Commonwealth of Pennsylvania



County of NITHANPTON

Reset Form Print Form

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

Filer Identification Number		•	rt Filed E rk X)	Sý Candida	ite 🔨	Committee		Lobbyist
		ivia						
Name of Filing Committee, Ca Lobbyist	indidate or		Gra	ce (r.	ampsie train A	Smith.		
Street Address			140	3 60	rain A	l' C		
City	Bethlehen	~	_[State	PA	Zip Code	18018	
Type of Report (Place x under								
1-6 th Tuesday 2-2 nd Friday	3- 30 Day Post 4-	6 th	Tuesday	5- 2 nd Friday	6- 30 Day Post	7- Annual	Special 2 nd Friday	Special 30 Day
Pre-Primary Pre-Primary	Primary Pr	re- E	lection	Pre- Election	Election		Pre-Election	Post-Election
Date Of Election	Y	(ear			Amendment		Termination	[]
(MM/DD/YYYY)					Report		Report	
Summary of Receipts and	From Date		To Date	3		For	Office Use Only	
Expenditures	2/1/0	+		10				
	2/19/19		510	e /19				
A. Amount Brought Forward F	From Last Report	\$	(2				
B. Total Monetary Contribution	ons and Receipts	\$						
(From Schedule I)			C					
C. Total Funds Available		\$	0	1				
(Sum of Lines A and B)			0					
D. Total Expenditures		\$	1.	46 06				
(From Schedule III)			1, 0	00.06				
E. Ending Cash Balance		\$		0				
(Subtract Line D from Line C)				V				
F. Value of In-Kind Contribution	ons Received	\$		4				
(From Schedule II)				6				
G. Unpaid Debts and Obligation	ons	\$	1	5				F = 0
(From Schedule IV)			L					Michin
State of the	and the second s	-	and the second s	All Luca	abian			E 8 E

SCHEDULE I **Contributions and Receipts**

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Detailed Summary Page

Filer Identification Number		
1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor	-	
Total for the reporting period (1)	\$	
2. Contributions of \$50.01 to \$250.00 (From		
Part A and Part B)		
Contributions Received from Political Committees (Part A)	\$	
All Other Contributions (Part B)	\$	
Total for the reporting period (2)	\$	
3. Contributions Over \$250.00 (From Part C and Part D)		
Contributions Received from Political Committees (Part C)	\$	
All Other Contributions (Part D)	ŝ	
Total for the reporting period (3)	\$	
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)		
in onio, necesso netanas, interest carned, netanieu checks, Ere. (From Part e)		
Total for the reporting period (4)	\$	
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 A **Contributions Received From Political Committees**

 ${\cal R}={\cal Q}$

\$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.

Filer Id	entification Number				
0.000					Amount
Full Na Comm	me of Contributing			Date [MM/DD/YYYY]	\$
Comm	ITTEE	ļ			
House	# Street	Address		Date [MM/DD/YYYY]	\$
City	T	State	Zip Code	Date [MM/DD/YYYY]	\$
			Lip over	Date [mm] DD1111]	Ş
Full Na	me of Contributing	· · · · · · · · · · · · · · · · · · ·		Date [MM/DD/YYYY]	\$
Comm				and fund as i to i	Ŷ
House	# Street	Address		De la fasa (pp hound	
House	" Jueer	Address		Date [MM/DD/YYYY]	\$
- C'14			· · · · · · · · · · · · · · · · · · ·		
City		State	Zip Code	Date [MM/DD/YYYY]	\$
E. R. Ma	to the				
Full Na Commi	me of Contributing ttee			Date [MM/DD/YYYY]	\$
House	# Street	Address		Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
	me of Contributing			Date [MM/DD/YYYY]	\$
Commi					
House	# Street	Address		Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Na	me of Contributing			Date [MM/DD/YYYY]	\$
Commi				and fund and the f	,
House	f Street				
110456	Street	Address		Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Na Commi	me of Contributing			Date [MM/DD/YYYY]	\$
House	f Street	Address		Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$

All Other Contributions

\$50.01 TO \$250

S = S C

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

 Date [MM/DD/YYYY]

House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Co	ntributor			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Co	ntributor	State Zip Code eet Address Zip Code eet Address Zip Code eet Address Zip Code State Zip Code State Zip Code eet Address Zip Code State Zip Code State Zip Code State Zip Code State Zip Code		Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City	I	State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Co	ntributor			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Cor	itributor			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Cor	itributor			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$

PART C Contributions Received From Political Committees

Over \$250.00

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Use this Part to itemize only contributions received from Political Committees with an aggregate value over \$250.00 in the reporting period.

Filer Identification	Number:				
Full Name of Contributing Co	mmittee			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
					-
Full Name of	The second second			Date [MM/DD/YYYY]	\$
Contributing Cor	nmittee				
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Sec.	14.1				
Full Name of				Date [MM/DD/YYYY]	\$
Contributing Cor	nmittee				
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
				Date [wiw/DD/1111]	,
Full Name of				Date [MM/DD/YYYY]	\$
Contributing Con	nmittee				
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
1			2.19 6046	Date [MM/DD/1111]	, ,
Full Name of				Date [MM/DD/YYYY]	\$
Contributing Con	nmittee				
House #	Street Address			Date [MM/DD/YYYY]	\$
1.1.1.1	Contract of			Jaco [mini/DJ/1111]	
City		State	Zip Code	Date [MM/DD/YYYY]	\$
1.15			Lip coue	Date [MMVDD/T1T1]	
Full Name of	1.507.5			Date [MM/DD/YYYY]	\$
Contributing Com	ımittee				
House #	Street Address			Date [MM/DD/YYYY]	\$
141.8	120000			Bate [win/ bb/ 1111]	Ŷ
City		State	Zip Code	Date [MM/DD/YYYY]	
uncy (Julie	zip code		\$
- Carlos		1.00	12 11 13 M 12 1		63

PART E

 $\sim \infty$

Other Receipts

REFUNDS, INTREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Full Name				
~				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	on			
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	on			
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	on			
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	n			
Full Name	duf e			
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Descriptic	on			
Full Name				
House #	Street Address	,.		
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Descriptio	on		I	

SCHEDULE II 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:	

1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEI	VED-VALUE OF \$50.00 OR LESS PER CONT	RIBUTOR
TOTAL for the reporting period (1)	\$	
2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE O	F \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the reporting period (2)	\$	
3. IN-KIND CONTRIBUTION RECEIVED-VALUE OV	ER \$250.00 (FROM PART G)	
TOTAL for the reporting period (3)	\$	
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING TH	S REPORTING S	
PERIOD (Add and enter amount totals from boxes 1, 2, on Page 1, Report Cover Page, Item F)		

