	\$ \$	
House # City Full Nam House #	Street St	Sta				Date [MM/DD/YYYY] Date [MM/DD/YYYY] Date [MM/DD/YYYY] 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:				
CONTRACTOR OF THE	Friends of Michael D. Recchiuti			ŀ
		*//	 11.00	

Full Nam	ne of Contrib	utor				WW. 85		Date [MM/I	ועעעע/חנ	\$	
			Sean Boyle			179 INC H 70		5/11/		1	500.00
House #		Stree	et Address	The Value				Date [MM/D	DD/YYYY]	\$	
	2516			Ludwig Ct							8
City	L			State	PA	Zip Code	18062	Date [MM/D	DD/YYYY]	\$	
Employe	r Name	et prin		Boyle Constru	ction	00 10 15 15		Occupation	President		
	er Mailing Ad I Place of Bus		1		*	entown, PA 18104	*			*****	
	e of Contrib							Date [MM/D	D/YYYY]	\$	
			Lewis Ronca	a				5/18			1000.00
House #		Stree	et Address		-		- W	Date [MM/D	D/YYYY]	\$	
	179			Mikron Rd.				-			
City	Bethlehem			State	PA	Zip Code	18020	Date [MM/D	D/YYYY]	\$	
Employe	r Name			MF Ronco & S	ons		-	Occupation	President/O	wner	
	r Mailing Add			179 Mikron Ro	d. Bethlel	nem, PA 18020	-1-11-2300000				· · · · · · · · · · · · · · · · · · ·
Full Nam	e of Contribu	utor		прека пре			, = = :-	Date [MM/D	D/YYYY]	\$	
House #		Stree	et Address				Warren 2	Date [MM/D	D/YYYY]	\$	11
City				State		Zip Code		Date [MM/D	D/YYYY]	\$	
				11201114		STATE OF STATE OF					
Employe				W				Occupation			- 1
	r Mailing Add Place of Busi				75-05				320 101		
	e of Contribu			11-500-110-1-1				Date [MM/D	D/YYYY]	\$	
House #		Stree	t Address	3				Date [MM/D	D/YYYY]	\$	
City	T)			State		Zip Code		Date [MM/D	D/YYYY]	\$	
					(n)				NAME OF THE OWNER O		newonaties and a section
Employer	Name							Occupation			
	Mailing Add						- 000 - 10 - 00 - 00 - 00 - 00 - 00 - 0	Language			

SCHEDULE !!

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECIEVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD DETAILED SUMMARY PAGE

Filer Identification Number:	
	B + State N
UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50	D.00 OR LESS PER CONTRIBUTOR
TOTAL for the reporting period (1)	\$
2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.	00 (FROM PART F)
TOTAL for the reporting period (2)	\$
3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM	/I PART G)
TOTAL for the reporting period (3)	\$ 3901.33
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)	\$

SCHEDULE II Part G

In-Kind Contributions Received

VALUE OVER \$250

Filer Identifica	ation Number:				OVER \$250		* * *		
- 22.41	2 - 2 - 2 - 2 - 2 - 2	-			Marketon and				
Full Name or	of Contributor	1	Democratic Part			Date [MM/DD		\$	3901.33
		1.	Democratic run.	y 		5/14/2			
House #		eet Address	State St.			Date [MM/DD)/YYYY]	\$	E. E
City Harris	isburg		State PA	Zip Code	17101	Date [MM/DD)/YYYY]	\$	
Employer Na	ame					Occupation			
Place of Busin		/ Principal		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Description of Contribution	Design Pr	rodcutii	on, Mailhouse & Posta
Full Name of	Contributor					Date [MM/DD	D/YYYY]	\$	
House #	Stre	eet Address				Date [MM/DD	- AAAVV1	Ś	
HUUSE #	Street	et Address	#E			Date [www/DD	YYYYI	- 3	
City		1	State	Zip Code		Date [MM/DD	/YYYY]	\$	
Employer Na	ime		10			Occupation			
Place of Busin		/ Principal				Description of Contribution			
Full Name of	Contributor					Date [MM/DD	/YYYY]	\$	
House #	Stree	et Address	45		1000 1000 1000 1000 1000 1000 1000 100	Date [MM/DD	·/YYYY]	\$	-
City			State	Zip Code		Date [MM/DD	/YYYY]	\$	ar ar
Employer Nan	me				<u>A</u>	Occupation		J 8	
Employer Mai Place of Busin	ailing Address / ness	/ Principal				Description of Contribution		2	
Full Name of (Contributor					Date [MM/DD/	/YYYY]	\$	
House #	Stree	et Address				Date [MM/DD/	/YYYY]	\$	
City	Parit		State	Zip Code		Date [MM/DD/	<u>/YYYY]</u>	\$	
Employer Nam	me			- A Es		Occupation			
Employer Mail Place of Busine		Principal			-10-50	Description of Contribution			

