

Commonwealth of Pennsylvania
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="text"/>	Report Filed By: <input type="text"/>	1. CANDIDATE <input checked="" type="checkbox"/>	2. COMMITTEE <input type="checkbox"/>	3. LOBBYIST <input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist: Matthew J. McKernan				
Street Address: 1969 Easton Avenue				
City: Bethlehem		State: PA	Zip Code: 18017 -	
TYPE OF REPORT (place X to the right of report type)	1. 1ST TUESDAY PRE-PRIMARY	2. 1ST FRIDAY PRE-PRIMARY <input checked="" type="checkbox"/>	3. 3D DAY POST-PRIMARY	AMENDMENT REPORT YES <input type="checkbox"/> NO <input type="checkbox"/>
	4. 2ND TUESDAY PRE-ELECTION	5. 2ND FRIDAY PRE-ELECTION	6. 3D DAY POST-ELECTION	7. TERMINATION REPORT YES <input type="checkbox"/> NO <input type="checkbox"/>
	7. ANNUAL REPORT	YEAR: 2015	FILING METHOD: CHECK ONE	PAPER <input type="checkbox"/> DISCRETE <input type="checkbox"/>

Name of Office Sought by Candidate: Bethlehem City Council	DATE OF ELECTION	District Number	Office Code	Party Code	County Code
	MO. DAY YEAR 5 19 2015			DEM	48/39
(SEE INSTRUCTIONS FOR CODES)					

Summary of Receipts and Expenditures from:	MO. DAY YEAR 1 1 2015	To	MO. DAY YEAR 5 4 2015	
A. Amount Brought Forward From Last Report	\$ 0			
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ 0			
C. Total Funds Available (Sum of Lines A and B)	\$ 0			
D. Total Expenditures (From Schedule III)	\$ -5,309			
E. Ending Cash Balance (Subtract Line D from Line C)	\$ -5,309			
F. Value of In-Kind Contributions Received (From Schedule II)	\$ 0			
G. Unpaid Debts and Obligations (From Schedule IV)	\$ 0			

FOR OFFICE USE ONLY

AFFIDAVIT SECTION

PART I If this is a report of a Candidate's Authorized Committee, candidate shall 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 _____

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>Matthew McKernan</i>	Reporting Period From <i>1/1/2015</i> To <i>4/5/2015</i>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$ <i>∅</i>

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

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ <i>∅</i>
All Other Contributions (Part D)	\$ <i>∅</i>
TOTAL for the Reporting Period	(3) \$ <i>∅</i>

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

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>	\$ <i>∅</i>
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**SCHEDULE III
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate Matthew McKernan	Reporting Period From 1/1/2015 To 5/4/2015
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To Whom Paid Friends of Matthew McKernan	MO	DAY	YEAR	Amount
1969 Easton Avenue				\$ 400.00
Mailing Address 1969 Easton Avenue	Description of Expenditure Loan			
City Bethlehem	State PA	Zip Code (Plus 4) 18017 -		
To Whom Paid Friends of Matthew McKernan	MO	DAY	YEAR	Amount
1969 Easton Avenue				\$ 4500.00
Mailing Address 1969 Easton Avenue	Description of Expenditure Loan of services from Mosaic			
City Bethlehem	State PA	Zip Code (Plus 4) 18017 -		
To Whom Paid Friends of Matthew McKernan	MO	DAY	YEAR	Amount
1969 Easton Avenue				\$ 409.00
Mailing Address 1969 Easton Avenue	Description of Expenditure Loan			
City Bethlehem	State PA	Zip Code (Plus 4) 18017 -		
To Whom Paid	MO	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	Zip Code (Plus 4)			
To Whom Paid	MO	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	Zip Code (Plus 4)			
To Whom Paid	MO	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	Zip Code (Plus 4)			
To Whom Paid	MO	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	Zip Code (Plus 4)			
To Whom Paid	MO	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	Zip Code (Plus 4)			

