

## 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)		<input checked="" type="checkbox"/>	Committee		Lobbyist	
Name of Filing Committee, Candidate or Lobbyist		Friends of Grace Crampsie Smith						
Street Address		1403 Lorain Ave						
City	Bethlehem	State	PA	Zip Code	18018			
Type of Report (Place x under report type)								
1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary	4- 6 <sup>th</sup> Tuesday Pre- Election	5- 2 <sup>nd</sup> Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)		05/18/2021	Year	2021	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>
Summary of Receipts and Expenditures			From Date	To Date	For Office Use Only			
			05/04/2021	06/07/2021				
A. Amount Brought Forward From Last Report			\$	13,502.23				
B. Total Monetary Contributions and Receipts (From Schedule I)			\$	300.00				
C. Total Funds Available (Sum of Lines A and B)			\$	13,802.23				
D. Total Expenditures (From Schedule III)			\$	4,430.75				
E. Ending Cash Balance (Subtract Line D from Line C)			\$	9,371.48				
F. Value of In-Kind Contributions Received (From Schedule II)			\$	0				
G. Unpaid Debts and Obligations (From Schedule IV)			\$	1,000.00				

Affidavit Section

SCHEDULE I  
**Contributions and Receipts**  
 Detailed Summary Page

<b>Filer Identification Number</b>		
<b>1. Unitemized Contributions and Receipts - \$50.00 or Less per Contributor</b>		
Total for the reporting period (1)	\$	200.00
<b>2. Contributions of \$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)	\$	100.00
Total for the reporting period (2)	\$	100.00
<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
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>		\$ 300.00

**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.)

<b>Filer Identification Number:</b>	
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<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		\$ 100.00
Kathleen Heffelfinger					05/12/2021		
<b>House #</b>	2124	<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>		
		Kingsview Rd					
<b>City</b>	Macungie	<b>State</b>	PA	<b>Zip Code</b>	18062	<b>Date [MM/DD/YYYY]</b>	
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		
<b>House #</b>	Kingsview F	<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	
<b>Full Name of Contributor</b>					<b>Date [MM/DD/YYYY]</b>		
<b>House #</b>		<b>Street Address</b>			<b>Date [MM/DD/YYYY]</b>		
<b>City</b>		<b>State</b>		<b>Zip Code</b>		<b>Date [MM/DD/YYYY]</b>	

**SCHEDULE III**  
**Statement of Expenditures**

<b>Filer Identification Number:</b>	
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<b>To Whom Paid</b>		Lehigh Valley Print Center				<b>Date [MM/DD/YYYY]</b>		\$ 58.38	
						05/05/2021			
<b>House #</b>	1701	<b>Street Address</b>		Union Blvd Suite 114		<b>Description of Expenditure</b>			
<b>City</b>	Allentown	<b>State</b>	PA	<b>Zip Code</b>	18109	Campaign sign			
<b>To Whom Paid</b>		Lehigh Valley Print Center				<b>Date [MM/DD/YYYY]</b>		\$ 3,769.89	
						05/10/2021			
<b>House #</b>	1701	<b>Street Address</b>		Union Blvd Suite 114		<b>Description of Expenditure</b>			
<b>City</b>	Allentown	<b>State</b>	PA	<b>Zip Code</b>	18109	Mailing			
<b>To Whom Paid</b>		USPS				<b>Date [MM/DD/YYYY]</b>		\$ 33.48	
						05/11/2021			
<b>House #</b>	535	<b>Street Address</b>		Wood St		<b>Description of Expenditure</b>			
<b>City</b>	Bethlehem	<b>State</b>	Pa	<b>Zip Code</b>	18106	Stamps			
<b>To Whom Paid</b>		PNC Bank				<b>Date [MM/DD/YYYY]</b>		\$ 500.00	
						05/14/2021			
<b>House #</b>	1481	<b>Street Address</b>		8th Ave		<b>Description of Expenditure</b>			
<b>City</b>	Bethlehem	<b>State</b>	PA	<b>Zip Code</b>	18018	returned check -improper signature			
<b>To Whom Paid</b>		PNC Bank				<b>Date [MM/DD/YYYY]</b>		\$ 69.00	
						06/01/2021			
<b>House #</b>	1481	<b>Street Address</b>		8th Ave		<b>Description of Expenditure</b>			
<b>City</b>	Bethlehem	<b>State</b>	PA	<b>Zip Code</b>	18018	Service Charge			
<b>To Whom Paid</b>						<b>Date [MM/DD/YYYY]</b>			
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>			
<b>City</b>		<b>State</b>		<b>Zip Code</b>					
<b>To Whom Paid</b>						<b>Date [MM/DD/YYYY]</b>			
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>			
<b>City</b>		<b>State</b>		<b>Zip Code</b>					
<b>To Whom Paid</b>						<b>Date [MM/DD/YYYY]</b>			
<b>House #</b>		<b>Street Address</b>				<b>Description of Expenditure</b>			
<b>City</b>		<b>State</b>		<b>Zip Code</b>					

