

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 <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist KAREN DOLAN						
Street Address 55 BRIDLE PATH RD						
City BETHLEHEM			State PA	Zip Code 18017		
TYPE OF REPORT  (place X to the right of report type)	8TH TUESDAY PRE-PRIMARY <sup>1</sup>	2ND FRIDAY PRE-PRIMARY <sup>2</sup>	30 DAY POST PRIMARY <sup>3</sup>	AMENDMENT REPORT?	YES	NO
	8TH TUESDAY PRE-ELECTION <sup>4</sup>	2ND FRIDAY PRE-ELECTION <sup>5</sup>	30 DAY POST ELECTION <sup>6</sup>	TERMINATION REPORT?	YES	NO
	ANNUAL REPORT <sup>7</sup>	YEAR	FILING METHOD ( ) CHECK ONE	PAPER	<input checked="" type="checkbox"/> DISKETTE	

Name of Office Sought by Candidate BETHLEHEM CITY COUNCIL			DATE OF ELECTION			District Number	Office Code	Party Code	County Code
MO.	DAY	YEAR	MO.	DAY	YEAR		OTH	DEM	48
			11	5	2013				
(SEE INSTRUCTIONS FOR CODES)									

Summary of Receipts and Expenditures from:		MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY	
		5	7	2013	To	6	10	2013		
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 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 or computer diskette, are 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 \_\_\_\_\_

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 210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280

Commonwealth of Pennsylvania  
**CAMPAIGN FINANCE REPORT**

PAGE 1 OF

7  
 (COVER PAGE)

(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 <sup>1</sup>		COMMITTEE <sup>2</sup> X		LOBBYIST <sup>3</sup>	
Name of Filing Committee, Candidate or Lobbyist Karen Dolan for City Council									
Street Address 55 Bridle Path Rd.									
City Bethlehem				State PA		Zip Code 18017 - 3764			
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY <sup>1</sup>		2ND FRIDAY PRE-PRIMARY <sup>2</sup>		30 DAY POST PRIMARY <sup>3</sup> X		AMENDMENT REPORT? YES		NO
	6TH TUESDAY PRE-ELECTION <sup>4</sup>		2ND FRIDAY PRE-ELECTION <sup>5</sup>		30 DAY POST ELECTION <sup>6</sup>		TERMINATION REPORT? YES		NO
	ANNUAL REPORT <sup>7</sup>		YEAR		FILING METHOD ( ) CHECK ONE		PAPER X		DISKETTE

Name of Office Sought by Candidate BETHLEHEM CITY COUNCIL				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
MO.	DAY	YEAR	MO.	DAY	YEAR	OTH	OTH	DEM	48	
11	5	2013				(SEE INSTRUCTIONS FOR CODES)				

Summary of Receipts and Expenditures from:			MO. DAY YEAR			To			MO. DAY YEAR			FOR OFFICE USE ONLY			
			5 7 2013			To			6 10 2013						
A. Amount Brought Forward From Last Report					\$ 671 <sup>00</sup>										
B. Total Monetary Contributions and Receipts (From Schedule I)					\$ 1222 <sup>00</sup>										
C. Total Funds Available (Sum of Lines A and B)					\$ 1893 <sup>00</sup>										
D. Total Expenditures (From Schedule III)					\$ 822.94										
E. Ending Cash Balance (Subtract Line D from Line C)					\$ 1070.06										
F. Value of In-Kind Contributions Received (From Schedule II)					\$ 100 <sup>00</sup>										
G. Unpaid Debts and Obligations (From Schedule IV)					\$ 2000 <sup>00</sup>										

**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 or computer diskette are 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

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**CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate Karen Dolan for City Council	Reporting Period From 5/7/13 To 6/10/13
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<b>1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR</b>	
TOTAL for the Reporting Period	(1) \$ 497

<b>2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)</b>	
Contributions Received from Political Committees (Part A)	\$ 0
All Other Contributions (Part B)	\$ 725
TOTAL for the Reporting Period	(2) \$ 725

<b>3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)</b>	
Contributions Received from Political Committees (Part C)	\$ 0
All Other Contributions (Part D)	\$ 0
TOTAL for the Reporting Period	(3) \$ 0

<b>4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)</b>	
TOTAL for the Reporting Period	(4) \$ 0

