

Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer 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		J. William Reynolds					
Street Address		1718 N New Street					
City	Bethlehem	State	PA	Zip Code	18018		

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)		11/05/24	Year	2024	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	01/01/24	12/31/24	
A. Amount Brought Forward From Last Report	\$	0.00	<p>NORCO ELECTIONS FILED - JAN31'25PM3:21</p>
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	40,000	
C. Total Funds Available (Sum of Lines A and B)	\$	40,000	
D. Total Expenditures (From Schedule III)	\$	40,000	
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

P

amended.

Sworn to and subscribed before me this

day of 20

Signature

My Commission expires

MO. DAY YR.

Signature of Candidate

Printed Name

Area Code

Daytime Telephone Number

SCHEDULE I
Contributions and Receipts
Detailed Summary Page

Filer Identification Number	
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1. Unitemized Contributions and Receipts—\$ 50.00 or Less per Contributor
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Total for the reporting period	(1)	\$	
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2. Contributions of \$ 50.01 to \$ 250.00 (From Part A and Part B)

Contributions Received from Political Committees (Part A)	\$	
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All Other Contributions (Part B)	\$	
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Total for the reporting period	(2)	\$	
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3. Contributions Over \$ 250.00 (From Part C and Part D)

Contributions Received from Political Committees (Part C)	\$	
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All Other Contributions (Part D)	\$	40,000 (loan)
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Total for the reporting period	(3)	\$	40,000
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4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)
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Total for the reporting period	(4)	\$	40,000
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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>	\$	
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Commonwealth of Pennsylvania - Campaign Finance Report

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

Filer 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	J. William Reynolds							
Street Address	1718 N New Street							
City	Bethlehem	State	PA	Zip Code	18018			

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)	11/05/24		Year	2024		Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	01/01/24	12/31/24	
A. Amount Brought Forward From Last Report	\$	0.00	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	40,000	
C. Total Funds Available (Sum of Lines A and B)	\$	40,000	
D. Total Expenditures (From Schedule III)	\$	40,000	
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 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, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

_____ day of _____ 20____

Signature _____

My Commission expires _____ MO. _____ DAY _____ YR.

Signature of Person Submitting report _____

Printed Name _____

Area Code _____ Daytime Telephone Number _____

Part II- 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 _____

My Commission expires _____ MO. _____ DAY _____ YR.

Signature of Candidate _____

Printed Name _____

Area Code _____ Daytime Telephone Number _____

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:	
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Full Name of Contributor					J. William Reynolds					Date [MM/DD/YYYY]		\$	40,000 (loan)	
										12/15/24				
House #	1718		Street Address		N. New Street					Date [MM/DD/YYYY]		\$		
City	Bethlehem			State	PA		Zip Code	18018			Date [MM/DD/YYYY]		\$	
Employer Name				City of Bethlehem						Occupation		Mayor		
Employer Mailing Address / Principal Place of Business				10 E Church Street Bethlehem, PA 18018										
Full Name of Contributor										Date [MM/DD/YYYY]		\$		
House #			Street Address							Date [MM/DD/YYYY]		\$		
City				State			Zip Code				Date [MM/DD/YYYY]		\$	
Employer Name										Occupation				
Employer Mailing Address / Principal Place of Business														
Full Name of Contributor										Date [MM/DD/YYYY]		\$		
House #			Street Address							Date [MM/DD/YYYY]		\$		
City				State			Zip Code				Date [MM/DD/YYYY]		\$	
Employer Name										Occupation				
Employer Mailing Address / Principal Place of Business														
Full Name of Contributor										Date [MM/DD/YYYY]		\$		
House #			Street Address							Date [MM/DD/YYYY]		\$		
City				State			Zip Code				Date [MM/DD/YYYY]		\$	
Employer Name										Occupation				
Employer Mailing Address / Principal Place of Business														

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	
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To Whom Paid		Friends of J. William Reynolds				Date [MM/DD/YYYY]	\$	40,000
		12/15/2024						
House #	1718	Street Address	N. New Street			Description of Expenditure		
City	Bethlehem	State	PA	Zip Code	18018	Campaign Loan		
To Whom Paid						Date [MM/DD/YYYY]	\$	
House #		Street Address				Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date [MM/DD/YYYY]	\$	
House #		Street Address				Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date [MM/DD/YYYY]	\$	
House #		Street Address				Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date [MM/DD/YYYY]	\$	
House #		Street Address				Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date [MM/DD/YYYY]	\$	
House #		Street Address				Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date [MM/DD/YYYY]	\$	
House #		Street Address				Description of Expenditure		
City		State		Zip Code				
To Whom Paid						Date [MM/DD/YYYY]	\$	
House #		Street Address				Description of Expenditure		
City		State		Zip Code				

Commonwealth of Pennsylvania - Campaign Finance Report

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

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 J. William Reynolds						
Street Address		1718 N. New Street						
City	Bethlehem	State	PA	Zip Code	18018			

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)		11/05/24	Year	2024	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	01/01/2024	1/31/2024	
A. Amount Brought Forward From Last Report	\$	2551.30	<p>NORCO ELECTIONS FILED - JAN31'25PM3:21</p>
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	94400.00	
C. Total Funds Available (Sum of Lines A and B)	\$	96951.30	
D. Total Expenditures (From Schedule III)	\$	3566.41	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	93384.89	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	40000.00	

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.