**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.

<b>Filer Identification Number:</b>	
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<b>Name of Creditor</b>		Grace Crampsie Smith				<b>Outstanding Balance of Debt</b>	
<b>House #</b>	1403	<b>Street Address</b>	Lorain Ave		<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$ 1,000.00
				02/19/2019			
<b>City</b>	Bethlehem	<b>State</b>	PA	<b>Zip Code</b>	18018		
<b>Description of Debt</b>							

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

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

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

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

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

## 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		Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		Friends of Grace Crampsie Smith							
Street Address		1403 Lorain Ave							
City	Bethlehem	State	PA	Zip Code	18018				
Type of Report (Place x under report type)									
1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary	4- 6 <sup>th</sup> Tuesday Pre-Election	5- 2 <sup>nd</sup> Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)		05/18/2021	Year	2021	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>	
Summary of Receipts and Expenditures			From Date	To Date	For Office Use Only				
			05/04/21	06/07/21					
A. Amount Brought Forward From Last Report			\$	13,502.23					
B. Total Monetary Contributions and Receipts (From Schedule I)			\$	300.00					
C. Total Funds Available (Sum of Lines A and B)			\$	13802.23					
D. Total Expenditures (From Schedule III)			\$	4,430.75					
E. Ending Cash Balance (Subtract Line D from Line C)			\$	9,371.48					
F. Value of In-Kind Contributions Received (From Schedule II)			\$	0					
G. Unpaid Debts and Obligations (From Schedule IV)			\$	1,000.00					
Affidavit Section									

SCHEDULE I  
**Contributions and Receipts**  
 Detailed Summary Page

<b>Filer Identification Number</b>		
<b>1. Unitemized Contributions and Receipts - \$50.00 or Less per Contributor</b>		
Total for the reporting period (1)	§	200.00
<b>2. Contributions of \$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)	§	100.00
Total for the reporting period (2)	§	100.00
<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
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>		§ 300.00

**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		Kathleen Heffelfinger				Date [MM/DD/YYYY]	\$	100.00
						05/12/2021		
House #	2124	Street Address		Kingsview Rd		Date [MM/DD/YYYY]	\$	
City	Macungie	State	PA	Zip Code	18062	Date [MM/DD/YYYY]	\$	
Full Name of Contributor						Date [MM/DD/YYYY]	\$	
House #	Kingsview F	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]	\$	



**SCHEDULE III  
Statement of Expenditures**

Filer Identification Number:	
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To Whom Paid		Lehigh Valley Print Center				Date [MM/DD/YYYY]	\$	58.38
						05/05/2021		
House #	1701	Street Address	Union Blvd Suite 114			Description of Expenditure		
City	Allentown	State	PA	Zip Code	18109	Campaign sign		
To Whom Paid		Lehigh Valley Print Center				Date [MM/DD/YYYY]	\$	3,769.89
						05/10/2021		
House #	1701	Street Address	Union Blvd Suite 114			Description of Expenditure		
City	Allentown	State	PA	Zip Code	18109	Mailing		
To Whom Paid		USPS				Date [MM/DD/YYYY]	\$	33.48
						05/11/2021		
House #	535	Street Address	Wood St			Description of Expenditure		
City	Bethlehem	State	Pa	Zip Code	18106	Stamps		
To Whom Paid		PNC Bank				Date [MM/DD/YYYY]	\$	500.00
						05/14/2021		
House #	1481	Street Address	8th Ave			Description of Expenditure		
City	Bethlehem	State	PA	Zip Code	18018	returned check -improper signature		
To Whom Paid		PNC Bank				Date [MM/DD/YYYY]	\$	69.00
						06/01/2021		
House #	1481	Street Address	8th Ave			Description of Expenditure		
City	Bethlehem	State	PA	Zip Code	18018	Service Charge		
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				

**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.

<b>Filer Identification Number:</b>	
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<b>Name of Creditor</b>		Grace Crampsie Smith				<b>Outstanding Balance of Debt</b>	
<b>House #</b>	1403	<b>Street Address</b>	Lorain Ave		<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$ 1,000.00
					02/19/2019		
<b>City</b>		Bethlehem	<b>State</b>		PA	<b>Zip Code</b>	18018
<b>Description of Debt</b>							
<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>		<b>Street Address</b>			<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$
<b>City</b>			<b>State</b>			<b>Zip Code</b>	
<b>Description of Debt</b>							
<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>		<b>Street Address</b>			<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$
<b>City</b>			<b>State</b>			<b>Zip Code</b>	
<b>Description of Debt</b>							
<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>		<b>Street Address</b>			<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$
<b>City</b>			<b>State</b>			<b>Zip Code</b>	
<b>Description of Debt</b>							
<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>		<b>Street Address</b>			<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$
<b>City</b>			<b>State</b>			<b>Zip Code</b>	
<b>Description of Debt</b>							
<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>		<b>Street Address</b>			<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>		\$
<b>City</b>			<b>State</b>			<b>Zip Code</b>	
<b>Description of Debt</b>							