SCHEDULE III

Statement of Expenditures

Filer Identification Number:			
	Friends of Michael Recchiuti		
transport of a second control of the second			

To W	hom Paid		S = 4 1		(C) U = 33	GILL II II KER	Date [MM/DD/YYYY]	\$	
		Pennsylvania Dem	ocratic Party		S - 2 - 11 - 11		5/7/2015	1	4590.00
Hous	e# 229	Street Address	State St.	**	= 1		Description of Expend	iture	
City	Harrisburg		State	PA	Zip Code	17101	Third Mail Piece Payment		2022
To W	hom Paid	National Penn Ban	k				Date [MM/DD/YYYY]	\$	25.00
Hous	o #	Street Address	-		· ·		5/7/15 Description of Expendi	1	
rious	- "	Street Address			29 1		Description of Expendi	ture	
City	-	33 <u>14</u> M 97	State		Zip Code	1	Wire Fee	* ATAE	
To W	hom Paid						Date [MM/DD/YYYY]	\$	
		Friends ofMatt Mc	Kernan				5/8/15		250.00
House	e #	Street Address	Easton Ave	541.	3.1700,175		Description of Expendi	ture	
City	Bethlehem		State	PA	Zip Code	18017	Contribution		
To W	nom Paid			* ***	***************************************		Date [MM/DD/YYYY]	\$	
		GJ Green-Obrien					5/8/15	19	100.00
House	#	Street Address	Lehigh St.	4.50			Description of Expendit	ture	
City	Bethlehem		State	PA	Zip Code	18018	Ad inProgram		
To W	nom Paid					7 1/200	Date [MM/DD/YYYY]	\$	
		Paypal.com			*.		5/10/15		7.55
House	#	Street Address	*				Description of Expendit	ture	
City	-		State		Zip Code		Online Contribution Fee		
To Wh	om Paid	CDEC		Λ.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Waller	Date [MM/DD/YYYY]	\$	
		CPEC	0.63				5/14/15		197.32
House	#	Street Address	PO Box 465	15.00	2 7		Description of Expendit	ure	
City	State Colleg	e	State	PA	Zip Code	16804	Robo Call		
To Wh	om Paid				4.400 A. O. B.	***************************************	Date [MM/DD/YYYY]	\$	
		CPEC			1		5/20/15		210.96
House	#	Street Address	PO Box 465		*		Description of Expendit	ure	
City	State College	2	State	PA	Zip Code	16804	Robocall		
To Wh	om Paid	Style You Need			0.000 E		Date [MM/DD/YYYY]	\$	90.62
		1 3,12 123 1423					5/12/15		30.02
House	#	Street Address	3rd Street				Description of Expendit	ure	
City	Bethlehem		State	PA	Zip Code	18015	T-Shirts for Campaign Volunt	teers	

SCHEDULE III

Statement of Expenditures

	And the Principle of the Control of				
Filer Identification Number:			10000	10	
	Friends of Michael Recchiuti	8			
	A VERSON IN THE TOTAL OF THE TO				