Sworn to and submitted

My C

Part I

I swear
amen

Sworn

My C

ber

(P.L. 1333, NO.320) as

SCHEDULE I
Contributions and Receipts
Detailed Summary Page

Filer Identification Number	
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1. Unitemized Contributions and Receipts-\$ 50.00 or Less per Contributor		
Total for the reporting period	(1)	\$ 1150.00
2. Contributions of \$ 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)	\$	6450.00
Total for the reporting period	(2)	\$ 6450.00
3. Contributions Over \$ 250.00 (From Part C and Part D)		
Contributions Received from Political Committees (Part C)	\$	9000.00
All Other Contributions (Part D)	\$	77800.00
Total for the reporting period	(3)	\$ 86800.00
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)		
Total for the reporting period	(4)	\$ 0.00
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>	\$	94400.00

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.

Filer Identification Number	
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Amount

Full Name of Contributing Committee					Date [MM/DD/YYYY]		\$	
House #		Street Address			Date [MM/DD/YYYY]		\$	
City			State		Zip Code	Date [MM/DD/YYYY]		\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]		\$	
House #		Street Address			Date [MM/DD/YYYY]		\$	
City			State		Zip Code	Date [MM/DD/YYYY]		\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]		\$	
House #		Street Address			Date [MM/DD/YYYY]		\$	
City			State		Zip Code	Date [MM/DD/YYYY]		\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]		\$	
House #		Street Address			Date [MM/DD/YYYY]		\$	
City			State		Zip Code	Date [MM/DD/YYYY]		\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]		\$	
House #		Street Address			Date [MM/DD/YYYY]		\$	
City			State		Zip Code	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.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number:	
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Full Name of Contributor					Curtis Barnette		Date [MM/DD/YYYY]	\$	250.00
							04/17/2024		
House #	1112	Street Address	Prospect Avenue			Date [MM/DD/YYYY]	\$		
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]	\$		
Full Name of Contributor					Ronald and Lisa Donchez		Date [MM/DD/YYYY]	\$	250.00
							04/17/2024		
House #	915	Street Address	Wafford Lane			Date [MM/DD/YYYY]	\$	125.00	
						01/10/2025			
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]	\$		
Full Name of Contributor					Michael and Sonia Alkhal		Date [MM/DD/YYYY]	\$	250.00
							04/23/2024		
House #	1150	Street Address	Pennsylvania Street			Date [MM/DD/YYYY]	\$		
City	Whitehall	State	PA	Zip Code	18052	Date [MM/DD/YYYY]	\$		
Full Name of Contributor					Chris Valianatos		Date [MM/DD/YYYY]	\$	250.00
							04/30/2024		
House #	2100	Street Address	W. Union Boulevard			Date [MM/DD/YYYY]	\$		
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]	\$		
Full Name of Contributor					Matt Malozi		Date [MM/DD/YYYY]	\$	250.00
							05/01/2024		
House #	1820	Street Address	Paul Avenue			Date [MM/DD/YYYY]	\$		
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]	\$		
Full Name of Contributor					Rocco Beltrami		Date [MM/DD/YYYY]	\$	200.00
							05/07/2024		
House #	450	Street Address	Barclay Drive			Date [MM/DD/YYYY]	\$		
City	Bethlehem	State	PA	Zip Code	18017	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.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number:	
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Full Name of Contributor						Date [MM/DD/YYYY]		\$ 100.00
Janine Santoro						05/09/2024		
House #	888	Street Address		Graystone Circle		Date [MM/DD/YYYY]		\$
City	Northampton	State	PA	Zip Code	18067	Date [MM/DD/YYYY]		\$
Full Name of Contributor						Date [MM/DD/YYYY]		\$ 200.00
Amy Cozze and Anne Wakabayashi						05/09/2024		
House #	1040	Street Address		Cumberland Avenue		Date [MM/DD/YYYY]		\$
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]		\$
Full Name of Contributor						Date [MM/DD/YYYY]		\$ 250.00
Dino Cantelmi						05/09/2024		
House #	541	Street Address		Apollo Drive		Date [MM/DD/YYYY]		\$
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]		\$
Full Name of Contributor						Date [MM/DD/YYYY]		\$ 250.00
Mark Hartney						05/09/2024		
House #	360	Street Address		9th Avenue		Date [MM/DD/YYYY]		\$
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]		\$
Full Name of Contributor						Date [MM/DD/YYYY]		\$ 250.00
Jennifer Mann						05/09/2024		
House #	2845	Street Address		Parkway Blvd		Date [MM/DD/YYYY]		\$
City	Allentown	State	PA	Zip Code	18104	Date [MM/DD/YYYY]		\$
Full Name of Contributor						Date [MM/DD/YYYY]		\$ 100.00
Angela Delgrosso						05/09/2024		
House #	510	Street Address		E. 3rd Street APT 202		Date [MM/DD/YYYY]		\$
City	Bethlehem	State	PA	Zip Code	18015	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.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number:	
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Full Name of Contributor		Robert Melosky and Meghan Hoffner				Date [MM/DD/YYYY]	\$	200.00
						05/09/2024		
House #		Street Address	Pine Top Trail			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Loren Speziale				Date [MM/DD/YYYY]	\$	250.00
						05/09/2024		
