

COMMONWEALTH OF PENNSYLVANIA  
**CAMPAIGN FINANCE STATEMENT**

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

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>		
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <b>Eric Evans</b>							
STREET ADDRESS <b>1955 Butztown Rd</b>							
CITY <b>Bethlehem</b>		STATE <b>PA</b>	ZIP CODE <b>18017</b>				
TYPE OF REPORT (CHECK ONE)  6TH TUESDAY PRE-PRIMARY <input type="checkbox"/> 2ND FRIDAY PRE-PRIMARY <input type="checkbox"/> 30 DAY POST-PRIMARY <input type="checkbox"/> 6TH TUESDAY PRE-ELECTION <input type="checkbox"/> 2ND FRIDAY PRE-ELECTION <input type="checkbox"/> 30 DAY POST-ELECTION <input type="checkbox"/> ANNUAL REPORT <input checked="" type="checkbox"/>	NAME OF OFFICE SOUGHT BY CANDIDATE <b>Bethlehem City Council</b>		DISTRICT NO.	PARTY <b>Dem</b>	DATE OF ELECTION		
	DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY				
	MO.	DAY	YEAR	TO	MO.	DAY	YEAR
	<b>1</b>	<b>11</b>	<b>18</b>		<b>1</b>	<b>31</b>	<b>18</b>
	CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u>						
	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>						
	AMENDMENT REPORT?		YES	NO	<input checked="" type="checkbox"/>		
TERMINATION REPORT?		YES	NO	<input checked="" type="checkbox"/>			

# 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:	▶ 264332274	Report Filed By:	▶ CANDIDATE 1.	COMMITTEE 2.	LOBBYIST 3.			
Name of Filing Committee, Candidate or Lobbyist: <p style="text-align:center; font-size: 1.2em;">Friends of Eric Evans</p>								
Street Address: <p style="text-align:center; font-size: 1.2em;">1955 Butztown Rd.</p>								
City: <p style="text-align:center; font-size: 1.2em;">Bethlehem</p>			State: <p style="text-align:center; font-size: 1.2em;">PA</p>	Zip Code: <p style="text-align:center; font-size: 1.2em;">18017-</p>				
TYPE OF REPORT  (place X to the right of report type)	1. 6TH TUESDAY PRE-PRIMARY	2. 2ND FRIDAY PRE-PRIMARY	3. 30 DAY POST-PRIMARY	AMENDMENT REPORT?	YES	NO		
	4. 4TH TUESDAY PRE-ELECTION	5. 2ND FRIDAY PRE-ELECTION	6. 30 DAY POST-ELECTION	TERMINATION REPORT?	YES	NO		
	7. ANNUAL REPORT	YEAR	2018	FILING METHOD CHECK ONE	PAPER	DISKETTE		
Name of Office Sought by Candidate: <p style="text-align:center; font-size: 1.2em;">Bethlehem City Council</p>			DATE OF ELECTION		District Number	Office Code	Party Code	County Code
					N/A		Dem	48
(SEE INSTRUCTIONS FOR CODES)								
Summary of Receipts and Expenditures from: ▶			MO. DAY YEAR			FOR OFFICE USE ONLY		
			1 1 2018			To 12 31 2018		
A. Amount Brought Forward From Last Report				\$ 5,337.12				
B. Total Monetary Contributions and Receipts (From Schedule I)				\$ 0				
C. Total Funds Available (Sum of Lines A and B)				\$ 5,337.12				
D. Total Expenditures (From Schedule III)				\$ 1,878.99				
E. Ending Cash Balance (Subtract Line D from Line C)				\$ 3,458.13				
F. Value of In-Kind Contributions Received (From Schedule II)				\$ 0				
G. Unpaid Debts and Obligations (From Schedule IV)				\$ 0				

AFFIDAVIT SECTION

SCHEDULE III  
Statement of Expenditures

Filer Identification Number: **264332274** **Friends of Eric Evans**

To Whom Paid		Heights AA			Date [MM/DD/YYYY]	\$	260.00
House #	Street Address			Description of Expenditure			
City	Bethlehem	State	PA	Zip Code	Election night		
To Whom Paid		Best Buy			Date [MM/DD/YYYY]	\$	1218.99
House #	Street Address			Description of Expenditure			
City	Whitehall	State	PA	Zip Code	Laptop: cables, list, dues		
To Whom Paid		Bethlehem Dems			Date [MM/DD/YYYY]	\$	400.00
House #	Street Address			Description of Expenditure			
City	Bethlehem	State	PA	Zip Code	Bethlehem Dem. Party		
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			