PAGE TOTAL
\$

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

Commonwealth of Pennsylvania
CAMPAIGN FINANCE REPORT

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

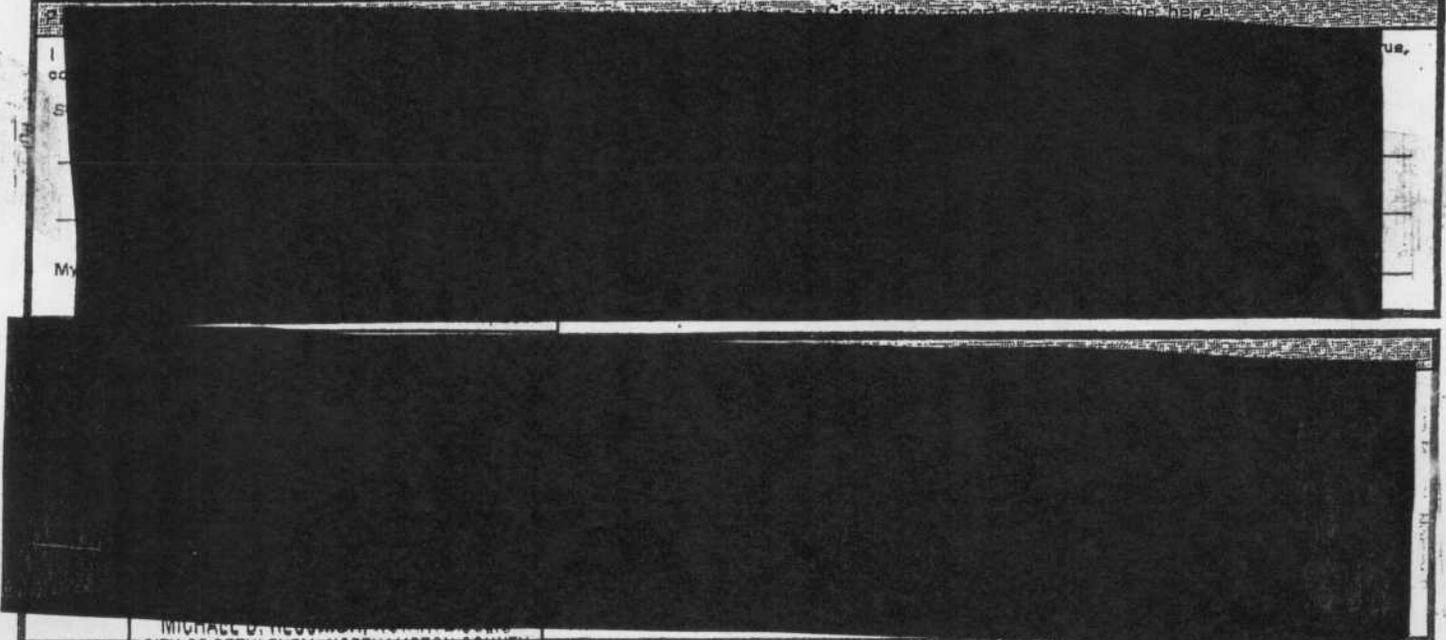
Filer Identification Number:	Report Filed By:	CANDIDATE 1.	COMMITTEE 2. <input checked="" type="checkbox"/>	LOBBYIST 3.
Name of Filing Committee, Candidate or Lobbyist: Friends of Matthew McKernan				
Street Address: 1969 Easton Avenue				
City: Bethlehem		State: PA	Zip Code: 18017 -	
TYPE OF REPORT (place X to the right of report type)	1. 1ST TUESDAY PRE-PRIMARY	2. 2ND FRIDAY PRE-PRIMARY <input checked="" type="checkbox"/>	3. 30-DAY POST-PRIMARY	AMENDMENT REPORT YES NO
	4. 6TH TUESDAY PRE-ELECTION	5. 2ND FRIDAY PRE-ELECTION	6. 30-DAY POST-ELECTION	7. TERMINATION REPORT YES NO
	7. ANNUAL REPORT	YEAR: 2015	FILING METHOD: PAPER DISKETTE	CHECK ONE

Name of Office Sought by Candidate:	DATE OF ELECTION MO. DAY YEAR	District Number	Office Code	Party Code DEM	County Code 48/39
					(SEE INSTRUCTIONS FOR CODES)