. SCHEDULE II PART F **In-Kind Contributions Received**

• •

VALUE OF	\$50.01	TO \$250
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Full Name of C	ontribut				
i di Marie di C	ontributor			Data (Basa (DD to the	
				Date [MM/DD/YYYY]	\$
House #	Street Address	5			
				Date [MM/DD/YYYY]	\$
City		State			
		olute	Zip Code	Date [MM/DD/YYYY]	\$
escription of (Contribution				
ull Name of Co	ntributor			Data Museum	
				Date [MM/DD/YYYY]	\$
ouse #	Street Address				
				Date [MM/DD/YYYY]	\$
ty		State			
		State	Zip Code	Date [MM/DD/YYYY]	\$
scription of Co	Intribution				
ll Name of Con	tributor				
				Date [MM/DD/YYYY] \$	
use #	Street Address				
				Date [MM/DD/YYYY] \$	
/	!!-	State			
		Judie	Zip Code	Date [MM/DD/YYYY] \$	+
cription of Cor	tribution				
Name of Cont	ributor				
Contraction Contra	IDULOF			Date [MM/DD/YYYY] \$	
se #				Date [MM/DD/YYYY] \$	
se#	Street Address			Det Det	
				Date [MM/DD/YYYY] \$	
		State	Zip Code		
			zip code	Date [MM/DD/YYYY] \$	
ription of Cont	ribution				
Name of Contri	butor				
	200			Date [MM/DD/YYYY] \$	
e #					
G m	Street Address			Date Mans (pp / pp	
				Date [MM/DD/YYYY] \$	
4		State	Zip Code		
			Lib code	Date [MM/DD/YYYY] \$	
ption of Contri	ibution		and the second se		

SCHEDULE II Part G In-Kind Contributions Received VALUE OVER \$250

· ·

Full Name of Contributor				
			Date [MM/DD/Y	YYY] \$
House #				
House # Street Addre	55		Date [MM/DD/Y	
City			Date [WW/DD/Y	YYY] \$
city	State	Zip Code	Deter In the local	
Employer Name			Date [MM/DD/Y]	(YY] \$
			Occupation	
Employer Mailing Address / Principa Place of Business	1			
and of Dalifiess			Description	
Full Name of Contributor			Contribution	
			Date [MM/DD/YY	YY] \$
House # Street Address				
Street Address			Date [MM/DD/YY)	Y] \$
City				-1 -2
	State	Zip Code	Date [MM/DD/YYY	VI ¢
mployer Name				Y] \$
			Occupation	
mployer Mailing Address / Principal lace of Business			Description	
	-		of	
Il Name of Contributor			Contribution	
			Date [MM/DD/YYY)	1 \$
Duse # Street Address				
			Date [MM/DD/YYYY] \$
y	State			
	State	Zip Code	Date [MM/DD/YYYY	\$
ployer Name				
			Occupation	
ployer Mailing Address / Principal ce of Business			Description	
	0		of	
Name of Contributor			Contribution	
			Date [MM/DD/YYYY]	\$
se # Street Address				15
			Date [MM/DD/YYYY]	\$
	State	Zip Code	Date [MM/DD/YYYY]	\$
loyer Name				
			Occupation	
oyer Mailing Address / Principal of Business			Description	
	1			
	1		of	

SCHEDULE III Statement of Expenditures

. . . .

Filer Identificatio	n Number:						
To Whom Paid	E	ř (\sim	. (41	Date [MM/DD/YYYY]	\$ \$1,000.00
House #	Street Address	CT C	1916 (. Camps	e Imira	Description of Expendit	
140.	3 Sileer Address	100	ain Au	TC.		Description of experior	ture
City B.	Street Address 3 Street Address 2 thlehen	State	PA-	Zip Code	18015	(Campa.gn 1	loan
To Whom Paid						Date [MM/DD/YYYY]	\$
House #	Street Address					Description of Expendit	ure
City		State		Zip Code			
To Whom Paid						Date [MM/DD/YYYY]	\$
House #	Street Address			-	1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 -	Description of Expendit	ure
City		State		Zip Code			
To Whom Paid						Date [MM/DD/YYYY]	\$
House #	Street Address					Description of Expendito	ure
City		State		Zip Code			
To Whom Paid						Date [MM/DD/YYYY]	\$
House #	Street Address					Description of Expendit	ure
City		State		Zip Code			
To Whom Paid	20 20	ala ang ang ang ang ang ang ang ang ang an				Date [MM/DD/YYYY]	\$
House #	Street Address					Description of Expendit	ure
City		State		Zip Code			
To Whom Paid		- hay - Log		and the second se		Date [MM/DD/YYYY]	\$
House #	Street Address					Description of Expendito	ure
City		State		Zip Code			
To Whom Paid						Date [MM/DD/YYYY]	\$
House #	Street Address					Description of Expendito	ure
City		State		Zip Code			an States - March 1994

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	n Number:			
Name of Credito	pr			Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]		\$
City		State	Zip Code	
Description of D	Pebt	·········		
Name of Credito	or			Outstanding Balance of Debt
House #	Street Address	_	DATE DEBT INCURRED [MM/DD/YYYY]	\$
City		State	Zip Code	
Description of D	ebt	I		
Name of Credito	pr			Outstanding Balance of Debt
House #	Street Address		DATE DEBT INCURRED [MM/DD/YYYY]	\$
City		State	Zip Code	
Description of D	ebt			
Name of Credito	or land			Outstanding Balance of Debt
House #	Street Address	_	DATE DEBT INCURRED [MM/DD/YYYY]	\$
City		State	Zip Code	
Description of D	ebt			
Name of Credito	or			Outstanding Balance of Debt
House #	Street Address		DATE DEBT INCURRED [MM/DD/YYYY]	\$
City		State	Zip Code	
Description of D	ebt	·····		
Name of Credito)r			Outstanding Balance of Debt
House #	Street Address		DATE DEBT INCURRED [MM/DD/YYYY]	\$
City Description of D	ebt	State	Zip Code	
	a de la companya de l			

County of <u>NIX Homphwealth of Pennsylvania - Campaign Finance Report</u> (Note: This report must be clear and legible. It should be typed)