House #	1423	Street Address	Main Street			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Casey Roncoroni				Date [MM/DD/YYYY]	\$	100.00
						01/06/2025		
House #	1033	Street Address	Beverly Avenue			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Pamela and Craig Larimer				Date [MM/DD/YYYY]	\$	100.00
						01/08/2025		
House #	324	Street Address	Franklin Street			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Glenn and Susan Noack				Date [MM/DD/YYYY]	\$	100.00
						01/08/2025		
House #	1852	Street Address	Eastman Avenue			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		James and Carol Lasko				Date [MM/DD/YYYY]	\$	250.00
						01/08/2025		
House #	620	Street Address	Barclay Avenue			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18017	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.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number:	
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Full Name of Contributor		Steve and Lucy Thompson				Date [MM/DD/YYYY]	\$	300.00
						01/10/2025		
House #	895	Street Address	Wafford Lane			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Susan Christoff				Date [MM/DD/YYYY]	\$	100.00
						01/10/2025		
House #	2019	Street Address	Woodmont Drive			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Linda Oplinger				Date [MM/DD/YYYY]	\$	100.00
						01/10/2025		
House #	3149	Street Address	Shakespeare Road			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Jillian and Matthew Krill				Date [MM/DD/YYYY]	\$	100.00
						01/13/2025		
House #	626	Street Address	W. Market Street			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Mary Jo Carlen				Date [MM/DD/YYYY]	\$	200.00
						01/13/2025		
House #	2117	Street Address	Center Street			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Lawrence and Jolene McGee				Date [MM/DD/YYYY]	\$	100.00
						01/13/2025		
House #	1917	Street Address	Hart Street			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18017	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.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number:	
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Full Name of Contributor					Patrick and Wanda Finelli		Date [MM/DD/YYYY]		\$	100.00
							01/15/2025			
House #	1406		Street Address		Lorain Avenue		Date [MM/DD/YYYY]		\$	
City	Bethlehem		State	PA		Zip Code	18018		Date [MM/DD/YYYY]	\$
Full Name of Contributor					Joseph Posh		Date [MM/DD/YYYY]		\$	250.00
							01/17/2025			
House #	2216		Street Address		Willow Park Road		Date [MM/DD/YYYY]		\$	
City	Bethlehem		State	PA		Zip Code	18020		Date [MM/DD/YYYY]	\$
Full Name of Contributor					Michael Fraboni and Trisha Moller		Date [MM/DD/YYYY]		\$	100.00
							01/17/2025			
House #	728		Street Address		W. Market Street		Date [MM/DD/YYYY]		\$	
City	Bethlehem		State	PA		Zip Code	18018		Date [MM/DD/YYYY]	\$
Full Name of Contributor					Matthew and Corinne Holt		Date [MM/DD/YYYY]		\$	100.00
							01/18/2025			
House #	27		Street Address		Sunnybrook Road		Date [MM/DD/YYYY]		\$	
City	Basking Ridge		State	NJ		Zip Code	07920		Date [MM/DD/YYYY]	\$
Full Name of Contributor					Kerry Wrobel		Date [MM/DD/YYYY]		\$	125.00
							01/20/2025			
House #	3302		Street Address		Marchant Drive		Date [MM/DD/YYYY]		\$	
City	Bethlehem		State	PA		Zip Code	18017		Date [MM/DD/YYYY]	\$
Full Name of Contributor					Susan and Dennis Domcheck		Date [MM/DD/YYYY]		\$	100.00
							01/21/2025			
House #	269		Street Address		W. Langhorne Avenue		Date [MM/DD/YYYY]		\$	
City	Bethlehem		State	PA		Zip Code	18017		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.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number:	
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Full Name of Contributor					James Wills		Date [MM/DD/YYYY]	\$	100.00
							01/21/2025		
House #	1427	Street Address	Center Street			Date [MM/DD/YYYY]	\$		
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]	\$		
Full Name of Contributor					Lynn and Michael Rothman		Date [MM/DD/YYYY]	\$	100.00
							01/21/2025		
House #	870	Street Address	Wafford Lane			Date [MM/DD/YYYY]	\$		
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]	\$		
Full Name of Contributor					Patrick and Jessica Price		Date [MM/DD/YYYY]	\$	100.00
							01/21/2025		
House #	4660	Street Address	Rolling Ridge Road			Date [MM/DD/YYYY]	\$		
City	Center Valley	State	PA	Zip Code	18034	Date [MM/DD/YYYY]	\$		
Full Name of Contributor					William Leiner III		Date [MM/DD/YYYY]	\$	100.00
							01/24/2025		
House #	1849	Street Address	Easton Avenue			Date [MM/DD/YYYY]	\$		
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]	\$		
Full Name of Contributor					Michael and Claire Hintze		Date [MM/DD/YYYY]	\$	100.00
							01/24/2025		
House #	2008	Street Address	Carol Avenue			Date [MM/DD/YYYY]	\$		
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]	\$		
Full Name of Contributor					Charles Walter		Date [MM/DD/YYYY]	\$	250.00
							01/25/2025		
House #	260	Street Address	Moreland Avenue			Date [MM/DD/YYYY]	\$		
City	Bethlehem	State	PA	Zip Code	18018	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.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number:	
-------------------------------------	--

