Commonwealth of Pennsylvania CAMPAIGN FINANCE REPORT PAGE 1 OF // (COVER PAGE)

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

Filer Identification	on 🕨		Report Filed By:		CANDIDATE 1.	COM	MITEE	² ×	LOBE	BYIST 3.
Name of Filing Com	mittee, Candidate or Lobbyi	st;	0 5		· .			.L.		
Street Address:	Friends of		D, Ke	cch	, c Ji					
	20 30x	202								
City:	Beth lehem				State: PA	zip Co 180			03	702
TYPE OF REPORT	PRE-PRIMARY	2ND FRIDA			DAY 3. ST PRIMARY	AMENO REPORT		YES		NO.
(place X to	PRE-ELECTION 4.	2ND FRIDA PRE-ELECTI	and the second s		DAY 6. ST ELECTION	TERMIN REPORT		YES		NO.
the right of report type)	ANNUAL 7. REPORT	YEAR			CHECK ONE	PAP	ER:		DISKE	TIE.
Name of Office Soug		i		D. MC	ATE OF ELECTION	District Number	Office		Party Code	County Code
Bethlehem	C. Ly Council	,		5	17 2011	1	OTH)EM	48
				7	17 1071	44 6 T G AS	, , , , , , , , , , , , , , , , , , ,	- 1	-	FOR CODES
Summary of R	conints N	O. DAY YE	AR.	MO	DAY YEAR					ALA,
and Expenditur		4 20	// то	5	2 2011			14. 	<u>-</u>	EREO
A. Amount Brough	t Forward From Last Re	port	\$	- 0	100	1	a fam. La fam. La fam.	- 12 - 21 h	\supset	5
B. Total Monetary	Contributions and Receip	ots (From Sched	dule I) \$	4.	5 79,00	l			င့်၁	
C. Total Funds Ava	ailable (Sum of Lines A	and B)	\$	4	579.00		Ĵ		<u> </u>	
D. Total Expenditur	res (From Schedule III)		\$	え 。	190039					
E. Ending Cash Bal	ance (Subtract Line D fr	om Line C)	\$	る,	388.61					
F. Value of In-Kin	d Contributions Received	l (From Schedu	ie II) \$		00.00					
G. Unpaid Debts an	d Obligations (From Sch	edule IV)	\$	11	16.78					
PART L TIE this is	Committee report, to		FFIDAVIT SE			a registre s	ign here		4. 77 (ct.)	true,
	MYCommission	ad. (d):(Constitutions on			****					
ART II - If this is	a report of a Candida	te's Authorized	Committee	e, cand	lidate shall sign he	re.	7.1.	i betar		
swear (or affirm) tha	it to the best of my knowle	dge and belief th	is political co	ommitte	e has not violated a					
					*					

SCHEDULE I

PAGE 2 OF

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page		
Name of Filing Committee or Candidate Friends of Michael A Rechioti	Reporting Per	riod /4/11 To <u>5/2/11</u>
1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS	PER CON	TRIBUTOR
TOTAL for the Reporting Period	d (1)	\$ 650,00
2. CONTRIBUTIONS \$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)		\$ 2,529,00
TOTAL for the Reporting Period	d (2)	\$ 2,529.00
3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		
Contributions Received from Political Committees (Part C)		s 0.00
All Other Contributions (Part D)		\$ 1,400.00
TOTAL for the Reporting Period	ı (3)	\$ 1,400,00
4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CH	ÆCKS, ETC	: (FROM PART E)
TOTAL for the Reporting Period	(4)	\$ 0.00
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		s 4,579.00