To W	hom Paid				***************************************	10.70 10.00	Date [MM/DD/YYYY]	\$		
		Tanczo's Beverage	e				5/17/2015		141.37	
House	e #	Street Address	Jacksonville I	Road	-		Description of Expend	iture		
City	Bethlehem		State	PA	Zip Code	18017	Beverages for Election Resu	ılts W	atch Party	
To Wi	hom Paid	Tanczo's Beverage	2				Date [MM/DD/YYYY] 5/19/2015	\$	5.98	
House	e#	Street Address	Jacksonville I	Road			Description of Expendi	ture		
City	Bethlehem		State	PA	Zip Code	18017	Ice		***************************************	
To Wi	nom Paid	Wegman's					Date [MM/DD/YYYY] \$ 16.18			
House	#	Street Address	Wegman's Dr	ive	***************************************		Description of Expendi	ture		
City	Bethlehem	- I.e.	State	PA	Zip Code	18017	Food for Elections Results V	Vatch	Party	
To Wh	nom Paid	Fratelli Pizza					Date [MM/DD/YYYY] 5/19/2015	\$	94.99	
House	#	Street Address	N. New Stree	t	20000	· · · · · · · · · · · · · · · · · · ·	Description of Expendi	ture		
City	Bethlehem		State	PA	Zip Code	18018	Pizza/Food for Election Res	ults V	Vatch Party	
To Wh	om Paid	Billy's Downtown I	Diner				Date [MM/DD/YYYY] 5/19/2015	\$	48.14	
House	#	Street Address	E. Broad Stree	et			Description of Expendit	ture		
City	Bethlehem		State	РА	Zip Code	18018	Breakfast Meeting			
To Wh	om Paid	Facebook.com					Date [MM/DD/YYYY] 5/20/15	\$	50.03	
House	#	Street Address				elen –	Description of Expendit	ure		
City			State		Zip Code		Online Ads			
To Wh	om Paid	Facebook.com					Date [MM/DD/YYYY] 5/31/15	\$	21.45	
House	#	Street Address			93		Description of Expendit	ure		
City			State		Zip Code		Online Ads			
To Who	om Paid						Date [MM/DD/YYYY]	\$		
House	#	Street Address					Description of Expendit	ure		
City			State		Zip	T				

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.

LER IDENTIFICATION				REPORT FII ON BEHALF		CANDIDATI	'\	COMMITTEE	2	LOBBYIST
AME OF FILING COMMITTEE, CANE Michael	D. Recch	iuti								
1477 M	Tonocacy 5/									
Bethleher	1.			STATE			1 .	8018		-
(CHECK ONE)	Bethelm (./	ודצום	RICT NO.	DEI	b	MO.	DAY	
TH TUESDAY	- Setulation C	MO. DAY YE		MO. DAY	YEAR		1	FOR	OFFICE U	SE ONLY
ND FRIDAY RE-PRIMARY	DATES OF REPORTING PERIOD	5 5 /5	7,	68	15					
0 DAY OST-PRIMARY	CASH BALA	NCE AT END		· · · · · · · · · · · · · · · · · · ·).c	<u> </u>	7			
TH TUESDAY RE-ELECTION		ING PERIOD:	s	\$	<i>)-</i> -					
ND FRIDAY RE-ELECTION	OUTSTANDI	NG DEBTS OR	LIABILITIES		2-0	10				
0 DAY		AMENDMENT REPORT?	'ES	NO			1			
	i									
NNUAL 7.		TERMINATION	'ES	NO						
NNUAL 7. EPORT	behalf of a Poli	TERMINATION REPORT?	AFFIDA	VIT SEC			Le Tres	agurer mu	set eign	n here
RT I - tatement is filed on tatement is filed on tatement is filed on	behalf of a <u>Can</u> behalf of a <u>Con</u>	tical Committed didate, the Catributing Lobb	AFFIDA ee or Can andidate in yist, the	vit sec didates's must sign Lobbyist r	Comi here. must s	mittee, the sign here	st sign	n here.		
RT I - tatement is filed on tatement is filed on tatement is filed on tatement is filed on SVEAR (OR AFFIRM) JUNE 3, 1937 (P.L. 1	behalf of a Can behalf of a Can behalf of a Can hat to the Best of a 333, No. 320) as an	tical Committed didate, the Catributing Lobb	AFFIDA ee or Can andidate in yist, the	vit sec didates's must sign Lobbyist r	Comi here. must s	mittee, the sign here	st sign	n here.		
RT I - tatement is filed on tatement is filed on tatement is filed on tatement is filed on statement is filed on tatement is filed on sylvear (or affirm) - June 3, 1937 (P.L. 1)	behalf of a Can behalf of a Can behalf of a Can hat to the Best of a 333, No. 320) as an	tical Committed didate, the Catributing Lobb	AFFIDA ee or Can andidate in evist, the in orized Co	vit sec didates's must sign Lobbyist r	Comi here. must s	date mu	st sign	n here.		
RTI- tatement is filed on tatement is filed on tatement is filed on tatement is filed on syear (or affirm) June 3, 1937 (P.L. 1	behalf of a Can behalf of a Can THAT TO THE BEST OF M 333, No. 320) AS AN	tical Committed didate, the Catributing Lobb didate's Author AT KNOWLEDGE AND AENDED.	AFFIDA ee or Can andidate in evist, the in orized Co	vit sec didates's must sign Lobbyist r	Comi here. must s	date mu	st sign	n here. ANY PROVISIO		