Full Name of Contributor					Date [MM/DD/YYYY]		\$	
Andrew Grason and Mary Kate Murphy					1/27/2025			
200.00								
House #	925	Street Address		Prospect Avenue		Date [MM/DD/YYYY]		\$
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]		\$
Full Name of Contributor					Date [MM/DD/YYYY]		\$	
William and Gisele Egbert					1/27/2025			
100.00								
House #	2830	Street Address		Linden Street No. 9B		Date [MM/DD/YYYY]		\$
City	Bethlehem	State	PA	Zip Code	18017	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]		\$	
House #		Street Address				Date [MM/DD/YYYY]		\$
City		State		Zip Code		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]		\$	
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 Number:	
------------------------------	--

Full Name of Contributing Committee		Friends of Bob Donchez PAC				Date [MM/DD/YYYY]	\$	1000.00
						03/26/2024		
House #	377	Street Address	Devonshire Drive			Date [MM/DD/YYYY]	\$	1500.00
						01/18/2025		
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee		Friends of Eric Evans				Date [MM/DD/YYYY]	\$	500.00
						04/06/2024		
House #	1955	Street Address	Butztown Road			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee		KTMC State PAC				Date [MM/DD/YYYY]	\$	5000.00
						05/09/2024		
House #	280	Street Address	King of Prussia Road			Date [MM/DD/YYYY]	\$	
City	Radnor	State	PA	Zip Code	19087	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee		IBEW Local Union #375				Date [MM/DD/YYYY]	\$	1000.00
						05/09/2024		
House #	101	Street Address	S 7th Street			Date [MM/DD/YYYY]	\$	
City	Allentown	State	PA	Zip Code	18101	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$	
House #		Street Address				Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee						Date [MM/DD/YYYY]	\$	
House #		Street Address				Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	

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:	
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Full Name of Contributor					Diana Morganelli		Date [MM/DD/YYYY]		\$	1000.00
							03/26/2024			
House #	835	Street Address		Barnsdale Road		Date [MM/DD/YYYY]		\$	1500.00	
						01/24/2025				
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]		\$		
Employer Name								Occupation		
Employer Mailing Address / Principal Place of Business										
Full Name of Contributor					Laura Collins		Date [MM/DD/YYYY]		\$	500.00
							04/01/2024			
House #	77	Street Address		W. Greenwich Street		Date [MM/DD/YYYY]		\$		
						04/29/2024				
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]		\$		
Employer Name					City of Bethlehem			Occupation	Government	
Employer Mailing Address / Principal Place of Business					10 E. Church Street, Bethlehem, PA 18018					
Full Name of Contributor					James and Karen Broughal		Date [MM/DD/YYYY]		\$	1000.00
							04/04/2024			
House #	3323	Street Address		Camelot Drive		Date [MM/DD/YYYY]		\$		
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]		\$		
Employer Name					Broughal and DeVito, LLP			Occupation	Attorney	
Employer Mailing Address / Principal Place of Business					38 W. Market Street, Bethlehem, PA 18018					
Full Name of Contributor					Broughal and DeVito, LLP		Date [MM/DD/YYYY]		\$	1000.00
							04/05/2024			
House #	38	Street Address		W. Market Street		Date [MM/DD/YYYY]		\$		
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]		\$		
Employer Name					Broughal and DeVito, LLP			Occupation	Law Firm	
Employer Mailing Address / Principal Place of Business					38 W. Market Street, Bethlehem, PA 18018					