Cover Page, Item 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 Candidate		Reporting		111 -10/11
Friends of Michael Reconsti		From _	4//	/// To 5/9/11
		DATE		AMOUNT
Full Name of Contributor	MO.	24	YEAR	\$ 150.00
Donaly Mackaravitz Mailing Address Mackaravitz	MO.	DAY	// YEAR	130,00
509 Whitehill Koad				1 \$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	
				\$
Full Name of Contributor Lavra Tobey Mailing Address	MO.	26	YEAR	\$ 200.00
Mailing Address	MO.	DAY	YEAR	
1824 Paral 1400				7 \$
15 1 7 5 6 4 6 19 to A	Mo.	DAY	YEAR	1_
Allentown PA 18109 -				\$
Full Name of Contributor - Christa Rimonneau	MO.	DAY	YEAR	\$ 150.00
Mailing Address	1 2 Mo.	DAY	YEAR	+ / 30,00
586 P. E. St Apt. 1A		DAT	1500	† \$
City State, Zip Code (Plus 4)	MO.	DAY	YEAR	
City Brooklyn State Zip Code (Plus 4)				\$
Mile Norman of Committees of	MO.	DAY	YEAR	\$ 100 = 5
Mailing Address Mailing Address	2 Mo.	DAY	/ / YEAR	\$ 100.00
34. W. Elizabeth Ave	1410.	DAT	TEAN	\$
City State Zin Code (Plus A)	Mo.	DAY	YEAR	
Bethlehem PA 18018 -				\$
Full Name of Contributor	MO.	DAY	YEAR	\$ 10d as
Mailing Address Meiling Address Amy R. Frantz	2 MO.	10 DAY	i/	\$ 100.00
Meiling Address 225 E. Union Blud.	4	20	YEAR //	\$ 100.00
	MO.	DAY	YEAR	100.00
Bethlehem PH 18018 -				\$
Sull Marco of Contributor 4	MO.	DAY	YEAR	
Karen Dolan	2	10	//	\$ 100.00
Mailing Address 55 Bridle Path Rd	, MO.	DAY	YEAR	\$
	MO.	DAY	YEAR	
Bethlehem PA 13018 -	7			\$
Full Name of Contributor	MO.	DAY	YEAR	
Shawn M. Price	7	10	11	\$ 100.00
Mailing Address 1036 Maple St	MO.	DAY	YEAR	\$
	MO	DAY	YEAR	
Bethlehem PA 18018 -	MIO ₂	DAT	TEAR	\$
Full Name of Contributor	MO.	DAY	YEAR	
Christine M. Dutresne	2	10	17	\$ 150.00
Mailing Address 4065 Ruth Rd	MO.	DAY	YEAR	\$
				*
Bethlehem PA 18020 -	MO.	DAY	YEAR	\$
		<u> </u>		PAGE TOTAL
Enter Crond Total of Davi D on Dahadula 1 Datallad Durana	n, D	Ca -4! -	ي ا	\$ 1,150.00
Enter Grand Total of Part B on Schedule I, Detailed Summar	y rage,	Section	۷.	3 1/10000

Reporting Period

PART B

Name of Filing Committee or Candidate

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.)

Friends of Michael Recolmoti	From	1/4/1	11 To 5/2/11
	DATE		AMOUNT
Full Name of Contributor Michael J. Spinella, Z	DAY	ZUII	\$ 75.00
Mailing Address 40/5 R + Rd		YEAR	\$
Mailing Address Mobs Roth Rd City Bethlehem Full Name of Contributor Full Name of Contributor Full Name of Contributor Mo Mo Mo Mo Mo Mo Mo Mo Mo	DAY	YEAR	\$
Full Name of Contributor	DAY	YEAR	
Scott Keynolds 2	10	2011	\$ 80.00
Mailing Address 2431 Wood Stock Pr	DAY	YEAR	\$
Bethlehem PH 18017-	DAY	YEAR	\$
Full Name of Contributor John D. Maxwell Z	7	YEAR ZO//	\$ 250.00
Mailing Address 3712 E. V. ew Dr.		YEAR	\$
City Ore field PH 18069 -	. DAY	YEAR	
<u> </u>		UEAR	\$
Full Name of Contributor George T. Treisner 2		ZCI/	\$ 50.00
Mailing Address 236 E. Ethein St 2		2011	\$ 50.00
Bethlehem PA 18018 - MO	DAY	YEAR	\$
Full Name of Contributor		YEAR	A 7
James Creedon 4 Meiling Address		Z011	\$ 100.00
1455 Manor Dr	DAY	YEAR	\$
Bethkhim PH 18018 -	DAY	YEAR	\$
Full Name of Contributor Katherine E. Hilgert 5		YEAR Zûli	\$ 100,00
Mailing Address 1160 Yorkshire Ave	DAY	YEAR	\$
Gity Bethlehem PA 18018 - Ma	DAY	YEAR -	\$
Full Name of Contributor - C. O .	DAY	YEAR	
Jettrey Parks 4	20	2011	\$ 100.00
Mailing Address 223 E. Church St	DAY	YEAR	\$
Bethlehem 18/1/8010 - MO.	DAY	YEAR	\$
Full Name of Contributor Luke R. Cunningham 40.	DAY	YEAR ZUII	\$ 249.00
Mailing Address 1325 (lay 5) City State Zin Code (Plus 4)		YEAR	\$
Gethlehem 177 18017 - MO.	DAY	YEAR	
1 Jerunum 177 / 10010 -			\$ PAGE TOTAL
Enter Grand Total of Part B on Schedule I, Detailed Summary Page	, Sectio	on 2.	\$ 1,054.00

