

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

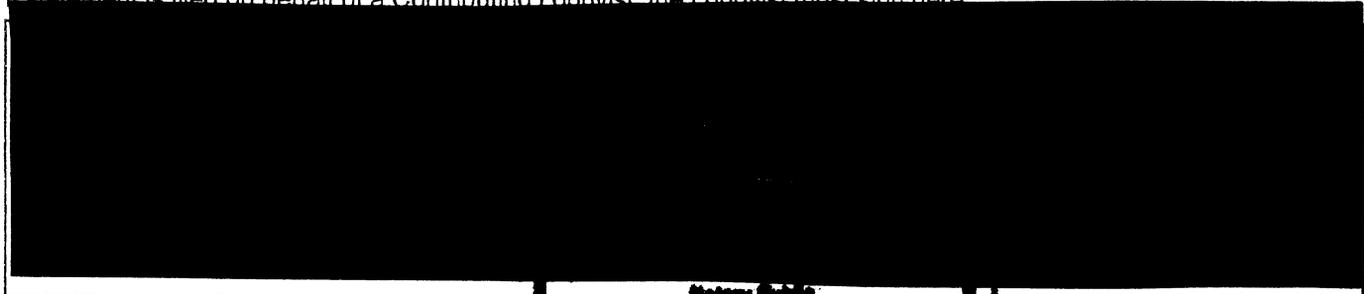
File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE ² <input type="checkbox"/>	LOBBYIST ³ <input type="checkbox"/>
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Alfonso A. Bernotas, Jr.</i>					
STREET ADDRESS <i>1004 Johnston Drive</i>					
CITY <i>Bethlehem</i>			STATE <i>PA</i>	ZIP CODE <i>18017-1936</i>	
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY
6TH TUESDAY PRE-PRIMARY 1.		<i>City of Bethlehem City Council</i>		<i>N/A</i>	<i>REP</i>
2ND FRIDAY PRE-PRIMARY 2.		DATES OF REPORTING PERIOD		DATE OF ELECTION	
30 DAY POST-PRIMARY 3. <input checked="" type="checkbox"/>		MO. DAY YEAR TO MO. DAY YEAR <i>5 3 11 TO 6 6 11</i>		MO. DAY YEAR <i>5 17 2011</i>	
6TH TUESDAY PRE-ELECTION 4.		CASH BALANCE AT END OF REPORTING PERIOD: \$ <i><224.95></i>		FOR OFFICE USE ONLY	
2ND FRIDAY PRE-ELECTION 5.		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <i>- 0 -</i>		ENTERED 2011 JUN 14 P 2:47 NORTHAMPTON COUNTY ELECTION OFFICE EASTON, PA 18042	
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 Lobbyist must sign here.



Notary Public
BETHLEHEM CTY, NORTHAMPTON COUNTY
My Commission Expires Jul 11, 2012

PART II -

If statement is filed on behalf of a Candidate's authorized representative, the representative must sign here.

