

Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

File Identification Number		Report Filed By (Mark X)	Candidate	<input checked="" type="checkbox"/>	Committee	<input type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		Eric Evans						
Street/Address		1955 Butztown Road						
City	Bethlehem	State	PA	Zip Code	18017			

Type of Report (Place x under report type)

1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6 th Tuesday Pre-Election	5- 2 nd Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date of Election (MM/DD/YYYY)		Year	Amendment Report		<input type="checkbox"/>	Termination Report		<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	1/1/22	12/31/22	
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)	\$	0	
E: Ending Cash Balance (Subtract Line D from Line C)	\$	0	
F: Value of In-Kind Contributions Received (From Schedule II)	\$	0	
G: Unpaid Debts and Obligations (From Schedule IV)	\$	0	

Affidavit Section

Part 1- 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, is to the best of my knowledge and belief true, correct and complete.

Commonwealth of Pennsylvania - Campaign Finance Report

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Filer Identification Number		Report Filed By (Mark X)	Candidate	<input type="checkbox"/>	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		Friends of Eric Evans						
Street Address		1955 Butztown Road						
City	Bethlehem	State	PA	Zip Code	18017			

Type of Report (Place x under report type)

1: 6 th Tuesday Pre-Primary	2: 2 nd Friday Pre-Primary	3: 30 Day Post Primary	4: 6 th Tuesday Pre-Election	5: 2 nd Friday Pre-Election	6: 30 Day Post Election	7: Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)		Year	Amendment Report		<input type="checkbox"/>	Termination Report		<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	1/1/22	12/31/22	
A: Amount Brought Forward From Last Report		\$ 1708.91	
B: Total Monetary Contributions and Receipts (From Schedule I)		\$ 0	
C: Total Funds Available (Sum of Lines A and B)		\$ 1708.91	
D: Total Expenditures (From Schedule III)		\$ 490.00	
E: Ending Cash Balance (Subtract Line D from Line C)		\$ 1218.91	
F: Value of In-Kind Contributions Received (From Schedule II)		\$ 0	
G: Unpaid Debts and Obligations (From Schedule IV)		\$ 0	

Part 1 - Affidavit Section

Part 1 - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	
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To Whom Paid	Bethlehem Home Association	Date [MM/DD/YYYY]	5/15/22	\$	340.00
House #	Street Address	6 Hillmon Street			
City	Bethlehem	State	PA	Zip Code	
Description of Expenditure					
Election night - beverages					
To Whom Paid	Friends of Lisa Boscola	Date [MM/DD/YYYY]	10/10/22	\$	150.00
House #	Street Address				
City		State		Zip Code	
Description of Expenditure					
Campaign contribution					
To Whom Paid		Date [MM/DD/YYYY]		\$	
House #	Street Address				
City		State		Zip Code	
Description of Expenditure					
To Whom Paid		Date [MM/DD/YYYY]		\$	
House #	Street Address				
City		State		Zip Code	
Description of Expenditure					
To Whom Paid		Date [MM/DD/YYYY]		\$	
House #	Street Address				
City		State		Zip Code	
Description of Expenditure					
To Whom Paid		Date [MM/DD/YYYY]		\$	
House #	Street Address				
City		State		Zip Code	
Description of Expenditure					
To Whom Paid		Date [MM/DD/YYYY]		\$	
House #	Street Address				
City		State		Zip Code	
Description of Expenditure					