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 Candidate	1	,	"	Reporting		-1-1:	
Friends of Michael	Kuc	hich		From _	1/4/11	To 5/2/11	
				DATE		AMOUNT	
Full Name of Contributor Robert Sus	. K ₀		Mo.	ZU	YEAR ZOLI		
Mailing Address	1	\bigcap	Mo.	DAY	YEAR	\$	***************************************
1006 Bucking Allentown) ham I State	1 Zip Code (Plus 4)	MO.	DAY	YEAR	4	
Allentown	PA	18103 -	**************************************	V/7.	1.27	\$	
Full Name of Contributor Andrew Gra			Mo.	DAY Z9	YEAR ZUII	\$ 75.00	
Mailing Address			MO.	DAY	YEAR		
Main St	T State	Zip Code (Plus 4)		1	1.754.0	\$	***************************************
Bethlehem	PA	Zip Code (Plus 4) 	MO.	DAY	YEAR	\$	
Full Name of Contributor			МО. ∗	DAY	YEAR	- \$	
Mailing Address			4	L KAV	- VEAD		
Wanning Address			мо:	DAY	YEAR	\$	
City	State	Zip Code (Plus 4)	мо.	DAY	YEAR	1	
Full Name of Contributor		_	L NO	- NAV	T VE AD	\$	
			MO.	DAY	YEAR	\$	
Mailing Address		***************************************	мо.	DAY	YEAR	\$	***************************************
City	State	Zip Code (Plus 4)	Mo.	DAY	ŸEAR		
						\$	
Full Name of Contributor			MO.	DAY	YEAR	\$	
Mailing Address			MO.	DAY	YEAR		
				<u> </u>		\$	
Cíty	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
Full Name of Contributor			MO.	DAY	YEAR		-
Mailing Address						\$	
Mailing Address			MO.	DAY	YEAR	\$	
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR		
	لــــــــا		4			\$	
Full Name of Contributor			мо.	DAY	YEAR	\$	
Mailing Address			мо.	DAY	YEAR	\$	
City	State	Zip Code (Plus 4)	Mo.	DAY	YEAR	Ψ	
					350	\$	
Full Name of Contributor			MO.	DAY	YEAR	\$	
Mailing Address			MO.	DAY	YEAR		
						\$	
City	State	Žip Code (Pius 4) —	MO.	DAY	YEAR	\$	
					-	PAGE TOTAL	
Enter Grand Total of Part B on Sched	dule (.	Detailed Summar	v Page, !	Section		\$ 325.00	
milital militaries to some or react or or or or constant	Jui,	Dotanioa Cannina.) · ~3~, ~	Jeou	· - I	J 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	