I 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

 SIGNATURE OF CANDIDATE

 PRINTED NAME

MY COMMISSION EXPIRES _____ MO. _____ DAY _____ YR. _____ AREA CODE _____ DAYTIME TELEPHONE NUMBER _____

CAMPAIGN FINANCE REPORT

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

Filer Identification Number: <input type="checkbox"/>		Report Filed By: <input type="checkbox"/>		CANDIDATE ^{1.}	COMMITTEE ^{2.} <input checked="" type="checkbox"/>	LOBBYIST ^{3.}							
Name of Filing Committee, Candidate or Lobbyist: <i>Friends of Al Bernotas</i>													
Street Address: <i>1004 Johnston Drive</i>													
City: <i>Bethlehem</i>			State: <i>PA</i>		Zip Code: <i>18017 - 1936</i>								
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST PRIMARY	3. <input checked="" type="checkbox"/>	AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>			
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST ELECTION	6.	TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>			
	ANNUAL REPORT	7.	YEAR		FILING METHOD () CHECK ONE <input type="checkbox"/>		PAPER	<input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate: <i>City of Bethlehem City Council</i>				DATE OF ELECTION		District Number	Office Code	Party Code	County Code				
				MO.	DAY	YEAR	<i>VIA</i>	<i>OTH</i>	<i>REP</i>	<i>48</i>			
				<i>5</i>	<i>17</i>	<i>2011</i>	(SEE INSTRUCTIONS FOR CODES)						
Summary of Receipts and Expenditures from:			MO.	DAY	YEAR	To	FOR OFFICE USE ONLY						
			<i>5</i>	<i>3</i>	<i>2011</i>		RECEIVED FOR COUNTY ELECTIONS JUN 14 P 2:47 ENTERED						
A. Amount Brought Forward From Last Report						\$					<i>529.50</i>		
B. Total Monetary Contributions and Receipts (From Schedule I)						\$					<i>500.00</i>		
C. Total Funds Available (Sum of Lines A and B)						\$					<i>1,029.50</i>		
D. Total Expenditures (From Schedule III)						\$					<i>- 0 -</i>		
E. Ending Cash Balance (Subtract Line D from Line C)						\$					<i>1,029.50</i>		
F. Value of In-Kind Contributions Received (From Schedule II)						\$					<i>2.57</i>		
G. Unpaid Debts and Obligations (From Schedule IV)						\$	<i>- 0 -</i>						

AFFIDAVIT SECTION

PART I - 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 or computer diskette, are to the best of my knowledge and belief true, correct and complete.

[Redacted Signature Area]

PART II - 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 or computer diskette, are to the best of my knowledge and belief true, correct and complete.

My commission expires on _____

Department of State • Bureau of Commissions, Elections and Legislation
210 North Office Building • Harrisburg, PA 17120-0001 (717) 787-5280

NOTARIAL SEAL
JOHN E. LISTING JR.
My Commission Expires Jul 11, 2012

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends of Al Bernotas</i>	Reporting Period From <i>5/3/11</i> To <i>6/6/11</i>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
	TOTAL for the Reporting Period	(1) \$ - 0 -

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)		
Contributions Received from Political Committees (Part A)		\$ - 0 -
All Other Contributions (Part B)		\$ - 0 -
	TOTAL for the Reporting Period	(2) \$ - 0 -

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		
Contributions Received from Political Committees (Part C)		\$ - 0 -
All Other Contributions (Part D)		\$ 500.00
	TOTAL for the Reporting Period	(3) \$ 500.00

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)		
	TOTAL for the Reporting Period	(4) \$ - 0 -

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)</i>	\$ 500.00
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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 <i>Friends of Al Bernotas</i>	Reporting Period From <i>5/3/11</i> To <i>6/6/11</i>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
<i>Joseph D. Negro</i>	<i>5</i>	<i>26</i>	<i>2011</i>	\$ <i>500.00</i>
Mailing Address <i>3555 Manor Road</i>	MO.	DAY	YEAR	\$
City <i>Bethlehem</i>	MO.	DAY	YEAR	\$
State <i>PA</i>				
Zip Code (Plus 4) <i>18020 -</i>				
Employer Name <i>Alexandria Manor</i>				\$
Occupation <i>Owner</i>				
Employer Mailing Address/Principal Place of Business <i>3555 Manor Road, Bethlehem, PA 18020</i>				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4) <i>-</i>				
Employer Name				\$
Occupation				
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4) <i>-</i>				
Employer Name				\$
Occupation				
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4) <i>-</i>				
Employer Name				\$
Occupation				
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4) <i>-</i>				
Employer Name				\$
Occupation				
Employer Mailing Address/Principal Place of Business				

Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ *500.00*

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 <i>Friends of Al Bernotas</i>	Reporting Period From <u>5/3/11</u> To <u>6/6/11</u>
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR

TOTAL for the Reporting Period	(1)	\$ <u>2.57</u>
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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)	\$ <u>- 0 -</u>
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3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)

TOTAL for the Reporting Period	(3)	\$ <u>- 0 -</u>
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TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD <i>(Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)</i>	\$ <u>2.57</u>
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