Eilor Idontifiontio			Dam	the state of the						1
Filer Identificatio Number	n			ort Filed B	iy Candida	te		Committee		Lobbyist
			(Ma	rk X)		L				
Name of Filing Co	ommittee, Ca	ndidate or		E	- 1 /				- 6	10
Lobbyist				17	nds of	Gra	ce.	(ran	psir Smi	Ph
Street Address				1403	Lorai	i Ave	-			
City		Bethle	hen		State	VA-		Zip Code	18018	
Type of Report (P	lace x under i				<u> </u>					
1-6 th Tuesday 2	2- 2 nd Friday	3-30 Day Post	4-6 th	Tuesday	5- 2 nd Friday	6- 30 Day P	ost	7- Annual	Special 2 nd Friday	Special 30 Day
	Pre-Primary			lection	Pre- Election	Election	1		Pre-Election	Post-Election
	\square									
Date Of Election			Year			Amendmer	it		Termination	
(MM/DD/YYYY)		05/21/2019			2019	Report			Report	
			,	,		_			•	
Summary of Rece	eipts and	From Date		To Date				For (Office Use Only	
Expenditures		1.1.1.1	_							
		02/19/201	7	151	06/2019					
		0 00/17/000	<u> </u>	0110	10/00/1					
A. Amount Broug	ht Forward F	rom Last Report			2670017					
A. Amount Broug B. Total Monetary		rom Last Report	\$	0				20		
	y Contributio	rom Last Report		0						
B. Total Monetary	y Contributio	rom Last Report	\$	0						
B. Total Monetary (From Schedule I) C. Total Funds Avi	y Contributio) ailable	rom Last Report	\$	0						
B. Total Monetary (From Schedule I) C. Total Funds Avi (Sum of Lines A ar	y Contributio) ailable nd B)	rom Last Report	\$ \$ \$	0 6,6 6,1	20,00 (20.00					
B. Total Monetary (From Schedule I) C. Total Funds Ava (Sum of Lines A ar D. Total Expendito	y Contributio) ailable nd B) ures	rom Last Report	\$	0 6,6 6,1	20,00 (20.00					
B. Total Monetary (From Schedule I) C. Total Funds Ava (Sum of Lines A ar D. Total Expendito (From Schedule II)	y Contributio) ailable nd B) ures !)	rom Last Report	\$ \$ \$ \$	0 6,6 6,0 3,5	20.00 20.00 303.14					
B. Total Monetary (From Schedule I) C. Total Funds Avi (Sum of Lines A ar D. Total Expenditi (From Schedule II E. Ending Cash Ba	y Contributio) ailable nd B) ures II) Ilance	rom Last Report	\$ \$ \$	0 6,6 6,0 3,5	20.00 20.00 303.14					
B. Total Monetary (From Schedule I) C. Total Funds Avi (Sum of Lines A ar D. Total Expenditi (From Schedule II E. Ending Cash Ba (Subtract Line D fi	y Contributio) ailable nd B) ures II) Ilance rom Line C)	rom Last Report	\$ \$ \$ \$	0 6,6 6,0 3,5	20,00 (20.00					
B. Total Monetary (From Schedule I) C. Total Funds Avi (Sum of Lines A an D. Total Expenditi (From Schedule II E. Ending Cash Ba (Subtract Line D fi F. Value of In-Kind	y Contributio) ailable nd B) ures II) ilance rom Line C) d Contributio	rom Last Report	\$ \$ \$ \$	0 6,6 6,0 3,5	20.00 20.00 303.14					Com My
B. Total Monetary (From Schedule I) C. Total Funds Avi (Sum of Lines A and D. Total Expendition (From Schedule II) E. Ending Cash Ba (Subtract Line D fr F. Value of In-Kino (From Schedule II)	y Contributio) ailable nd B) ures II) ilance rom Line C) d Contributio)	ns and Receipts	\$ \$ \$ \$ \$ \$	0 6,6 6,0 3,5 3,5	20,00 20.00 303.14 316.86 0					Commo My con
B. Total Monetary (From Schedule I) C. Total Funds Avi (Sum of Lines A and D. Total Expendition (From Schedule II) E. Ending Cash Ba (Subtract Line D fr F. Value of In-Kinon (From Schedule II) G. Unpaid Debts a	y Contributio) ailable nd B) ures II) ilance from Line C) d Contributio) and Obligatio	ns and Receipts	\$ \$ \$ \$	0 6,6 6,0 3,5 3,5	20,00 20.00 303.14 316.86 0					Commonw De My conim Cor
B. Total Monetary (From Schedule I) C. Total Funds Avi (Sum of Lines A and D. Total Expendition (From Schedule II) E. Ending Cash Ba (Subtract Line D fr F. Value of In-Kino (From Schedule II)	y Contributio) ailable nd B) ures II) ilance from Line C) d Contributio) and Obligatio	ns and Receipts	\$ \$ \$ \$ \$ \$	0 6,6 6,0 3,5 3,5	20.00 20.00 303.14					Commonwealth o Deahner North My commission Commission Commission Member, Punns

