307806

Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identific Number :	ation 201	80371			Repo Filed		CAN	DIDÁTE	T	COM	etimes.	1	LOS	SYIST	
Name of Filing	Committee, Candi	data or i	obbylate	i i	FRIEN	DS OF	BRYAN	CALLA	HAN						
Street Address	633 MAIN ST		K												
City:	BEHTLEHEM						States	PA			Zip Cor	ler 1	8018-3	3801	
TYPE OF REPORT	GTH TUESDAY PRE-PREMARY	1.	2ND FRII PRIMARY	DAY PRE-	2.	30 D PRIM		POST-	3,)		AMENDA REPORTA	ENT	Yes	No	V
(place X to the right of	OTH RUESDAY PRE-ELECTION	4.	20 Fill Dischor	MY PRE	5.	30 D	AY TION	POST-	6.		TERMINA REPORT?	TEON	Yes	No	y
report type)	ANNIAL REPORT	7.	Year 201	.9			CHECK CHECK				PAPER		1	DISKE	TE
Name of Office	Sought by Candida	ster					DATE	OF ELE	CTI	ON	District Number	Office	Pa	ty Code	County
							100	DAY	Y	JAR .			DE		48
							1	.1	5	2019		(MEN 100	певег	DIES FOR C	30 6 5)
Summary of Expanditure	Receipts and	MO	DATA	YEAR			Mo	DAY	Y	EAR	FOI	R OFFIC	E USE	ONLY	
			5	7 20:	19 7	ГО		6	10	2019					
A. Amount Br	ought Forward Free	n Laut R	sport			\$			18	575.10	Ī				
B. Total Mone	tary Contributions	And Rec	elpts (Pro	m Schod	ule I)					300.00					
C. Total Funda	Available (Sum Of	Lines A	and B)			\$			22.1	375.10					
D. Total Exper	nditures (From Sch	edule III	ŋ			\$			_	59.96					
E Ending Cas	h Balance (Subtrac	Line D	From Line	C)		+				15.14					
F. Value Of In-	Kind Contributions	Receive	ed (From S	Scheduje	11)	\$			20,2	0.00					
The second secon	its And Obligations	The second name of the second				\$				0.00					

	The second secon	
	AFFIDAVIT SECTION	
PART L- If this is a Committee report, from	Marker Migro Briese, 19 thins join Committation region, comm	
	The state of the s	ms, are to the best of any knowledge and belief , true
		对于自己的第三人称单数的
		经过程的企业,企业的发展的基础的 。
Part Cold (British)		
	The state of the s	
		The second secon

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reportin	g Period		
FRIENDS OF BRYAN CALLAHAN	Prom:	5/7/20	19 To:	6/10/2019
1. Uniterrized 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)			\$	3,800.00
All Other Contributions (Part D)			\$	500.00
TOTAL for the Reporting	Period	(3)	\$	4,300.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	Period	(4)	•	0.00
Total Honetzry Contributions and Receipts During this Reporting Period (Add and totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pag	enter amo	unt	\$	4,300.00

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

Wil	un am aggregate val	ue from \$50.01 to	o \$2!	50.00	0 in the	report	ing p	period.
Name of Piling Committee	e or Candidate		Rep	orting	Period			
			Fron	n:		To	R	
					DATE			AMOUNT
Full Name of Contributing C	ommittee					1		
				MO	DAY	YEAR		
Hailing Address			+					
							\$	0.00
City	State	Zip Code (Plus 4	9					
								DAGE TOTAL

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

PAGE TOTAL 0.00

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 Candida	ta		Reg	porting P	eriod			
			Pro	a:		T	ò:	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

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								
			Reportin	g Period				
FRIENDS OF BRYAN CALLAHAN			From:	5.	/7/2019	To:		6/10/2019
				DJ	אדפ			AMOUNT
Full Name of Contributing Committee Friends of Carol Ritter				МО	DAY	YEAR		
Mailing Address 419 Dewberry Ave							-	3,800.00
City Bethlehem	State	Zip Cod	e (Plus 4)	5	28	201	9	-
	PA	18017						
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	imary Pa	ge, Sectio	n 3.			\$	PAGE TOTAL
							T	3,800.00