Summary of Receipts and Expenditures from:	MO. DAY YEAR	To	MO. DAY YEAR
	1 1 2015		5 4 2015

FOR OFFICE USE ONLY	
A. Amount Brought Forward From Last Report	\$ 0
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ 9,484.00
C. Total Funds Available (Sum of Lines A and B)	\$ 9,484.00
D. Total Expenditures (From Schedule III)	\$ 4,152.90
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 5,331.10
F. Value of In-Kind Contributions Received (From Schedule II)	\$ 150.00
G. Unpaid Debts and Obligations (From Schedule IV)	\$ 5,309.00

AFFIDAVIT SECTION



MICHAEL D. REYNOLDS
 CITY OF BETHLEHEM, NORTHAMPTON COUNTY
 MY COMMISSION EXPIRES JANUARY 9, 2017

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends of Matthew McKernan</i>	Reporting Period From <i>1/1/2015</i> To <i>5/4/2015</i>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
	(1)	\$

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)		
Contributions Received from Political Committees (Part A)	\$	<i>50.00</i>
All Other Contributions (Part B)	\$	<i>2,125.00</i>
TOTAL for the Reporting Period	(2)	\$ <i>2,175.00</i>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		
Contributions Received from Political Committees (Part C)	\$	<i>Ø</i>
All Other Contributions (Part D)	\$	<i>7,309</i>
TOTAL for the Reporting Period	(3)	\$ <i>7,309</i>

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)		
	(4)	\$ <i>Ø</i>

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>	\$ <i>9,484.00</i>
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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.

Name of Filing Committee or Candidate <i>Friends of Matthew McKernan</i>	Reporting Period From <i>1/1/15</i> To <i>5/4/15</i>
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				DATE			AMOUNT
Full Name of Contributing Committee				MO	DAY	YEAR	
<i>Friends of Adam Waldron</i>				<i>4</i>	<i>28</i>	<i>2015</i>	\$ <i>50.00</i>
Mailing Address				MO	DAY	YEAR	
<i>511 2nd Ave</i>							\$
City		State	Zip Code (Plus 4)	MO	DAY	YEAR	
<i>Bethlehem</i>		<i>PA</i>	<i>18018 -</i>				\$
Full Name of Contributing Committee				MO	DAY	YEAR	
Mailing Address				MO	DAY	YEAR	
							\$
City		State	Zip Code (Plus 4)	MO	DAY	YEAR	
							\$
Full Name of Contributing Committee				MO	DAY	YEAR	
Mailing Address				MO	DAY	YEAR	
							\$
City		State	Zip Code (Plus 4)	MO	DAY	YEAR	
							\$
Full Name of Contributing Committee				MO	DAY	YEAR	
Mailing Address				MO	DAY	YEAR	
							\$
City		State	Zip Code (Plus 4)	MO	DAY	YEAR	
							\$
Full Name of Contributing Committee				MO	DAY	YEAR	
Mailing Address				MO	DAY	YEAR	
							\$
City		State	Zip Code (Plus 4)	MO	DAY	YEAR	
							\$
Full Name of Contributing Committee				MO	DAY	YEAR	
Mailing Address				MO	DAY	YEAR	
							\$
City		State	Zip Code (Plus 4)	MO	DAY	YEAR	
							\$
Full Name of Contributing Committee				MO	DAY	YEAR	
Mailing Address				MO	DAY	YEAR	
							\$
City		State	Zip Code (Plus 4)	MO	DAY	YEAR	
							\$
Full Name of Contributing Committee				MO	DAY	YEAR	
Mailing Address				MO	DAY	YEAR	
							\$
City		State	Zip Code (Plus 4)	MO	DAY	YEAR	
							\$