SCHEDULE I Contributions and Receipts

1.1

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Detailed Summary Page

1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor Total for the reporting period (1) \$ 1,1,2C.CG 2. Contributions of \$50.01 to \$250.00 (From Part A and Part B) \$ 57CC.CG Contributions Received from Political Committees (Part A) \$ 57CC.CG All Other Contributions (Part B) \$ 2,55CC.GG Total for the reporting period (2) \$ 3. Contributions Over \$250.00 (From Part C and Part D) \$ 1,5CC.GG Contributions Received from Political Committees (Part C) \$ 1,5CC.GG 3. Contributions Received from Political Committees (Part C) \$ 1,5CC.GG All Other Contributions (Part D) \$ 1,5CC.GG All Other Contributions (Part D) \$ 1,5CC.GG 4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E) \$ 0,5FCC.GO Total for the reporting period (4) \$ C Total for the reporting period \$ \$ C	Filer Identification Number		
Total for the reporting period (1) \$ 1,1,2C.C6 2. Contributions of \$50.01 to \$250.00 (From Part A and Part B) \$ 57CC.C6 Contributions Received from Political Committees (Part A) \$ 57CC.C6 All Other Contributions (Part B) \$ 2,5CCC.C6 Total for the reporting period (2) \$ 3CCC.CC 3. Contributions Over \$250.00 (From Part C and Part D) \$ 1,5CC.CC Contributions Received from Political Committees (Part C) \$ 1,5CC.CC All Other Contributions (Part D) \$ 1,5CC.CC Contributions Received from Political Committees (Part C) \$ 1,5CC.CC All Other Contributions (Part D) \$ 1,6CC.CC Total for the reporting period \$ 2,5CC.CC 4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E) C Total for the reporting period \$ C Total for the reporting period \$ C			
Total for the reporting period (1) \$ 1,1,2C.C6 2. Contributions of \$50.01 to \$250.00 (From Part A and Part B) \$ 57CC.C6 Contributions Received from Political Committees (Part A) \$ 57CC.C6 All Other Contributions (Part B) \$ 2,5CCC.C6 Total for the reporting period (2) \$ 3CCC.CC 3. Contributions Over \$250.00 (From Part C and Part D) \$ 1,5CC.CC Contributions Received from Political Committees (Part C) \$ 1,5CC.CC All Other Contributions (Part D) \$ 1,5CC.CC Contributions Received from Political Committees (Part C) \$ 1,5CC.CC All Other Contributions (Part D) \$ 1,6CC.CC Total for the reporting period \$ 2,5CC.CC 4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E) C Total for the reporting period \$ C Total for the reporting period \$ C			
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B) 1/1 2C. CC Contributions Received from Political Committees (Part A) \$ 5/2 C. CC All Other Contributions (Part B) \$ 2, 5/2 C. CC Total for the reporting period (2) \$ 3. Contributions Over \$250.00 (From Part C and Part D) 3/2 CC C. CC Contributions Received from Political Committees (Part C) \$ 1/5/2C. CC All Other Contributions (Part D) \$ 1/5/2C. CC Contributions Received from Political Committees (Part C) \$ 1/5/2C. CC All Other Contributions (Part D) \$ 1/5/2C. CC Contributions Received from Political Committees (Part C) \$ 1/5/2C. CC All Other Contributions (Part D) \$ 1/5/2C. CC Total for the reporting period (3) \$ 2/5/2C. CC 4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E) C C Total for the reporting period (4) \$ C Total for the reporting period \$ C	1. Uniternized Contributions and Receipts-\$50.00 or Less per Contributor		
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B) Contributions Received from Political Committees (Part A) \$ All Other Contributions (Part B) \$ Total for the reporting period (2) S 2, 5 6 0 . 0 6 Total for the reporting period (2) S 3 0 0 0 0 0 Contributions Over \$250.00 (From Part C and Part D) Contributions Received from Political Committees (Part C) \$ All Other Contributions (Part D) \$ Contributions (Part D) \$ Total for the reporting period (3) Y \$ Contributions (Part D) \$ Total for the reporting period \$ Y \$ Total for the reporting period \$ Y \$ Total for the reporting period \$ Total for the reporting period \$ Total for the reporting period \$ C Total for the reporting period Total for the reporting period \$ C C	Total for the reporting period (1)	\$	1 1 20 01
Part A and Part B) Contributions Received from Political Committees (Part A) \$ 5760.06 All Other Contributions (Part B) \$ 2,500.06 Total for the reporting period (2) S 30000.000 Contributions Received from Political Committees (Part D) 30000.000 Contributions Received from Political Committees (Part C) \$ 1,500.000 All Other Contributions (Part D) \$ 1,500.000 Contributions Received from Political Committees (Part C) \$ 1,500.000 All Other Contributions (Part D) \$ 1,500.000 Total for the reporting period (3) Contributions (Part D) \$ 1,000.000 Total for the reporting period (3) Total for the reporting period (4) Contributions and Receipts during this reporting period 5	2 Contributions of CEO 01 to CEE 00 /E		1,1 20.00
All Other Contributions (Part B) 5760.06 Total for the reporting period (2) 3000000000000000000000000000000000000			
All Other Contributions (Part B) \$	Contributions Received from Political Committees (Part A)	\$	
Total for the reporting period (2) \$ 3 CC C . 6 C 3. Contributions Over \$250.00 (From Part C and Part D) \$ 3 CC C . 6 C Contributions Received from Political Committees (Part C) \$ 1,5 CC . 6 C All Other Contributions (Part D) \$ 1,6 C . 6 C Total for the reporting period (3) \$ 2,5 C C . 6 C 4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E) Total for the reporting period (4) \$ Contributions and Receipts during this reporting period (Add and \$ C C	All Other Contributions (Part B)	4	576.66
3. Contributions Over \$250.00 (From Part C and Part D) 3 CC C. 6C Contributions Received from Political Committees (Part C) \$ 1,5 CC . 6C All Other Contributions (Part D) \$ 1,6 co . 60 Total for the reporting period (3) \$ 4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E) 7 C Total for the reporting period (4) \$ C Total Monetary Contributions and Receipts during this reporting period (Add and \$ \$		Ş	2,500.00
3. Contributions Over \$250.00 (From Part C and Part D) Contributions Received from Political Committees (Part C) \$ 1,560.00 All Other Contributions (Part D) \$ 1,600.00 Total for the reporting period (3) \$ 4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E) Total for the reporting period (4) \$ C Total Monetary Contributions and Receipts during this reporting period (Add and \$ \$	Total for the reporting period (2)	\$	20000
Contributions Received from Political Committees (Part C) \$ 1,560.00 All Other Contributions (Part D) \$ 1,600.00 Total for the reporting period (3) \$ 4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E) Total for the reporting period (4) \$ C Total Monetary Contributions and Receipts during this reporting period (Add and \$ \$	3. Contributions Over \$250.00 (From Part C and Part D)		
All Other Contributions (Part D) \$ 1,566.00 Total for the reporting period (3) \$ 4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E) 7 Total for the reporting period (4) \$ C Total Monetary Contributions and Receipts during this reporting period (Add and \$			
All Other Contributions (Part D) \$ 1, 600.00 Total for the reporting period (3) \$ 2,5 60.00 4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E) Total for the reporting period (4) \$ Total Monetary Contributions and Receipts during this reporting period (Add and \$ \$ \$	Contributions Received from Political Committees (Part C)	\$	
Total for the reporting period (3) \$ -2,5 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 -	All Other Contributions (Part D)	Ś	
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E) Total for the reporting period (4) \$ C Total Monetary Contributions and Receipts during this reporting period (Add and \$)			1,000.00
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E) Total for the reporting period (4) \$ C Total Monetary Contributions and Receipts during this reporting period (Add and \$	Total for the reporting period (3)	\$	2510.00
Total for the reporting period (4) \$ Total Monetary Contributions and Receipts during this reporting period (Add and \$	4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)	1	
Total Monetary Contributions and Receipts during this reporting period (Add and \$			
Total Monetary Contributions and Receipts during this reporting period (Add and \$	Total for the reporting period (4)	\$	0
		\$	
enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report $6, 6, 20, 00$			6,620.00

PART A Contributions Received From Political Committees

 $y = \delta$

\$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.

Filer Ide	entification Number								
								_	Amount
	me of Contributing						Date [MM/DD/YYYY]	\$	
Commi	ttee	Frie	nds.	of 1	aul Br	ender	62/24/2019		250.00
House	#	Address /	1. M	arket	st.		Date [MM/DD/YYYY]	\$	
City	7.504		State				Date [MM/DD/YYYY]	\$	
,	Bethlehe	In-	State	PA	Zip Code	18018			
	me of Contributing			0			Date [MM/DD/YYYY]	\$	
Commi			ids c	rt 13	ryan (allahan	02/24/2019		250.00
House	# Street	Address	100.	ń S,	ー ナ		Date [MM/DD/YYYY]	\$	
City			///2// State			1			
City	Bethlehem	-	State	PA-	Zip Code	18018	Date [MM/DD/YYYY]	\$	
Full Na Commi	me of Contributing						Date [MM/DD/YYYY]	\$	
Commi	liee								
House	# Street	Address					Date [MM/DD/YYYY]	\$	
City			State		Zip Code		Date [MM/DD/YYYY]	\$	
Full Na	me of Contributing				1		Date [MM/DD/YYYY]	\$	
Commi	ttee							1	
House #	‡ Street	Address					Date [MM/DD/YYYY]	\$	
City		· · · ·	State		Zip Code		Date [MM/DD/YYYY]	\$	
]	
Full Nai Commi	me of Contributing ttee						Date [MM/DD/YYYY]	\$	
House #	t Street	Address					Date [MM/DD/YYYY]	\$	
	Bucci	nuur css					Bute [mm/BB/111]		
City	l,l,		State		Zip Code		Date [MM/DD/YYYY]	\$	
Full Nor	ne of Contributing			<u>.</u>					
Commit	-						Date [MM/DD/YYYY]	\$	
House #	Street	Address				. <u> </u>	Date [MM/DD/YYYY]	\$	
Cit									
City			State		Zip Code		Date [MM/DD/YYYY]	\$	

PART B All Other Contributions

1.1

\$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.