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	11				a seed			
			Rep	orting Pe	riod			
FRIENDS OF BRYAN CALLAHAN			Free	: I	5/7/2	019 To	×	<u>6/10/2019</u>
				D	ATE		AMO	UNT
Full Name of Contributor						1		
Dominic Villani				MO	DAY	YEAR		
Mailing 737 7th Ave							-	
				_			\$	500.00
City Bethlehem	State	Zip Code (Plus	4)	5	16	2019		
	PA	18018						
Employer Name None				Occupat	ion R	etired	<u>. t </u>	
Employer Mailing Address/Principal Plac Business	e of	City		<u>. </u>	State		Zip Code (1	Pius 4)
NA		NA NA			PA		18018	
Enter Grand Total of Part C on Scher	fule I, Detailed Su	mmary Page, :	Sectio	n 3.			PAG	TOTAL
						*	i	500.00

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 the second seco									
Name of Filing Committee or Candidate			Report	ing Peri	od				
			From;			To:			
				8	ATE			AMOUNT	
Full Name				МО	DAY	YEAR			
Mailing Address								•	0.00
City	State	Zip Code (1	fus 4)						
Receipt Description						<u> </u>			
Enter Grand Total of Part E on Schedu	le L Detailed Summ	serv Page	Section	4				PAGE TOTA	ML.
	·	,		••			\$		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 Perio	ed .	
FRIENDS OF BRYAN CALLAHAN	Prom:	5/7/2019 To:	6/10/2019
1. UNITERIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS F	ER CONTRIBUTOR		
TOTAL for the Reporting Po	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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, 1	Add and enter Item F.)	*	0.00

SCHEDULE II PART F

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reportin	g Period			
			From:			To:	
				DATE		АМ	OUNT
Full Name of Contributor		•	МО	DAY	YEAR		
Hailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sched	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	e, [PAG	E TOTAL
Section 2.				_	•		0.00

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

Name of Filing Committee or Candidate					1					
wante of raing Commission of Candidate	1				Re	porting i	Period			
					Fre	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									*	0.00
City	State		Zip Code(I	Pius 4)						
Employer of Contributor						Occupat	tion	<u>. </u>	<u> </u>	
Employer Mailing Address/Principal Pied Business	ce of	City		State		21p 4)	Code(Plus	Descrip	ption of	Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	n-Kind (Contributi	ons De	talle	ad			<u> </u>	PAGE TOTAL 0.00
								I		1

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidat	•		Report	ing Period			
FRIENDS OF BRYAN CALLAHAN			From	5/	7/2019	To:	<u>6/10/2019</u>
				DATE			AMOUNT
To Whom Paid Freedom High School Football Booster	s		МО	DAY	YEAR		
Mailing Address Chester Ave			5	28	2019	*	440.00
City Bethlehem	State	Zip Code (Plus 4)	Descri	ption of Exp			
	PA	18015		ndraiser S			
To Whom Paid Friends of Grace Crampsie Smith			МО	DAY	YEAR		
4ailing Address 3034 Westminster			5	13	2019	\$	200.00
Sty Bethlehem	State	Zip Code (Plus 4)	Descrip	tion of Exp	on Brown		
	PA	18017	Donatio				
'o Whom Paid he Morning Call			МО	DAY	YEAR		
latting Address 101 N 6th St			5	9	2019	\$	19.96
aty Allentown	State PA	Zip Code (Plus 4) 18105	Descrip Subscri	tion of Exp ption	enditure		
o Whom Paid riends of Carol Ritter			МО	DAY	YEAR		
ailing Address 419 Dewberry Ave			5	12	2019	\$	4,000.00
ity Bethlehem	State	Zip Code (Plus 4)	Departm	ion of Exp	and House		
	PA	18017		Campaign		tee	
nter Grand Total of Expanditures o	n Page 1, Report Co	ver Page. Item D					PAGE TOTAL
						\$	4,659.96