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

PAGE TOTAL

\$ *50.00*

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				Reporting Period			
Friends of Matthew McKernan				From	1/1/15	To	4/5/15
				DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR				\$
Nicolette McKernan	3	1	2015				250.00
Mailing Address	MO	DAY	YEAR				\$
138 Lafayette Ct.							
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Trappe	PA	19426 -					
Full Name of Contributor	MO	DAY	YEAR				\$
Irina Lashidze	4	1	2015				100.00
Mailing Address	MO	DAY	YEAR				\$
403 Essex Ct.							
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Lansdale	PA	19446 -					
Full Name of Contributor	MO	DAY	YEAR				\$
Harpapp Chatha	4	1	2015				250.00
Mailing Address	MO	DAY	YEAR				\$
205 W. 4th Street							
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Bethlehem	PA	18015 -					
Full Name of Contributor	MO	DAY	YEAR				\$
Kathleen McLaughlin	4	1	2015				25.00
Mailing Address	MO	DAY	YEAR				\$
2239 Kemmerer Street							
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Bethlehem	PA	18017 -					
Full Name of Contributor	MO	DAY	YEAR				\$
Robert Bilheimer	4	1	2015				50.00
Mailing Address	MO	DAY	YEAR				\$
1419 Fernwood Street							
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Bethlehem	PA	18018 -					
Full Name of Contributor	MO	DAY	YEAR				\$
Lori Novak	4	1	2015				250.00
Mailing Address	MO	DAY	YEAR				\$
2415 W. South Street							
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Allentown	PA	18104 -					
Full Name of Contributor	MO	DAY	YEAR				\$
Bob Kuhns	4	1	2015				50.00
Mailing Address	MO	DAY	YEAR				\$
8773 Summit Circle							
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Fogelsville	PA	18051 -					
Full Name of Contributor	MO	DAY	YEAR				\$
Steven Margolis	4	1	2015				250.00
Mailing Address	MO	DAY	YEAR				\$
190 Main Street							
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
Hampton	NJ	08827 -					
PAGE TOTAL							\$ 1,225.00

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

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 Friends of Matthew McKernan	Reporting Period From <u>1/15</u> To <u>4/5/15</u>
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				DATE			AMOUNT
				MO	DAY	YEAR	
Full Name of Contributor Leo Kurtz				4	11	2015	\$ 25.00
Mailing Address 710 8th Avenue				4	24	2015	\$ 50.00
City Bethlehem	State PA	Zip Code (Plus 4) 18018 -					\$
Full Name of Contributor Greg Solderitch				4	14	2015	\$ 100.00
Mailing Address 2363 Huntington St.							\$
City Bethlehem	State PA	Zip Code (Plus 4) 18017 -					\$
Full Name of Contributor Dennis Perelli				4	28	2015	\$ 100.00
Mailing Address 2364 Huntington St.							\$
City Bethlehem	State PA	Zip Code (Plus 4) 18017 -					\$
Full Name of Contributor Jeffrey Pearsall				4	29	2015	\$ 100.00
Mailing Address 1757 Euclid Avenue							\$
City Bethlehem	State PA	Zip Code (Plus 4) 18018 -					\$
Full Name of Contributor Stephen Melnick				4	28	2015	\$ 200.00
Mailing Address 1624 Easton Avenue							\$
City Bethlehem	State PA	Zip Code (Plus 4) 18017 -					\$
Full Name of Contributor David Ellowitch				4	28	2015	\$ 50.00
Mailing Address 271 Blue Sage Drive							\$
City Allentown	State PA	Zip Code (Plus 4) 18104 -					\$
Full Name of Contributor Timothy Brooks				4	28	2015	\$ 25.00
Mailing Address 4113 Maria Lane							\$
City Bethlehem	State PA	Zip Code (Plus 4) 18017 -					\$
Full Name of Contributor John Saraceno				4	28	2015	\$ 50.00
Mailing Address 2113 Henderson Street							\$
City Bethlehem	State PA	Zip Code (Plus 4) 18017 -					\$

PAGE TOTAL	\$ 700.00
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Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

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 Matthew McKernan</i>	Reporting Period From <i>1/1/2015</i> To <i>5/4/2015</i>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
<i>Murel Thibaud</i>	<i>3</i>	<i>1</i>	<i>2015</i>	\$ <i>2000.00</i>
Mailing Address <i>133 Village Drive</i>	MO.	DAY	YEAR	\$
City <i>Basking Ridge</i>	MO.	DAY	YEAR	\$
State <i>NJ</i>	Zip Code (Plus 4) <i>07920 -</i>			
Employer Name <i>/</i>	Occupation <i>/</i>			
Employer Mailing Address/Principal Place of Business <i>/</i>				