Filer Identification Number:		
Full Name of Contributor Date [MM/DD/YYY]	\$	244 - 1
0212472017		266.00
House # Street Address Date [MM/DD/YYYY]	\$	
56 Miner St.		
City (oaldale State PA Zip Code 18218 Date [MM/DD/YYYY]	\$	
Full Name of Contributor Date [MM/DD/YYYY]	\$	
Kylie Seitz 62/24/2019		260.00
	\$	
House # Street Address Khi da den Uran Ter Date [MM/DD/YYYY]		
City State Zip Code Date [MM/DD/YYYY]	\$	
Missguehoning PA Zipcode 182402506	-	
Full Name of Contributor Date [MM/DD/YYYY]	\$	
Betty compton 12/24/2019		150-00
House # Date [MM/DD/YYYY]	\$	
2529 Street Address Itampshire Rd.		
City Bzthlehen State DA Zip Code 18017 Date [MM/DD/YYYY]	\$	
Full Name of Contributor Date [MM/DD/YYYY]	\$	
Nannette Sell-Parry 14/21/2019		100.00
House # Street Address Date [MM/DD/YYYY]	\$	
City Walnut port State PA Zip Code 15088 Date [MM/DD/YYYY]	\$	
Full Name of Contributor Date [MM/DD/YYYY]	\$	
Ehmett McCall C2/24/2019		160.00
House # Street Address Date [MM/DD/YYY]	\$	
375 W Ridge St.	38	
City Lansford State PA Zip Code 18232 Date [MM/DD/YYYY]	\$	
Full Name of Contributor Date [MM/DD/YYYY]	\$	
Elise & Charlene Symia 12/24/2019		100.00
House # Street Address Date [MM/DD/YYY]	\$	
1610 Echo Tr.		
City Easten State PA Zip Code 18040-1020 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.

 ~ 1

Filer Identification Number:			
Full Name of Contributor	Date [MM/DD/YYYY]	\$	
Kith Glad win	04/24/2019		160.00
House # 89 Street Address Winster Rd. NIG 92N'	Date [MM/DD/YYYY]	\$	
City Landon State UK Zip Code	Date [MM/DD/YYYY]	\$	
Full Name of Contributor	Date [MM/DD/YYYY]	\$	75
Barbara Burkhardt	03/24/2019		160.00
House # 425 Street Address 2nd Arence	Date [MM/DD/YYYY]	\$	
City Bethlehem State PA Zip Code 18018	Date [MM/DD/YYYY]	\$	
Full Name of Contributor	Date [MM/DD/YYYY]	\$	100 00
Megan Brote	62/24/2619		100-00
House # 360 Street Address Ninth Ave.	Date [MM/DD/YYYY]	\$	
City Bathlehem State PA Zip Code 18018	Date [MM/DD/YYYY]	\$	
Full Name of Contributor Bub + Katty Grampsie	Date [MM/DD/YYYY]	\$	100.00
House # 324 Street Address W. White St.	Date [MM/DD/YYYY]	\$	
City Summit Hill State PA Zip Code 15250	Date [MM/DD/YYYY]	\$	
Full Name of Contributor	Date [MM/DD/YYYY]	\$	
Frank Gampsie	02/24/2019		100.00
House # 944 Street Address (atasaugua Rd.	Date [MM/DD/YYYY]	\$	
City Uniterhall State PA Zip Code 18052	Date [MM/DD/YYYY]	\$	
Full Name of Contributor	Date [MM/DD/YYYY]	\$	
Jinmy + Laura Grampsie	12/24/2019	100	100.00
House # 17 Street Address W. Hazard St.	Date [MM/DD/YYYY]	\$	
City Summit Hill State PA Zip Code 15250	Date [MM/DD/YYYY]	\$	

PART B All Other Contributions

1.3

\$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.

Filer Identification Number:		
Full Name of Contributor		
Daryl Kulp	Date [MM/DD/YYYY] \$	160.00
House # Street Address	Date [MM/DD/YYYY] \$	
City Bethlehem State PA Zip Code 18017	Date [MM/DD/YYYY] \$	
Full Name of Contributor	Date [MM/DD/YYYY] \$	
Michael Crampsie	62/24/2619	160.00
House # Street Address Vernon St.	Date [MM/DD/YYYY] \$	
City Summit Hill State PA Zip Code 18250	Date [MM/DD/YYYY] \$	
Full Name of Contributor	Date [MM/DD/YYYY] \$	
Loren Marguardt		100.00
House # 738 Street Address Maple St.	Date [MM/DD/YYYY] \$	
City Brthlehen State PA Zip Code 18018	Date [MM/DD/YYYY] \$	
Full Name of Contributor	Date [MM/DD/YYYY] \$	
George Dzupinka	01101001	160.00
House # Street Address Maple St.	Date [MM/DD/YYYY] \$	
City Bethlehem State PA Zip Code 15018	Date [MM/DD/YYYY] \$	
Full Name of Contributor	Date [MM/DD/YYYY] \$	
Juseph Vetitsky, Esg.		100.00
House # Street Address E. Ludlan St.	Date [MM/DD/YYYY] \$	
City Summit Hill State PA Zip Code 18250	Date [MM/DD/YYYY] \$	
Full Name of Contributor	Date [MM/DD/YYYY] \$	
Dee Grandall	64/13/2019	166.00
House # Street Address Rosewood Dr.	Date [MM/DD/YYYY] \$	
City Lans Jule State MA Zip Code 19446	Date [MM/DD/YYYY] \$	

PART B

1.1

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.

Filer Identification Number:			
Full Name of Contributor 17		Date [MM/DD/YYYY]	\$
	l leah/er	64/09/2019	166.06
House # Street Address	Vesper Dr.	Date [MM/DD/YYYY]	\$
City Picasset	State MA Zip Code	Date [MM/DD/YYYY]	\$
		Date [MM/DD/YYYY]	Ś
Annel	Marrie Whild in		100.00
House # 596 Street Address	Riverwoods Long	Date [MM/DD/YYYY]	\$
City Betalehem	State Zip Code /FC/	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Date [MM/DD/YYYY]	\$
To	an Bauer		100.00
House # 5-11 Street Address	Village Dr.	Date [MM/DD/YYYY]	\$
City Bethlehem	State Zip Code /FCIF	Date [MM/DD/YYYY]	\$
Full Name of Contributor	· ·	Date [MM/DD/YYYY]	\$
101	ran Wild	03/31/2019	150.00
House # / 3.5 6 Street Address	Due Trail Rd.	Date [MM/DD/YYYY]	\$
City Allentoun	State PA Zip Code 18709	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]	1/2
			\$
House # Street Address		Date [MM/DD/YYYY]	\$
City	State Zip Code	Date [MM/DD/YYYY]	\$

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 over \$250.00 in the reporting period.