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ALL OTHER CONTRIBUTIONS

PAGE 6 OF

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			- 1	Reporting		
Friends of Michael K	Recci	histi		From _	1/4/11	1 To <u>5/2/11</u>
				DATE		AMOUNT
Full Name of Contributor			Mo.	DAY		
Mailing Address — A Milling Address	rox		/ /	29 DAY	TO11 YEAR	
1834 Pennsylvan,	. 4	Auc		 		\$
City VIII-	State	Zip Code (Plus 4)	MO.	DAY	YEAR	<u>.</u>
Allentown	<u> </u>	1/8/07 -	2221128		<u>'</u>	\$
Employer Name .	•		Occupat	AHO	orney	Partner
Fox Tobey F.C. Employer Mailing Address/Principal Place of Business	;	1 111 1	1	<i>a</i>	• • • • • • • • • • • • • • • • • • • •	3
1834 Pennsylvania	n H	Tre Allenton			8/09	
Full Name of Contributor Broughn & D		_	мо. Z	DAY Z	YEAR ZOII	\$ 150.00
			MO.	DAY		\$ 250.00
38 V. Market	<u> </u>	T	4	19		1 2 20.00
Beth lehen	State		MO.	DAY	YEAR	\$
F 1			Occupat	tion		<u> </u>
Partnership - L	-aw	Firm				
Employer Mailing Address/Principal Place of Business			,			
The state of Contributor			MO.	DAY	YEAR	1
Full Name of Contributor Dennis E. 1	Ben	ner	4/	70	Z0//	\$ 500.00
Mailing Address			мó.	DAY	YEAR	\$
2005 C, Ly L.	10 terete	HVE	<u> </u>	<u> </u>		1
2005 C, ty L Bethlehem	"p")	118017 -	MO.	DAY	YEAR	\$
Employer Name		1100.	Occupati	Lion . ,	<u></u>	
Senner & Piperal Employer Mailing Address/Principal Place of Business	.to		<u>/</u>	AHora	ney/	Fartner
Employer Mailing Address/Principal Place of Business 2005 (. ty L. ne	Aux	. Bothleh	10tm	OA	781	117
Full Name of Contributor	110.	10011110	MO.	DAY	YEAR	/ /
rull Name of Contributor				+==		\$
Mailing Address		And the state of t	мо.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	-
City	3.4	Zip Code (Plus 4)	MUS	Va.	7EM	\$
Employer Name		L	Occupati	ion		
Additional Plane of Rusiness					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Employer Mailing Address/Principal Place of Business						
Full Name of Contributor			MO.	DAY	YEAR	
		,				\$
Mailing Address			MO,	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	Mo.	DAY	YEAR	
						\$
Employer Name	.	,	Occupation	on		
Employer Mailing Address/Principal Place of Business		***************************************				
imployer mailing Address,						
The state of the s				~		PAGE TOTAL
Enter Grand Total of Part D on Sched	Jule I,	, Detailed Summary	/ Page,	Section	1 3.	\$ 1, 400 .00
CED EDG (T. CD)					,	4 · · · · · · · · · · · · · · · · · · ·

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SCHEDULE II

PAGE 7 OF //

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 Friends of Michael	Recchioti	Reporting Per	iod 1/1	1 to 5/8/11
1. UNITEMIZED IN-KIND CONTRI	IBUTIONS RECEIVED - VALUE OF \$	50.00 OR I	ESS	PER CONTRIBUTOR
	TOTAL for the Reporting Period	d (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS REC	CEIVED - VALUE OF \$50.01 TO \$25	50.00 (FROM	1 PAI	
	TOTAL for the Reporting Period	d (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECE	EIVED - VALUE OVER \$250.00 (FRO	M PART G)	
	TOTAL for the Reporting Period	d (3)	\$	500.00
TOTAL VALUE OF IN-KIND CONTREPORTING PERIOD (Add and enter and 3; also enter on Page 1, Repo	er amount totals from Boxes 1, 2,		\$	500.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate		Reporting		1 - 8/2/11			
Friends of Michael	Kecchi	At in the second of the second		From _	1/9//	1 To 5/2/11	
				DATE		AMOUNT	
Full Name of Contributor Daile Rank		-	MO.	ZU	2011	\$ 500 00	
			Mo.	DAY	YEAR	\$	
Mailing Address 17 W. 2nd S City Bethlehem Employer of Contributor Starter Richard	State	7in Code (Plus 4)	MO.	DAY	YEAR	*	
Bethlehem	PA	18015 -	WIU.	DAT	TEAR	\$	
Employer of Contributor	inc Out	<u> </u>	Occupa				
Employer Mailing Address/Principal Place of Bus	iness		Descrip	Civn ition of, Con			
17 W. 2nd 5t.			10	od/Ve	nue -	for fundraiser	
Full Name of Contributor			MO.	DAY	YEAR	s	
Mailing Address	····		Mo.	DAY	YEAR		
						1 \$	
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
Employer of Contributor			Occupa	lion	<u> </u>	1	
							