<i>Matthew McKernan</i>	<i>4</i>	<i>28</i>	<i>2015</i>	\$ <i>409.00</i>
Mailing Address <i>1969 Easton Avenue</i>	MO.	DAY	YEAR	\$ <i>4,500.00</i>
City <i>Bethlehem</i>	MO.	DAY	YEAR	\$ <i>400.00</i>
State <i>PA</i>	Zip Code (Plus 4) <i>18017 -</i>			
Employer Name <i>Mosaic</i>	Occupation <i>President</i>			
Employer Mailing Address/Principal Place of Business <i>301 Broadway, Bethlehem PA 18017</i>				

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

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

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	Zip Code (Plus 4)			
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
\$ *7,309*

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 Matthew McKernan</i>	Reporting Period From <i>1/1/2015</i> To <i>4/5/2015</i>
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the Reporting Period	(1)	\$ <i>∅</i>

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)		
TOTAL for the Reporting Period	(2)	\$ <i>150.00</i>

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

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>150.00</i>
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SCHEDULE II
PART F

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate <i>Friends of Matthew McKernan</i>	Reporting Period From <i>1/1/2015</i> To <i>4/5/2015</i>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
<i>Concert Pix Photography</i>	<i>4</i>	<i>10</i>	<i>2015</i>	\$ <i>150.00</i>
Mailing Address <i>2420 Henderson Pl.</i>	MO.	DAY	YEAR	\$
City <i>Bethlehem</i>	MO.	DAY	YEAR	\$
State <i>PA</i>				
Zip Code (Plus 4) <i>18017 -</i>				

Description of Contribution:

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				

Description of Contribution:

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				

Description of Contribution:

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				

Description of Contribution:

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				

Description of Contribution:

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL
\$

**SCHEDULE III
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate Friends of Matthew McKernan	Reporting Period From 1/1/15 To 5/4/15
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To Whom Paid Bethlehem City Democratic Comm.	MO: 4 DAY: 29 YEAR: 2015	Amount \$ 85.00
Mailing Address PO Box 1792	Description of Expenditure Advertisement/Event	
City Bethlehem	State PA	Zip Code (Plus 4) 18016 -

To Whom Paid Lehigh Valley Print Center	MO: 4 DAY: 27 YEAR: 2015	Amount \$ 2,337.17
Mailing Address 306 Broadhead Ave	Description of Expenditure Printing/Mailing	
City Bethlehem	State PA	Zip Code (Plus 4) 18015 -

To Whom Paid Minuteman Press	MO: 3 DAY: 10 YEAR: 2015	Amount \$ 509.65
Mailing Address 123 Broad Street	Description of Expenditure Printing	
City Bethlehem	State PA	Zip Code (Plus 4) 18018 -

To Whom Paid Minuteman Press	MO: 3 DAY: 10 YEAR: 2015	Amount \$ 60.42
Mailing Address 123 Broad Street	Description of Expenditure Printing	
City Bethlehem	State PA	Zip Code (Plus 4) 18018 -

To Whom Paid LEHIGH Valley Print Center	MO: 4 DAY: 14 YEAR: 2015	Amount \$ 331.25
Mailing Address 306 Broadhead Ave.	Description of Expenditure Print/Mail	
City Bethlehem	State PA	Zip Code (Plus 4) 18015 -

To Whom Paid LEHIGH Valley Print Center	MO: 3 DAY: 12 YEAR: 2015	Amount \$ 502.50
Mailing Address 306 Broadhead Ave	Description of Expenditure Printing	
City Bethlehem	State PA	Zip Code (Plus 4) 18015 -

To Whom Paid PA Democratic Party	MO: 4 DAY: 15 YEAR: 2015	Amount \$ 326.71
Mailing Address 229 State Street	Description of Expenditure Software	
City Harrisburg	State PA	Zip Code (Plus 4) 17101 -

To Whom Paid	MO: DAY: YEAR:	Amount \$
Mailing Address	Description of Expenditure	
City	State	Zip Code (Plus 4) -

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL
\$ 4,152.90