

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: <input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> COMMITTEE <input type="checkbox"/> LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist KAREW 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)	6TH TUESDAY PRE-PRIMARY ¹	2ND FRIDAY PRE-PRIMARY ²	30 DAY POST PRIMARY ³
	6TH TUESDAY PRE-ELECTION ⁴	2ND FRIDAY PRE-ELECTION <input checked="" type="checkbox"/> ⁵	30 DAY POST ELECTION ⁶
	ANNUAL REPORT ⁷	FILING METHOD () CHECK ONE <input checked="" type="checkbox"/> PAPER <input 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		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
	6	11	2013		10	21	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. 1313, 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

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 X	LOBBYIST ³
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	2ND FRIDAY PRE-PRIMARY	30 DAY POST PRIMARY	AMENDMENT REPORT?	YES	NO
	6TH TUESDAY PRE-ELECTION	2ND FRIDAY PRE-ELECTION	30 DAY POST ELECTION	TERMINATION REPORT?	YES	NO
	ANNUAL REPORT	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	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	
	6	11	2013		10	21	2013		
A. Amount Brought Forward From Last Report	\$	671 ⁰⁰							
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	1110 ⁰⁰							
C. Total Funds Available (Sum of Lines A and B)	\$	1781 ⁰⁰							
D. Total Expenditures (From Schedule III)	\$	419.63							
E. Ending Cash Balance (Subtract Line D from Line C)	\$	1361.37							
F. Value of in-Kind Contributions Received (From Schedule II)	\$	-							
G. Unpaid Debts and Obligations (From Schedule IV)	\$	2000 ⁰⁰							

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. 1933, 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 _____

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate Karen Dolan for City Council	Reporting Period From <u>6/11/13</u> To <u>10/21/13</u>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$ <u>110</u>

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ <u>200</u>
All Other Contributions (Part B)	\$ <u>300</u>
TOTAL for the Reporting Period	(2) \$ <u>500</u>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ <u>500</u>
All Other Contributions (Part D)	\$ <u>-</u>
TOTAL for the Reporting Period	(3) \$ <u>500</u>

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

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	\$ <u>1110⁰⁰</u>
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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 KAREN DOLAN FOR CITY COUNCIL	Reporting Period From 6/11/13 To 10/21/13
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				DATE			AMOUNT
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
BETHLEHEM CITY DEMOCRATIC COMMITTEE				10	14	2013	\$ 200 ⁰⁰
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
BETHLEHEM	PA	-					\$
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 \$ 200

PART B
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				
KAREN DOLAN FOR CITY COUNCIL				From	6/11/13	To	10/24/13	
				DATE			AMOUNT	
Full Name of Contributor				MO.	DAY	YEAR		
BROUGHAL & DEVITTO LLP				10	16	2013	\$	200 ⁰⁰
Mailing Address				MO.	DAY	YEAR		
38 W. MARKET ST								
City				MO.	DAY	YEAR		
BETHLEHEM PA 18018								
Full Name of Contributor				MO.	DAY	YEAR		
DIANE LABELLE				10	18	2013	\$	100 ⁰⁰
Mailing Address				MO.	DAY	YEAR		
52 E. CHURCH ST.								
City				MO.	DAY	YEAR		
BETHLEHEM PA 18018								
Full Name of Contributor				MO.	DAY	YEAR		
Mailing Address				MO.	DAY	YEAR		
City				MO.	DAY	YEAR		
Full Name of Contributor				MO.	DAY	YEAR		
Mailing Address				MO.	DAY	YEAR		
City				MO.	DAY	YEAR		
Full Name of Contributor				MO.	DAY	YEAR		
Mailing Address				MO.	DAY	YEAR		
City				MO.	DAY	YEAR		
Full Name of Contributor				MO.	DAY	YEAR		
Mailing Address				MO.	DAY	YEAR		
City				MO.	DAY	YEAR		
Full Name of Contributor				MO.	DAY	YEAR		
Mailing Address				MO.	DAY	YEAR		
City				MO.	DAY	YEAR		
Full Name of Contributor				MO.	DAY	YEAR		
Mailing Address				MO.	DAY	YEAR		
City				MO.	DAY	YEAR		
Full Name of Contributor				MO.	DAY	YEAR		
Mailing Address				MO.	DAY	YEAR		
City				MO.	DAY	YEAR		

PAGE TOTAL
\$ 300

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

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.

Name of Filing Committee or Candidate KAREN DOLAN FOR CITY COUNCIL	Reporting Period From 6/11/13 To 10/21/13
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Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
FRIENDS OF BOB DONCHEZ	10	14	2013	\$ 500
Mailing Address 377 DEVONSHIRE DR	MO.	DAY	YEAR	\$
City BETHLEHEM	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18017	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$

PAGE TOTAL	\$ 500
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Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate KAREN DOLAN FOR CITY COUNCIL	Reporting Period from 6/11/13 To 10/21/13
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To Whom Paid	MO.	DAY	YEAR	Amount
BETHLEHEM BUSINESS FORMS	10	11	2013	\$ 419.63
Mailing Address: PO BOX 4250				
Description of Expenditure: CAMPAIGN MAILER				
City: BETHLEHEM	State: PA	Zip Code (Plus 4): 18018		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
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
\$ 419.63

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 KAREN DOLAN FOR CITY COUNCIL	Reporting Period From 6/11/13 To 10/21/13
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Name of Creditor KAREN DOLAN					Outstanding Balance of Debt \$ 2000⁰⁰	
Mailing Address 55 BRIDLE PATH RD	DATE DEBT INCURRED	MO. 5	DAY 11	YEAR 2009		
City BETHLEHEM		State PA	Zip Code (Plus 4)		18017	
Description of Debt CAMPAIGN LOAN						

Name of Creditor					Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City		State	Zip Code (Plus 4)			
Description of Debt						

Name of Creditor					Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City		State	Zip Code (Plus 4)			
Description of Debt						

Name of Creditor					Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City		State	Zip Code (Plus 4)			
Description of Debt						

Name of Creditor					Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City		State	Zip Code (Plus 4)			
Description of Debt						

Name of Creditor					Outstanding Balance of Debt \$	
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
\$ 2000⁰⁰