Employer Mailing Address/Principal Place of Busi	ness		Descrip	tion of Con	tribution		
Full Name of Contributor			мо.	DAY	YEAR	\$	
Mailing Address						3	
Mailing Address			MQ.	DAY -	YEAR	\$	
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
Employer of Contributor			Occupat	ian			
Employer of Contributor			Оссарах	1011			
Employer Mailing Address/Principal Place of Busi	ness		Descrip	ion of Con	tribution		
Full Name of Contributor		was manufactured and the second and	MO.	DAY	YEAR		
Pull Name of Contributor					<u>rean</u>	\$	
Mailing Address			MO.	DAY	YEAR.	s	
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR		
						\$	
Employer of Contributor			Occupat	ion			
Employer Mailing Address/Principal Place of Busin	ness		Descript	ion of Cont	ribution		
	_						
Full Name of Contributor			MO.	DAY	YEAR	\$	
Mailing Address			MO.	DAY	YEAR	<u> </u>	
City		Tie Code (Dive 4)		DAY	VEAD	\$	
···,	State	Zip Code (Plus 4)	MO.	DAY	YEAR.	\$	
Employer of Contributor		<u></u>	Occupati	on			
Employer Mailing Address/Principal Place of Busin	ess		Descript	ion of Conti	ribution		
Enter Grand Total of Part C C-	bodul- II	In-Vind Contrib.	tions D	atail		PAGE TOTAL	
Enter Grand Total of Part G on Sc Summary Page, Section 3.	meaule II,	III-KING CONTIBU	HOUS D	eranea		\$ 500.00	

DSEB-502 (7-99)

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate		Reporting Period	
Friends of Mahael D. Recelus	Ĺ	From 1/4/11 To 5/2/11	
Priests of printer D. Messelling			
To Whom Paid Bethlehem Brew Wo	.Y.	2 10 2011 \$ 603.40	
Balantina Address of the Company of	//5	Description of Expenditure	
Main St		Food / Venue tor tundance	
	State Zip Code (Plus 4)		······
Gethlehem	PH 10010 -		
To Whom Bold		MO. DAY YEAR Amount Z // ZOI/ \$ 35.00	
Bethlehem NAHC	./ 2	MO. DAY YEAR Amount Z 1/ Zoi/ \$ 35.00 Description of Expenditure	
Mailing Address		Description of Expenditure	
City	State Zip Code (Plus 4)	Ad in Program	······
Bethlehem	State Zip Code (Plus 4)		
		MO DAY YEAR Amount	
Capital Promotion	3	MO. DAY YEAR Amount \$ 762.96 Description of Expenditure	
To Whom Paid Cap to 1 Promotion Mailing Address PO Box 231			***************************************
$\begin{array}{c c} & & & & & & & & & & & & & & & & & & &$	Stage Zip Code (Plus 4)	Lampaign Signs	
Glens, de	State Zip Code (Plus 4)		
7 W		A A A A A A A A A A A A A A A A A A A	
Universal Printing Company	116	MO. DAY YEAR Amount 32.61	i
Mailing Address		Described of Francisco	
1203 O'Neill Highway		Walk Carels	
# / -	State Zip Code (Plus 4)		
Dumove	PH -		
To Whom Paid < / /		MO. DAY YEAR Amount	
Staples		MO. DAY YEAR Amount \$ 10.60	
Mailing Address Union Divid		Description of Expenditure	
City	State Zip Code (Plus 4)	Office Supplies	
Bethlehem	FA 18017 -		
To Whom Paid 🕜 /		MO. DAY YEAR Amount	
To Whom Paid Staples		\$ 46.38	
Mailing Address		Description of Expenditure	
Union Dlud	T. C	Office Supplies	
Bethlehem	State Zip Code (Plus 4) PA 18018 -		
To Whom Paid	11.1/ 1/00.0	MO. DAY YEAR Amount	
V.S. Postmaster		MO. DAY YEAR Amount \$ -/7,52	
Mailing Address		Description of Expenditure	
		Stamps	
O III	State Zip Code (Plus 4)		
1sethlehem	PA 18016 -		
To Whom Paid		MO. DAY YEAR Amount	
Wailing Address		Description of Expenditure	
PO Box 45950		Online Donation Fee	
City	State Zip Code (Plus 4)	Chance Population in Co	
Omaha	N= 6845 -		
		PAGE TOTAL	
Enter Grand Total of Expenditures on Pa	ge 1 Report Cover P		0
within minim raims as mybrithicalon All LD.	of it inchair on tell i	Ta α, 1) ()	~