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:	
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Full Name of Contributor				Matthew and Ann Bieber		Date [MM/DD/YYYY]		\$	5000.00
						04/10/2024			
House #	5271	Street Address	Creekview Drive			Date [MM/DD/YYYY]		\$	
City	Orefield	State	PA	Zip Code	18069	Date [MM/DD/YYYY]		\$	
Employer Name			Self-employed			Occupation	Consultant		
Employer Mailing Address / Principal Place of Business			5271 Creekview Drive, Orefield, PA 18069						
Full Name of Contributor				Michael Gausling		Date [MM/DD/YYYY]		\$	500.00
						04/23/2024			
House #	1512	Street Address	Colesville Road			Date [MM/DD/YYYY]		\$	
City	Bethlehem	State	PA	Zip Code	18015	Date [MM/DD/YYYY]		\$	
Employer Name			Originate Ventures			Occupation	Managing Partner		
Employer Mailing Address / Principal Place of Business			205 Webster Street, Bethlehem, PA 18015						
Full Name of Contributor				Francesco Augello		Date [MM/DD/YYYY]		\$	300.00
						04/30/2024			
House #	1570	Street Address	Easton Avenue			Date [MM/DD/YYYY]		\$	
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]		\$	
Employer Name			Air Products			Occupation	Distribution forecaster		
Employer Mailing Address / Principal Place of Business			1940 Air Products Road, Allentown, PA 18106						
Full Name of Contributor				Jeff Parks		Date [MM/DD/YYYY]		\$	500.00
						04/30/2024			
House #	223	Street Address	E. Church Street			Date [MM/DD/YYYY]		\$	
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]		\$	
Employer Name			Retired			Occupation	Retired		
Employer Mailing Address / Principal Place of Business			N/A						

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:	
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Full Name of Contributor					Mark Augello		Date [MM/DD/YYYY]	\$	500.00
							05/01/2024		
House #	1578	Street Address	Easton Avenue			Date [MM/DD/YYYY]	\$		
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]	\$		
Employer Name			Augello Chiropractic			Occupation	Owner		
Employer Mailing Address / Principal Place of Business			1578 Easton Avenue, Bethlehem, PA 18017						
Full Name of Contributor					Jack Spirk		Date [MM/DD/YYYY]	\$	1000.00
							05/02/2024		
House #	404	Street Address	Apollo Drive			Date [MM/DD/YYYY]	\$	1000.00	
							12/05/2024		
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]	\$		
Employer Name			City of Bethlehem			Occupation	Attorney		
Employer Mailing Address / Principal Place of Business			10 E. Church Street, Bethlehem, PA 18018						
Full Name of Contributor					Charlie and Anette Thiel		Date [MM/DD/YYYY]	\$	500.00
							05/06/2024		
House #	22	Street Address	South 16th Street			Date [MM/DD/YYYY]	\$		
City	Allentown	State	PA	Zip Code	18102	Date [MM/DD/YYYY]	\$		
Employer Name			IotaComm, Inc.			Occupation	Chief Revenue Officer		
Employer Mailing Address / Principal Place of Business			600 Hamilton Street, Suite 1010, Allentown, PA 18101						
Full Name of Contributor					Randy and Erika Galiotto		Date [MM/DD/YYYY]	\$	2000.00
							05/09/2024		
House #	842	Street Address	Heather Lane			Date [MM/DD/YYYY]	\$	2500.00	
							12/19/2024		
City	Easton	State	PA	Zip Code	18042	Date [MM/DD/YYYY]	\$		
Employer Name			Alloy5			Occupation	Principal architect		
Employer Mailing Address / Principal Place of Business			530 W. Broad Street, Bethlehem, PA 18018						

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:	
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Full Name of Contributor		Borko and Alana Milosev				Date [MM/DD/YYYY]	\$	1000.00
						05/09/2024		
House #	1708	Street Address	Hillside Lane			Date [MM/DD/YYYY]	\$	
City	Allentown	State	PA	Zip Code	18104	Date [MM/DD/YYYY]	\$	
Employer Name		Post Road Management				Occupation	Principal/finance	
Employer Mailing Address / Principal Place of Business		240 S. Main Street Suite 2300, Nazareth, PA 18064						
Full Name of Contributor		Robert and Laura Wax				Date [MM/DD/YYYY]	\$	500.00
						05/09/2024		
House #	1914	Street Address	Woodhaven Drive			Date [MM/DD/YYYY]	\$	
City	Allentown	State	PA	Zip Code	18103	Date [MM/DD/YYYY]	\$	
Employer Name		St. Luke's University Health Network				Occupation	Attorney	
Employer Mailing Address / Principal Place of Business		801 Ostrum Street, Bethlehem, PA 18015						
Full Name of Contributor		Murat Guzel				Date [MM/DD/YYYY]	\$	2500.00
						05/09/2024		
House #	1139	Street Address	Lehigh Avenue			Date [MM/DD/YYYY]	\$	
City	Whitehall	State	PA	Zip Code	18052	Date [MM/DD/YYYY]	\$	
Employer Name		Natural Food Source, Inc.				Occupation	Owner	
Employer Mailing Address / Principal Place of Business		1139 Lehigh Avenue, Whitehall, PA 18052						
Full Name of Contributor		Michael and Amy Santanasto				Date [MM/DD/YYYY]	\$	500.00
						05/09/2024		
House #	265	Street Address	E. Market Street			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]	\$	
Employer Name		Santanasto Law				Occupation	Attorney	
Employer Mailing Address / Principal Place of Business		210 E. Broad Street, Bethlehem, PA 18018						