Filer Identification N	umber:						
						_	
Full Name of			£ 11 .	1 - 1	Date [MM/DD/YYYY]	\$	
Contributing Com	nittee Internat	Insul Assu Insula	ic of Heat	+ Frost	0.3/01/2019		500.00
House # 326	STREET Address		house Rd.	<u>,</u>	Date [MM/DD/YYYY]	\$	
City					Distance in the second	_	
	dieteun	State Vt	Zip Code	17057	Date [MM/DD/YYYY]	\$	
Full Name of					Date [MM/DD/YYYY]	Ś	
Contributing Comr	nittee IBEW	Local	375 PAC		05/01/2019		1,000.00
House # /201	Street Address	W. Lit	berty St.		Date [MM/DD/YYYY]	\$	
City					Data Inter (DD (1000))		
Alle	ntown	State Pt	<i>A</i> Zip Code	18102	Date [MM/DD/YYYY]	\$	
Full Name of					Date [MM/DD/YYYY]	\$	
Contributing Comr	nittee						
House #	Street Address				Date [MM/DD/YYYY]	\$	
City		State	Zip Code		Date [MM/DD/YYYY]	Ś	
Tange		× 1					
Full Name of	CALL CONTRACTOR OF A CONTRACT				Date [MM/DD/YYYY]	\$	
Contributing Comn	nittee						
House #	Street Address				Date [MM/DD/YYYY]	\$	
		9				1	
City		State	Zip Code		Date [MM/DD/YYYY]	\$	
		field -					
Full Name of					Date [MM/DD/YYYY]	\$	
Contributing Comn	nittee						
House #	Street Address				Data [MAM/DD/WWW]	-	
	Street Address				Date [MM/DD/YYYY]	\$	
City		State	Zip Code		Date [MM/DD/YYYY]	\$	
			Lipeoue		Date [MM/DD/111]	\$	
Full Name of Contributing Comm	nittee			10	Date [MM/DD/YYYY]	\$	
Contributing Contri	ince in the second seco					610	
House #	Street Address				Date [MM/DD/YYYY]	\$	
11 S 12	301-10-40.						
City		State	Zip Code		Date [MM/DD/YYYY]	\$	
			L HARANS &			1	

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							
Full Name of ContributorRegina Mc FaddenHouse #Street Address146LU. Lu 210u St.CitySummit HillStatePAZip Code18250					D/YYYY]	Ş	
Legi	ha IIICI	a da ch		04/13	7/2019		2,000,00
House # Street Address	1	1 lass St	· · · · · · · · · · · · · · · · · · ·	Date [MM/DI	Ο/ΥΥΥΥ]	\$	
146	LU. Lu	, & 1000 0]				1	
City 5 1. 11. 11	State U	Zip Code	1-	Date [MM/DI	D/YYYY]	\$	
		4	18250				
Employer Name	Ret	Zip Code		Occupation	Ketn		1
Employer Mailing Address /							
Principal Place of Business							
Full Name of Contributor				Date [MM/DI	D/YYYY]	\$	· · · · · ·
House # Street Address				Date [MM/DI	1/VVV1	\$	
				Date [wilwi/Dt		Ş	
						5	
City	State	Zip Code		Date [MM/DI	D/YYYY]	\$	
Employer Name		I	I	Occupation			
Employer Mailing Address /				N State of the		-	
Principal Place of Business							
Full Name of Contributor				Date [MM/DI	///////1	ć	
					/ []	\$	
House # Street Address							
Street Address				Date [MM/DI)/YYYY]	\$	
						2	
City	State	Zip Code		Date [MM/DI	Ο/ΥΥΥΥ]	\$	
Employer Name				Occupation			
Employer Mailing Address /							
Principal Place of Business							
Full Name of Contributor				Date [MM/DD	/ / / / / / / / / / / / / / / / / / / /	\$	
·····································					· · · · ·		
House # Street Address					-		
House # Street Address				Date [MM/DD	0/YYYY]	\$	
City	State	Zip Code		Date [MM/DI	/ / / / / / / /	\$	
Employer Name				0		235	
Employer Manie				Occupation			
Employer Mailing Address /							
Principal Place of Business							

PART E

Other Receipts

REFUNDS, INTREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer

Filer Identification Nu	imber:			expenditures that were returned to the filer
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	n			
Full Name			<u> </u>	
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				
Full Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				
Full Name				
House #	Street Address		· · · · · · · · · · · · · · · · · · ·	
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				
Fuli Name				
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				
Full Name				
House #	Street Address	<u> </u>		
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				

SCHEDULE II 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:	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50	D.00 OR LESS PER CONTRIBUTOR
TOTAL for the reporting period (1)	5 0
2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.	00 (FROM PART F)
TOTAL for the reporting period (2)	\$ 0
3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM	1 PART G)
TOTAL for the reporting period (3)	\$ C
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)	\$ <i>C</i>

SCHEDULE II PART F In-Kind Contributions Received VALUE OF \$50.01 TO \$250

Filer Identification Number:	

Full Name of Contr	: h			and the second	
Full Name of Contr	Totuci			Date [MM/DD/YYYY]	\$
-					
House #	Street Address			Date [MM/DD/YYYY]	\$
1]
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Con	tribution				
Full Name of Contr	ibutor			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
				Date [www.bb/riii]	ې -
Description of Con	tribution				
Description of Com	Indución				
Full Name of Contr	ibutor			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
	off corriadi coo			Bate [mm/DD/1111]	
City		State	Zin Code	Det Martin hourd	
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Cont	tribution				
1. SALE - V/ P	30.34				
Full Name of Contr	ibutor			Date [MM/DD/YYYY]	\$
1. 1. 1.					
House #	Street Address			Date [MM/DD/YYYY]	\$
	1.				
City		State	Zip Code	Date [MM/DD/YYYY]	ć
200		State			\$
Description of Cont	ribution				
Full Name of Contri	butor			Date [MM/DD/YYYY]	\$
	1993				
House #	Street Address			Date [MM/DD/YYYY]	\$
	122 2010 18				
City	199 34 34 A	State	Zip Code	Date [MM/DD/YYYY]	ć
		Jule	Lip code		\$
Description of Cont	ribution	122-2			

SCHEDULE II Part G In-Kind Contributions Received VALUE OVER \$250

Filer Identification Number:

Full Nam	10 11					
	e of Contributo	br			Date [MM/DD/YYYY]	\$
House #	5	treet Address			Date [MM/DD/YYYY]	\$
City			State	Zip Code	Date [MM/DD/YYYY]	\$
	- Norma					
Employe	r Name				Occupation	
Employe	r Mailing Addro	ess / Principal		- · · · · · · · · · · · · · · · · · · ·	Description	
Place of I		ssy rincipal			of	
	Dusiness				4	
					Contribution	
Full Nam	e of Contributo	pr			Date [MM/DD/YYYY]	\$
11 11						
House #	S1	treet Address			Date [MM/DD/YYYY]	\$
City	[]					
City			State	Zip Code	Date [MM/DD/YYYY]	\$
Employer	r Namo					
спрюуе	i Name				Occupation	
Employer	r Mailing Addre	ss / Principal			Description	
Place of Business				of		
					Contribution	
Full Name	e of Contributo	r				
1 un reann	e or contribute	·•			Date [MM/DD/YYYY]	\$
1.1.1						
House #	C+	reet Addross		<u></u>		6
House #	St	reet Address	<u> </u>		Date [MM/DD/YYYY]	\$
House #	St	reet Address			Date [MM/DD/YYYY]	\$
	St	reet Address	State	Zip Code		
House #	St	reet Address	State	Zip Code	Date [MM/DD/YYYY] Date [MM/DD/YYYY]	\$
	St	reet Address	State	Zip Code		
City		reet Address	State	Zip Code	Date [MM/DD/YYYY]	
City Employer	r Name		State	Zip Code		
City Employer Employer	r Name r Mailing Addre		State	Zip Code	Date [MM/DD/YYYY]	
City Employer	r Name r Mailing Addre		State	Zip Code	Date [MM/DD/YYYY] Occupation	
City Employer Employer	r Name r Mailing Addre		State	Zip Code	Date [MM/DD/YYYY] Occupation Description	
City Employer Employer Place of B	r Name r Mailing Addre Business	ess / Principal	State	Zip Code	Date [MM/DD/YYYY] Occupation Description of Contribution	\$
City Employer Employer Place of B	r Name r Mailing Addre	ess / Principal	State	Zip Code	Date [MM/DD/YYYY] Occupation Description of	
City Employer Employer Place of B	r Name r Mailing Addre Business	ess / Principal	State	Zip Code	Date [MM/DD/YYYY] Occupation Description of Contribution	\$
City Employer Employer Place of B	r Name r Mailing Addre Business e of Contributo	ess / Principal	State	Zip Code	Date [MM/DD/YYYY] Occupation Description of Contribution Date [MM/DD/YYYY]	\$
City Employer Place of B Full Name	r Name r Mailing Addre Business e of Contributo	ess / Principal	State	Zip Code	Date [MM/DD/YYYY] Occupation Description of Contribution	\$
City Employer Place of B Full Name	r Name r Mailing Addre Business e of Contributo	ess / Principal	State	Zip Code	Date [MM/DD/YYYY] Occupation Description of Contribution Date [MM/DD/YYYY]	\$
City Employer Place of B Full Name	r Name r Mailing Addre Business e of Contributo	ess / Principal	State		Date [MM/DD/YYYY] Occupation Description of Contribution Date [MM/DD/YYYY] Date [MM/DD/YYYY]	\$ \$ \$
City Employer Place of B Full Name House #	r Name r Mailing Addre Business e of Contributo	ess / Principal		Zip Code Zip Code	Date [MM/DD/YYYY] Occupation Description of Contribution Date [MM/DD/YYYY]	\$
City Employer Place of B Full Name House # City	r Name r Mailing Addre Business e of Contributo	ess / Principal			Date [MM/DD/YYYY] Occupation Description of Contribution Date [MM/DD/YYYY] Date [MM/DD/YYYY] Date [MM/DD/YYYY]	\$ \$ \$
City Employer Place of B Full Name House #	r Name r Mailing Addre Business e of Contributo	ess / Principal			Date [MM/DD/YYYY] Occupation Description of Contribution Date [MM/DD/YYYY] Date [MM/DD/YYYY]	\$ \$ \$
City Employer Place of B Full Name House # City Employer	r Name r Mailing Addre Business e of Contributo St r Name	r reet Address			Date [MM/DD/YYYY] Occupation Description of Contribution Date [MM/DD/YYYY] Date [MM/DD/YYYY] Date [MM/DD/YYYY] Occupation Occupation	\$ \$ \$
City Employer Place of B Full Name House # City Employer Employer	r Name r Mailing Addre Business e of Contributo St r Name r Mailing Addre	r reet Address			Date [MM/DD/YYYY] Date [MM/DD/YYYY] Occupation of Contribution Date [MM/DD/YYYY] Date [MM/DD/YYYY] Date [MM/DD/YYYY] Occupation Date [MM/DD/YYYY] Date [MM/DD/YYYY] Date [MM/DD/YYYY] Date [MM/DD/YYYY] Date [MM/DD/YYYY]	\$ \$ \$
City Employer Place of B Full Name House # City Employer	r Name r Mailing Addre Business e of Contributo St r Name r Mailing Addre	r reet Address			Date [MM/DD/YYYY] Occupation Description of Contribution Date [MM/DD/YYYY] Date [MM/DD/YYYY] Date [MM/DD/YYYY] Occupation Occupation	\$ \$ \$

Filer Identification	Number:					
To Whom Paid	1 12	- 1	1 ton			Date [MM/DD/YYYY] \$
		INT	(enter	02/05/2019 15.96		
House # 176	Street Address	Unio	n Blue	t. Sc	ite 114	Description of Expenditure
City Alle,	nteun	State	PA	Zip Code	18109	Campaign Kickoff Flyers
To Whom Paid LU Print Center						Date [MM/DD/YYY] \$ 02/19/2019 55.65
House #					· to inc	Description of Expenditure
		State	n 1510	Zin	0118 119	
Ali	lentown	, state	PA	Code	18169	Remittance thuelopes
To Whom Paid	Ruosen	-it's	$-)/_{c} +$	_		Date [MM/DD/YYY] \$ 02/24/2019 297.36
House #						02/24/2019 297.36 Description of Expenditure
	Street Address		lizabe	th Au	?e.	
Be	thlehem	State	PA	Zip Code	18018	Food - Campaign Kickott
To Whom Paid	To Whom Paid Michael Laws					Date [MM/DD/YYY] \$ 03/03/2019 \$6.00
House #	Church Batalanaa			17		Description of Expenditure
City		State	n View	Zip		
Bet	hlehem	State	PA	Code	18015	Photos for campaign Lit.
To Whom Paid	Stap	125				Date [MM/DD/YYY] \$ 43.73
House #	Street Address		RI.			03/03/2019 43.73 Description of Expenditure
City			1011 1012			
Bet.	hlehen	State	PA-	Zip Code	18618	Campaign Supplie's
To Whom Paid	Glant	4				Date [MM/DD/YYYY] \$ 13/14/26/9 22.00
House # 2174			· · · · ·	1 I I		03/16/2019 2d.00 Description of Expenditure
			Union B			
and the second s	hlehen	State	PA	Zip Code	18018	Stamps - Postage
To Whom Paid	20	Prin	7 (en	ter		Date [MM/DD/YYY] \$ 37.10
House # 1701	1		i Blud		le 114	03/19/2619 54.70 Description of Expenditure
City	ntour	State	PA-	Zip Code	18109	Business Cards
To Whom Paid		D	+ =	20		Date [MM/DD/YYYY] \$
House #	Palmer Past Office				64/05/2019 22.00	
House # 650	Street Address	S.	Greenad	od A	fre.	Description of Expenditure
City E	as ten	State	<u>breenad</u> PA	Zip Code	18045	Postage Stamps