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	\$ 1222 <sup>00</sup>
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# 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			DATE		AMOUNT
Karen Dolan for City Council				From 5/2/13 To 6/10/13			MO.	DAY	YEAR
Full Name of Contributor				MO.	DAY	YEAR	\$		
KENNETH DEMENICHI				5	8	2013	\$ 75 <sup>00</sup>		
Mailing Address				MO.	DAY	YEAR	\$		
512 ELMHURST AVE.							\$		
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$		
BETHLEHEM	PA	18017					\$		
Full Name of Contributor				MO.	DAY	YEAR	\$		
GREG BUTZ				5	8	2013	\$ 200 <sup>00</sup>		
Mailing Address				MO.	DAY	YEAR	\$		
1636 BARKWOOD DR.							\$		
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$		
OREFIELD	PA	18069					\$		
Full Name of Contributor				MO.	DAY	YEAR	\$		
DAN PORESKY				5	8	2013	\$ 100 <sup>00</sup>		
Mailing Address				MO.	DAY	YEAR	\$		
824 BERKS ST.							\$		
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$		
ALLEN TOWN	PA	18104					\$		
Full Name of Contributor				MO.	DAY	YEAR	\$		
JEFF & SUSAN PARKS				5	15	2013	\$ 100 <sup>00</sup>		
Mailing Address				MO.	DAY	YEAR	\$		
223 E. CHURCH ST.							\$		
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$		
BETHLEHEM	PA	18018					\$		
Full Name of Contributor				MO.	DAY	YEAR	\$		
JAMES HICKEY				5	17	2013	\$ 250 <sup>00</sup>		
Mailing Address				MO.	DAY	YEAR	\$		
1865 TROXELL ST.							\$		
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$		
ALLEN TOWN	PA	18109					\$		
Full Name of Contributor				MO.	DAY	YEAR	\$		
Mailing Address				MO.	DAY	YEAR	\$		
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$		
							\$		
Full Name of Contributor				MO.	DAY	YEAR	\$		
Mailing Address				MO.	DAY	YEAR	\$		
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$		
							\$		
Full Name of Contributor				MO.	DAY	YEAR	\$		
Mailing Address				MO.	DAY	YEAR	\$		
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$		
							\$		

PAGE TOTAL  
\$ 725<sup>00</sup>

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

# 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 <b>KAREN DOLAN FOR CITY COUNCIL</b>	Reporting Period From <b>5/7/13</b> To <b>6/10/13</b>
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<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>		
TOTAL for the Reporting Period	(1)	\$ <b>0</b>

<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>		
TOTAL for the Reporting Period	(2)	\$ <b>100<sup>00</sup></b>

<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>		
TOTAL for the Reporting Period	(3)	\$ <b>0</b>

<b>TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD</b> <small>(Add and enter amount totals from Boxes 1, 2 and 3; also enter on Page 1, Report Cover Page, Item F.)</small>	\$ <b>100<sup>00</sup></b>
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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 Karen Dolan for City Council	Reporting Period From 5/7/13 To 6/10/13
---	--

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
BETHLEHEM BUSINESS FORMS	5	18	2013	\$ 100 <sup>00</sup>
Mailing Address PO BOX 4250				\$
City BETHLEHEM	State PA	Zip Code (Plus 4) 18018		\$
Description of Contribution PRINTING CAMPAIGN LETTER				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		\$
Description of Contribution				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		\$
Description of Contribution				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		\$
Description of Contribution				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		\$
Description of Contribution				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		\$
Description of Contribution				

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

PAGE TOTAL  
\$ 100<sup>00</sup>

SCHEDULE III  
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Karen Dolan for City Council	Reporting Period From 5/7/13 to 6/10/13
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To Whom Paid	MO.	DAY	YEAR	Amount
BETHLEHEM BUSINESS FORMS	5	18	2013	\$ 316.94
Mailing Address: PO BOX 4250				
Description of Expenditure: PRINTING + ADDRESSING				
City: BETHLEHEM State: PA Zip Code (Plus 4): 18018				
CAMPAIGN LETTER				
BETHLEHEM BUSINESS FORMS	5	24	2013	\$ 166.00
Mailing Address: P.O. BOX 4250				
Description of Expenditure: POSTAGE FOR MAILING				
City: BETHLEHEM State: PA Zip Code (Plus 4): 18018				
CAPITAL PROMOTIONS	5	24	2013	\$ 350.00
Mailing Address: PO BOX 231				
Description of Expenditure: CAMPAIGN ROAD SIGNS				
City: GLENSIDE State: PA Zip Code (Plus 4): 19038				
				\$
Description of Expenditure:				
				\$
Description of Expenditure:				
				\$
Description of Expenditure:				
				\$
Description of Expenditure:				
				\$
Description of Expenditure:				
				\$
Description of Expenditure:				

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

PAGE TOTAL  
\$ 822.94

## 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.

Name of Filing Committee or Candidate <b>Karen Dolan for City Council</b>	Reporting Period From <b>5/7/13</b> To <b>6/10/13</b>
--	--

Name of Creditor <b>KAREN DOLAN</b>					Outstanding Balance of Debt <b>\$ 2000<sup>00</sup></b>	
Mailing Address <b>55 BRIDLE PATH RD</b>		DATE DEBT INCURRED	MO.	DAY	YEAR	
City <b>BETHLEHEM</b>			<b>5</b>	<b>11</b>	<b>2009</b>	
		State	Zip Code (Plus 4)			
		<b>PA</b>	<b>18017</b>			
Description of Debt <b>LOAN FOR CAMPAIGN</b>						
Name of Creditor					Outstanding Balance of Debt	
					<b>\$</b>	
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City						
		State	Zip Code (Plus 4)			
Description of Debt						
Name of Creditor					Outstanding Balance of Debt	
					<b>\$</b>	
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City						
		State	Zip Code (Plus 4)			
Description of Debt						
Name of Creditor					Outstanding Balance of Debt	
					<b>\$</b>	
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City						
		State	Zip Code (Plus 4)			
Description of Debt						
Name of Creditor					Outstanding Balance of Debt	
					<b>\$</b>	
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City						
		State	Zip Code (Plus 4)			
Description of Debt						

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

PAGE TOTAL <b>\$ 2000<sup>00</sup></b>
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