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:	
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Full Name of Contributor		Matthew Deschler				Date [MM/DD/YYYY]	\$	500.00
						05/17/2024		
House #	313	Street Address	E. Frankford Street			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]	\$	
Employer Name		Shay, Santee, Kelhart & Deschler LLC				Occupation	Attorney	
Employer Mailing Address / Principal Place of Business		44 East Broad Street Suite 210, Bethlehem, PA 18018						
Full Name of Contributor		Plamen Ayvazov				Date [MM/DD/YYYY]	\$	2000.00
						05/30/2024		
House #	3128	Street Address	Beaufort Drive			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]	\$	
Employer Name		Monocacy Builders				Occupation	Owner	
Employer Mailing Address / Principal Place of Business		31 S. Commerce Way Suite 500, Bethlehem, PA 18017						
Full Name of Contributor		King Spry Herman Freund and Faul				Date [MM/DD/YYYY]	\$	1500.00
						11/25/2024		
House #	1	Street Address	W. Broad Street Suite 700			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18018	Date [MM/DD/YYYY]	\$	
Employer Name		King Spry Herman Freund and Faul				Occupation	Law Firm	
Employer Mailing Address / Principal Place of Business		1 W. Broad Street Suite 700, Bethlehem, PA 18018						
Full Name of Contributor		Marian Spirk				Date [MM/DD/YYYY]	\$	1000.00
						12/05/2024		
House #	404	Street Address	Apollo Drive			Date [MM/DD/YYYY]	\$	
City	Bethlehem	State	PA	Zip Code	18017	Date [MM/DD/YYYY]	\$	
Employer Name		Retired				Occupation	Retired	
Employer Mailing Address / Principal Place of Business		N/A						

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:	
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Full Name of Contributor					Glenn Reibman		Date [MM/DD/YYYY]		\$	500.00		
							01/13/2025					
House #	1231		Street Address		Leib Road			Date [MM/DD/YYYY]		\$		
City	Easton		State	PA	Zip Code		18040		Date [MM/DD/YYYY]		\$	
Employer Name			Retired				Occupation		Retired			
Employer Mailing Address / Principal Place of Business			N/A									
Full Name of Contributor					Kevin Kinross		Date [MM/DD/YYYY]		\$	1000.00		
							01/21/2025					
House #	2209		Street Address		Ben Franklin Drive			Date [MM/DD/YYYY]		\$		
City	Pittsburgh		State	PA	Zip Code		15237		Date [MM/DD/YYYY]		\$	
Employer Name			Carey Group				Occupation		Attorney			
Employer Mailing Address / Principal Place of Business			310 Grant Street Suite 1123, Pittsburgh, PA 15219									
Full Name of Contributor					Charles and Ruth Marcon		Date [MM/DD/YYYY]		\$	1000.00		
							01/21/2025					
House #	326		Street Address		N. 27th Street			Date [MM/DD/YYYY]		\$		
City	Allentown		State	PA	Zip Code		18104		Date [MM/DD/YYYY]		\$	
Employer Name			Duggan & Marcon, Inc.				Occupation		Owner			
Employer Mailing Address / Principal Place of Business			645 W. Hamilton Street Suite 530, Allentown, PA 18101									
Full Name of Contributor					Fred and Nancy Fenselau		Date [MM/DD/YYYY]		\$	500.00		
							01/23/2025					
House #	1413		Street Address		Shelbourne Drive			Date [MM/DD/YYYY]		\$		
City	Bethlehem		State	PA	Zip Code		18018		Date [MM/DD/YYYY]		\$	
Employer Name			Working Dog Press				Occupation		Owner			
Employer Mailing Address / Principal Place of Business			861 14th Avenue, Bethlehem, PA 18018									

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					Richard and Susan Master		Date [MM/DD/YYYY]		\$	5000.00
							01/28/2025			
House #	250		Street Address	E. Macada Road			Date [MM/DD/YYYY]		\$	
City	Bethlehem		State	PA	Zip Code	18017	Date [MM/DD/YYYY]		\$	
Employer Name			MCS Industries				Occupation	Business owner		
Employer Mailing Address / Principal Place of Business			2280 Newlins Road, Easton, PA 18045							
Full Name of Contributor					David Priestas		Date [MM/DD/YYYY]		\$	500.00
							01/25/2025			
House #	1254		Street Address	Shelbourne Drive			Date [MM/DD/YYYY]		\$	
City	Bethlehem		State	PA	Zip Code	18018	Date [MM/DD/YYYY]		\$	
Employer Name			ARL Transport, LLC				Occupation	Business owner		
Employer Mailing Address / Principal Place of Business			930 E. Market Street, Bethlehem, PA 18018							
Full Name of Contributor					Sandra and Placido Corpora		Date [MM/DD/YYYY]		\$	1000.00
							01/21/2025			
House #	57		Street Address	E. Wall Street			Date [MM/DD/YYYY]		\$	
City	Bethlehem		State	PA	Zip Code	18018	Date [MM/DD/YYYY]		\$	
Employer Name			Corpora Consulting				Occupation	Self-employed		
Employer Mailing Address / Principal Place of Business			57 E. Wall Street, Bethlehem, PA 18018							
Full Name of Contributor					J. William Reynolds		Date [MM/DD/YYYY]		\$	40,000.00 (loan)
							12/15/2024			
House #	1718		Street Address	N. New Street			Date [MM/DD/YYYY]		\$	
City	Bethlehem		State	PA	Zip Code	18018	Date [MM/DD/YYYY]		\$	
Employer Name			City of Bethlehem				Occupation	Mayor		
Employer Mailing Address / Principal Place of Business			10 E. Church Street, Bethlehem, PA 18018							