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Friends of Michael Reco	Luck	Reporting Period From 1/4/11 To 5/2/11
Prient's of priconce perc	Mrol.	From 17 17 10 34/11
Mailing Address		Description of Expenditure Fee for online contributions
Dity Northin View To Whom Paid	State Zip Code C. F. 94043	(Plus 4)
TO WHOM YELD		MO. WEAR AMOUNT
Mailing Address 1600 Amphilheal	re Parkay	Pee for online contributions
Mailing Address 1600 Amphilheats Sity Mountain View	State Zip Code Gigoig3	(Plus 4)
Country of Northampton		MO. DAY YEAR Amount 3 9 // \$ 25 00 Description of Expenditure
		retition Filing Fee
City Easter	State Zip Code	(Pius 4)
To Whom Paid US Postmaske Mailing Address		MO. DAY VEAR Amount 9 06 1 \$ 17.60 Description of Expenditure
-		
Bethléhem	State Zip Code	(Plus 4)
o Whom Paid		MO. DAY YEAR Amount
failing Address		Description of Expenditure
ity	State Zip Code	(Plus 4)
o Whom Paid		MO. DAY YEAR Amount
ailing Address		Description of Expenditure
ity	State Zip Code	(Pius 4)
o Whom Paid		MO. DAY YEAR Amount
ailing Address		Description of Expenditure
ty	State Zip Code ((Pius 4)
Whom Peid		MO. DAY YEAR Amount
ailing Address		Description of Expenditure
ty	State Zip Code (Plus 4)
		PAGE TOTAL
nter Grand Total of Expenditures on	Page 1, Report Co	over Page, Item D. \$ 50 49

STATEMENT OF UNPAID DEBTS

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

Name of Filing Committee or Candidate Friends of Michael Recchiufi			Reporting From	Period	11 To 5/2/11
Triends of ruchae Recenius					
Name of Creditor Michael Rechibit					Outstanding Balance of Debt
Mailing Address 1422 Monocacy 51 City	DATE DEBT	MO.			
Be thlehem	INCURRED	State PA	Zip Code / 80/8-	e (Plus 4)	-
Description of Debt			10-10		
Name of Creditor 11 1 0 1					Outstanding Balance of Debt
Mailing Address	DATE	1" MO	1 820	T. Uexp ®	\$ 44.00
14/22 Monocacy 5+	DATE DEBT INCURRED	/ MO.	10	11	
Name of Creditor Michael Rechiviti Mailing Address 14/22 Monocacy 5† City Sethkhum Description of Debt		State	Zip Code 18018 -	(Plus 4)	
Description of Debt Fostage					
Name of Creditor					Outstanding Balance of Debt \$
Mailing Address	DATE	мо.	DAY	YEAR	
	DEBT INCURRED		T		
City		State	Zip Code	(Plus 4)	
Description of Debt					Andrew and the second s
Name of Creditor					Outstanding Balance of Debt
Mailing Address	DATE DEBT	_мо.	DAY	YEAR	! \$
City	INCURRED	State	Zip Code	(Plus 4)	
Description of Debt			-		
Name of Creditor					Outstanding Balance of Debt \$
Mailing Address	DATE DEBT	MC.	DAY	YEAR	
City	INCURRED	State	Zip Code	(Plus 4)	
Description of Debt				,	
Name of Creditor					O to adia Dilata of Date
					Outstanding Balance of Debt \$
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR.	
City	1 ictoria	State	Zip Code	(Plus 4)	
Description of Debt			<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	**************************************	
					PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, F	Report Cover	Page, It	tem G.		\$ 116. 78

CAMPAIGN FINANCE REPORT

PAGE 1 OF (COVER PAGE)