SCHEDULE III
Statement of Expenditures

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Filer Identification N	umber:					
To Whom Paid		- All Contractions				
	LVP	Fint Ce.	nter		Date [MM/DD/YYYY] \$	14.80
House #			0111010011	7.00		
1701	Street Address	Union B	Description of Expenditure			
1 1	entourn	State PA	Zip Code	18109	Palm cards, Yard.	right
To Whom Paid	111	Print Ce	enter		Date [MM/DD/YYYY] \$	1
Laura Al		777777 00				4.06
House # 1701	Street Address	Union Bl	rd St. ,	114	Description of Expenditure	
City All	rentown	State PA	2 Zip Code	18109	Yard signs	
To Whom Paid	t		i -		Date [MM/DD/YYYY] \$	
	lar	1 205 /	Beverag	e]	05/04/2019 80	546
House # 2336	Street Address		iville K		Description of Expenditure	
City	hleden	- 111	L Zip Code		Bererages Fund	raiser
To Whom Paid	t i	/	C		Date [MM/DD/YYYY] \$	
	1 1 1	line +	pirits		05/05/2019 70	5.26
House #	Street Address	Lites tgate 1	Mall, Scho	chersville Rd.	Description of Expenditure	
	hlehem	State PA	Z Zip Code	18618	Beverages. Fundre	aiser
To Whom Paid	6	h			Date [MM/DD/YYYY] \$	
	Tanc				15/66/2619 12	1.37
House # ,2336	Street Address	Tackson vi.	lle Rd.		Description of Expenditure	82.4
City Beth	lehen	State PA	Zip Code	18017	Beverages - Find	raiser
To Whom Paid	100 1. 10	1		1	Date [MM/DD/YYYY] \$	
	Mike Ka	uscher / Je	ake Kai	igas	C5/06/2619 20	60.00
House # 20	Street Address	Hankins	Farm Ro	!	Description of Expenditure	127
City Allent	tour	State N.J	Zip Code	08501-1800	Music - Fundr	auser
To Whom Paid	Luce	y Gano	12.		Date [MM/DD/YYYY] \$	74.64
House #	Street Address	/			05/66/2619 73 Description of Expenditure	1.61
2501	Succerations	Willow 1		-r	Description of Expenditure	32 E.
City Beti	hlehem	State PA	Z Zip Code	18626	Food - Fundran	rer
To Whom Paid	LU.	Date [MM/DD/YYYY] \$ 04/43/2019 14	50			
House # 40		lerst 27	THL St.		Description of Expenditure	
City	York	State N.Y	Zip Code		Website	
			1.5			

SCHEDULE III Statement of Expenditures

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Filer Identification N	lumber:			-			
	-9620						
To Whom Paid	LV Print Center					Date [MM/DD/YYYY]	\$
	1.000			04/09/2019	584.66		
House # 1761	Street Address	Union	137 vd	Description of Expendi	ture		
City	12entourn	State	PA-	Yard Signs			
To Whom Paid	1					Date [MM/DD/YYYY]	\$
	L.	1 Xcon	ι			03/25/2019	14.50
House # 40	Street Address	litest		St.		Description of Expendit	ure
City Ne	w York	State	N' 9	Zip Code		Lettbsit	Ċ
To Whom Paid				·		Date [MM/DD/YYYY]	\$
	Sta	Ples				03/12/2019	1.65
House # ,2/38	Changet Andreas	ic. Un	10 1316	id.		Description of Expendit	ure
City B	ethlehem		PA	Zip Code	18018	(opying	л. 7
To Whom Paid)L.			1	Date [MM/DD/YYYY]	\$
	D#	NGa	DADD	1(0m		03/08/2019	11.16
House # 14 955	DH-/ Street Address	AL. H	ayden	Rd.	Suite 219	Description of Expendit	ure
City Seu	Heddale	State	1-2	Zip Code	SU. te 219 85260	Website	
To Whom Paid						Date [MM/DD/YYYY]	\$
House #	Street Address					Description of Expendit	ure
City		State	<u></u>	Zip		44	
				Code			
To Whom Paid						Date [MM/DD/YYYY]	\$
House #	Street Address					Description of Expendit	ure
City		State		Zip			
		State		Code			
To Whom Paid				I	-1	Date [MM/DD/YYYY]	\$
House #	ouse # Street Address						ure
City		State		Zip		0.002/01/01/01/02/23	
				Code			
To Whom Paid						Date [MM/DD/YYYY]	\$
House #	Street Address		<u> </u>			Description of Expendit	ure
City		State		Zip			
est al				Code			

SCHEDULE III
Statement of Expenditures

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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.

	Number.			
Name of Credito	ir i			Outstanding Delense of D. Lu
House #	Street Address	ace Crampsie Jinch	DATE DEBT INCURRED	Outstanding Balance of Debt
140	3	Lorain Aut.		
City			02/19/2019 Zin	1,000.00
	Beth	lehem	PA Code 18018	
Description of D	ebt	Ichem State		
Name of Credito	r			Outstanding Balance of Debt
House #	Street Address		DATE DEBT INCURRED [MM/DD/YYYY]	\$
City		State	Zip	-
Description of De	eht		Code	
Description of De				
Name of Credito	r			Outstanding Balance of Debt
House #	Street Address		DATE DEBT INCURRED	\$
			[MM/DD/YYYY]	_
City		State	Zip	
Description of De	ebt		Code	
Name of Credito				
House #				Outstanding Balance of Debt
nouse #	Street Address		DATE DEBT INCURRED [MM/DD/YYYY]	\$
City		State	Zip	
Description of De	ebt	1022	Code	
Name of Creditor				Outstanding Balance of Debt
House #	Street Address		DATE DEBT INCURRED [MM/DD/YYYY]	\$
City		State	Zip Code	
Description of De	bt			
Name of Creditor				Outstanding Balance of Debt
House #	Street Address		DATE DEBT INCURRED	\$
		-	[MM/DD/YYYY]	- 53
City		State	Zip	- 1
Description of De	bt	6,1216	Code	