PART E
Other Receipts

REFUNDS, INTEREST 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 Number:	
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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									
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									
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									

SCHEDULE II

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**

Filer Identification Number:	
------------------------------	--

1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the reporting period	(1)	<div style="display: flex; align-items: center;"> \$ <div style="flex-grow: 1; border-bottom: 1px solid black;"></div> </div>

2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)		
TOTAL for the reporting period	(2)	<div style="display: flex; align-items: center;"> \$ <div style="flex-grow: 1; border-bottom: 1px solid black;"></div> </div>

3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)		
TOTAL for the reporting period	(3)	<div style="display: flex; align-items: center;"> \$ <div style="flex-grow: 1; border-bottom: 1px solid black;"></div> </div>

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)		<div style="display: flex; align-items: center;"> \$ <div style="flex-grow: 1; border-bottom: 1px solid black;"></div> </div>
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**SCHEDULE II
PART F**

In-Kind Contributions Received

VALUE OF \$ 50.01 TO \$ 250

Filer Identification Number:	
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Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Description of Contribution							

Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Description of Contribution							

Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Description of Contribution							

Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Description of Contribution							

Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Description of Contribution							

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

Filer Identification Number:	
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Full Name of Contributor					Date [MM/DD/YYYY]		\$	
House #		Street Address				Date [MM/DD/YYYY]	\$	
City			State		Zip Code		Date [MM/DD/YYYY]	\$
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business					Description of Contribution			

Full Name of Contributor					Date [MM/DD/YYYY]		\$	
House #		Street Address				Date [MM/DD/YYYY]	\$	
City			State		Zip Code		Date [MM/DD/YYYY]	\$
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business					Description of Contribution			

Full Name of Contributor					Date [MM/DD/YYYY]		\$	
House #		Street Address				Date [MM/DD/YYYY]	\$	
City			State		Zip Code		Date [MM/DD/YYYY]	\$
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business					Description of Contribution			

Full Name of Contributor					Date [MM/DD/YYYY]		\$	
House #		Street Address				Date [MM/DD/YYYY]	\$	
City			State		Zip Code		Date [MM/DD/YYYY]	\$
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business					Description of Contribution			

SCHEDULE III
Statement of Expenditures

Filer Identification Number:

To Whom Paid		Squarespace			Date [MM/DD/YYYY]		\$		30.74	
					01/20/2024					
House #	225	Street Address		Varick Street #12			Description of Expenditure			
City	New York	State	NY	Zip Code	10014		Website hosting			
To Whom Paid		Squarespace			Date [MM/DD/YYYY]		\$		30.74	
					02/20/2024					
House #	225	Street Address		Varick Street #12			Description of Expenditure			
City	New York	State	NY	Zip Code	10014		Website hosting			
To Whom Paid		Lehigh Valley Labor Council			Date [MM/DD/YYYY]		\$		285.00	
					03/01/2024					
House #		Street Address		PO Box 20226			Description of Expenditure			
City	Lehigh Valley	State	PA	Zip Code	18002		Tickets to dinner			
To Whom Paid		Bethlehem NAACP			Date [MM/DD/YYYY]		\$		150.00	
					03/01/2024					
House #		Street Address		PO Box 1474			Description of Expenditure			
City	Bethlehem	State	PA	Zip Code	18016		Ticket to dinner and ad			
To Whom Paid		Squarespace			Date [MM/DD/YYYY]		\$		30.74	
					03/20/2024					
House #	225	Street Address		Varick Street #12			Description of Expenditure			
City	New York	State	NY	Zip Code	10014					
To Whom Paid		Squarespace			Date [MM/DD/YYYY]		\$		30.74	
					04/20/2024					
House #	225	Street Address		Varick Street #12			Description of Expenditure			
City	New York	State	NY	Zip Code	10014		Website hosting			
To Whom Paid		Truist Bank			Date [MM/DD/YYYY]		\$		54.84	
					05/02/2024					
House #	920	Street Address		W. Broad Street			Description of Expenditure			
City	Bethlehem	State	PA	Zip Code	18018		New checks			
To Whom Paid		Edge Restaurant			Date [MM/DD/YYYY]		\$		1500.00	
					05/09/2024					
House #	74	Street Address		W. Broad Suite 220			Description of Expenditure			
City	Bethlehem	State	PA	Zip Code	18018		Reception fees			