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

Filer Identification	Repo			CANDID	ATE Y	COM	MITEE	2.	LOBE	3. BYIST
Number: Name of Filing Committee, Candidate or Lobbyist:	Filed	ау:						J		
Michael D. Rec										
1422 Monocacy	<u>5 †</u>									
Be thlehem			St	ate:	A	Zip Co	de: 3018			
I ITE OI LAMMA DATE THE MAJORITAL I LAME	2ND FRIDAY PRE-PRIMARY	2. X		AY PRIMAI	1 p. 124 12 mm	AMEND REPORT		YES		NO
6TH TUESDAY 4.	2NO FRIDAY	5.	30 D	AY ELECTI	6. ON:-	TERMIN		YES		NO.
(place X to the right of report type) REPORT (place X to ANNUAL 7. Property	YEAR			METH		PAP	ER.	\times	DISK	TIE.
Name of Office Sought by Candidate:					ELECTIO	District	Office		arty	County
Bethlehem City Counce	/		MO.	DAY	YEAR	Number	OTH		Eode EM	Code 48
Getrie nem Cory			5	17	2011		<u> </u>			FOR CODES
MO I	AY YEAR		MO.	DAY	YEAR'		OR OF	ICE U	SE O	NLY FILE
Summary of Receipts and Expenditures from:	3011	То	5	2	2011					
A. Amount Brought Forward From Last Report		\$). O	0	1	, <u>5</u>	12		
B. Total Monetary Contributions and Receipts (Fi	rom Schedule I)	\$	0	. <i>O</i>	0		列門三	2 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	.,	
C. Total Funds Available (Sum of Lines A and B)	\$	0	,00)				4	
D. Total Expenditures (From Schedule III)		\$ _	1/6	7.	8	1		Ċ	-	NIERED
E. Ending Cash Balance (Subtract Line D from L	ine C)	\$ ==	-1/6	, 18]			 >	03
F. Value of In-Kind Contributions Received (Fro	m Schedule II)	\$	Ô	.00			ŠŢ.		₹ ;?	
G. Unpaid Debts and Obligations (From Schedule	IV)	\$	0	UÓ					三	
	AFFIDA						,			
PART I - If this is a Committee report, treasur	er sign here∠ l	f this i	s a Ca	ndidate	report.	candidate :	ign her <i>e</i>		, and a second	
c d										ue,
S										
PART II : If this is a report of a Candidate's		mitte=	Candin	ale ch-	II eigh L		8. *		he and	
I swear (or affirm) that to the best of my knowledge as							s of the	Act of	June	3, 1937
(P.L. 1333, No. 320) as amended. Sworn to and subscribed before me this										
day of	20	1								
		1 -			Sign	ature of Car	didate			
Signatura		r -			· · · · · · · · · · · · · · · · · · ·	Printed Nan	ne			
My commission expiresMO. DAY	YR.) -	Δτ	a Code		- Da	ytime Te	lenhone	Mumb	

SCHEDULE I

PAGE 2 OF _________

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page			
Name of Filing Committee or Candidate Michael Reachich	Reporting Per From i/L	riod L//11	то <u>5/2/11</u>
1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS	PER CON	ŢŖĬBĹ	ЛOR
TOTAL for the Reporting Period	d (1)	\$	000
2. CONTRIBUTIONS \$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	d (2)	\$	0.00
3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)			
Contributions Received from Political Committees (Part C)	· · · · · · · · · · · · · · · · · · ·	\$	0.00
All Other Contributions (Part D)	!	\$	0.00
TOTAL for the Reporting Period	ı (3)	\$	0.00
4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CH		;; (FRC	
TOTAL for the Reporting Period	(4)	\$	0.00
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		\$	0.00

Cover Page, Item B.)

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Michael Recchivit	Fi	Reporting Period From
		MO. DAY YEAR Amount
Mailing Address		Description of Expenditure Website Host Fee
City	State Zip Code (Plus	(Loan to Campaign)
To Whom Paid U.S. Postmasier Mailing Address		MO: DAY YEAR Amount / / / / \$ 44, 00 Description of Expenditure
City	State Zip Code (Plus	Postage
13eth lehem	PA 18016 -	(Loun to Campaign)
To Whom Peid Mailing Address		MO: DAY YEAR Amount \$
City	State Zip Code (Plus	Description of Expenditure
	State Zip Code (Plus	4)
To Whom Paid		MO: DAY YEAR Amount \$
Mailing Address		Description of Expenditure
City	State Zip Code (Plus	4)
To Whom Paid		MO. DAY YEAR Amount
Mailing Address		Description of Expenditure
City	State Zip Code (Plus	4)
To Whom Paid		MO. DAY YEAR Amount
Mailing Address		Description of Expenditure
City	State Zip Code (Plus	4)
To Whom Paid		MO. DAY YEAR Amount
Mailing Address		Description of Expenditure
City	State Zip Code (Plus	4)
To Whom Paid		MO. DAY YEAR Amount
Mailing Address		Description of Expenditure
City	State Zip Code (Plus	4)
		PAGE TOTAL
Enter Grand Total of Expenditures	on Page 1, Report Cover	Page, Item D. \$