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	
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To Whom Paid		Squarespace			Date [MM/DD/YYYY]	\$	30.74
					05/20/2024		
House #	225	Street Address	Varick Street #12			Description of Expenditure	
City	New York	State	NY	Zip Code	10014	Website hosting	
To Whom Paid		Squarespace			Date [MM/DD/YYYY]	\$	30.74
					06/19/2024		
House #	225	Street Address	Varick Street #12			Description of Expenditure	
City	New York	State	NY	Zip Code	10014	Website hosting	
To Whom Paid		Squarespace			Date [MM/DD/YYYY]	\$	30.74
					07/20/2024		
House #	225	Street Address	Varick Street #12			Description of Expenditure	
City	New York	State	NY	Zip Code	10014	Website hosting	
To Whom Paid		Lehigh Valley Labor Council			Date [MM/DD/YYYY]	\$	200.00
					08/02/2024		
House #		Street Address	PO Box 20226			Description of Expenditure	
City	Lehigh Valley	State	PA	Zip Code	18002		
To Whom Paid		Squarespace			Date [MM/DD/YYYY]	\$	30.74
					08/19/2024		
House #	225	Street Address	Varick Street #12			Description of Expenditure	
City	New York	State	NY	Zip Code	10014	Website hosting	
To Whom Paid		Squarespace			Date [MM/DD/YYYY]	\$	34.98
					09/19/2024		
House #	225	Street Address	Varick Street #12			Description of Expenditure	
City	New York	State	NY	Zip Code	10014	Website hosting	
To Whom Paid		Squarespace			Date [MM/DD/YYYY]	\$	34.98
					10/20/2024		
House #	225	Street Address	Varick Street #12			Description of Expenditure	
City	New York	State	NY	Zip Code	10014	Website hosting	
To Whom Paid		Squarespace			Date [MM/DD/YYYY]	\$	34.98
					11/19/2024		
House #	225	Street Address	Varick Street #12			Description of Expenditure	
City	New York	State	NY	Zip Code	10014	Website hosting	

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	
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To Whom Paid		GoDaddy			Date [MM/DD/YYYY]		\$	23.17
		11/29/2024						
House #	2155	Street Address	E. GoDaddy Way			Description of Expenditure		
City	Tempe	State	AZ	Zip Code	85284	Domain renewal		
To Whom Paid		Staples			Date [MM/DD/YYYY]		\$	238.96
		11/30/2024						
House #	2138	Street Address	W. Union Boulevard			Description of Expenditure		
City	Bethlehem	State	PA	Zip Code	18018	Supplies		
To Whom Paid		United States Postal Office			Date [MM/DD/YYYY]		\$	657.00
		12/12/2024						
House #	535	Street Address	Wood Street			Description of Expenditure		
City	Bethlehem	State	PA	Zip Code	18018	Stamps		
To Whom Paid		Squarespace			Date [MM/DD/YYYY]		\$	34.98
		12/19/2024						
House #	225	Street Address	Varick Street #12			Description of Expenditure		
City	New York	State	NY	Zip Code	10014	Website hosting		
To Whom Paid		Squarespace			Date [MM/DD/YYYY]		\$	34.98
		01/21/2025						
House #	225	Street Address	Varick Street #12			Description of Expenditure		
City	New York	State	NY	Zip Code	10014	Website hosting		
To Whom Paid		Pennsylvania Democratic Party			Date [MM/DD/YYYY]		\$	36.62
		01/23/2025						
House #	510	Street Address	N. Third Street			Description of Expenditure		
City	Harrisburg	State	PA	Zip Code	17101			
To Whom Paid					Date [MM/DD/YYYY]		\$	
House #		Street Address				Description of Expenditure		
City		State		Zip Code				
To Whom Paid					Date [MM/DD/YYYY]		\$	
House #		Street Address				Description of Expenditure		
City		State		Zip Code				

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 Number:	
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Name of Creditor		J. William Reynolds					Outstanding Balance of Debt	
House #	1718	Street Address	N. New Street		DATE DEBT INCURRED [MM/DD/YYYY]		\$	40,000.00
					12/15/2024			
City		Bethlehem	State	PA	Zip Code	18018		
Description of Debt		Campaign loan						

Name of Creditor							Outstanding Balance of Debt	
House #		Street Address			DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City			State		Zip Code			
Description of Debt								

Name of Creditor							Outstanding Balance of Debt	
House #		Street Address			DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City			State		Zip Code			
Description of Debt								

Name of Creditor							Outstanding Balance of Debt	
House #		Street Address			DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City			State		Zip Code			
Description of Debt								

Name of Creditor							Outstanding Balance of Debt	
House #		Street Address			DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City			State		Zip Code			
Description of Debt								

Name of Creditor							Outstanding Balance of Debt	
House #		Street Address			DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City			State		Zip Code			
Description of Debt								