

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: <input type="checkbox"/>		Report Filed By: <input type="checkbox"/>		CANDIDATE ^{1.}	COMMITTEE	<input checked="" type="checkbox"/> LOBBYIST ^{3.}		
Name of Filing Committee, Candidate or Lobbyist: Friends of Bryan Callahan								
Street Address: 633 Main St								
City: Rethlehem				State: PA	Zip Code: 18018-3801			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY ^{1.}	2ND FRIDAY PRE-PRIMARY ^{2.}	<input checked="" type="checkbox"/> 30 DAY POST PRIMARY ^{3.}		AMENDMENT REPORT?	YES	NO	
	6TH TUESDAY PRE-ELECTION ^{4.}	2ND FRIDAY PRE-ELECTION ^{5.}	30 DAY POST ELECTION ^{6.}		TERMINATION REPORT?	YES	NO	
	ANNUAL REPORT ^{7.}	YEAR 2018	FILING METHOD <input type="checkbox"/> CHECK ONE <input checked="" type="checkbox"/>		PAPER	<input checked="" type="checkbox"/>	DISKETTE	
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number	Office Code	
				MO.	DAY	YEAR	Party Code	
							Dem	
							(SEE INSTRUCTIONS FOR CODES)	
Summary of Receipts and Expenditures from:		MO.	DAY	YEAR	To	MO.	DAY	YEAR
A. Amount Brought Forward From Last Report		\$ 12,600.98						
B. Total Monetary Contributions and Receipts (From Schedule I)		\$ 0.00						
C. Total Funds Available (Sum of Lines A and B)		\$ 12,600.98						
D. Total Expenditures (From Schedule III)		\$ 1,994.56						
E. Ending Cash Balance (Subtract Line D from Line C)		\$ 10,606.42						
F. Value of In-Kind Contributions Received (From Schedule II)		\$ 0						
G. Unpaid Debts and Obligations (From Schedule IV)		\$ 0						

FOR OFFICE USE ONLY

AFFIDAVIT SECTION

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends of Bryan Callahan</i>	Reporting Period From <i>11/1/18</i> To <i>4/30/18</i>
---------------------------------------------------------------------------	-----------------------------------------------------------

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the Reporting Period	(1)	\$ <i>0</i>

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

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

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

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>	\$ <i>0.00</i>
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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 <u>Friends of Bryan Callahan</u>	Reporting Period From <u>1/1/18</u> To <u>4/30/18</u>
---------------------------------------------------------------------------	----------------------------------------------------------

1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period	(2) \$

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

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.)	\$ <u> </u>
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STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Friends of Bryan Collohan	Reporting Period From 1/1/18 To 4/30/18
---------------------------------------------------------------------------	----------------------------------------------------------

To Whom Paid The Morning Call	MO. 01	DAY 03	YEAR 2018	Amount \$ 15.69
Mailing Address 101 N 6th St.	Description of Expenditure monthly subscription			
City Allentown	State PA	Zip Code (Plus 4) 18101-		

To Whom Paid J and J transportation	MO. 01	DAY 08	YEAR 2018	Amount \$ 624.22
Mailing Address 445 Business Park Ln	Description of Expenditure Travel to Philadelphia			
City Allentown	State PA	Zip Code (Plus 4) 18109-		

To Whom Paid Tailgater's Pub & Grill	MO. 01	DAY 25	YEAR 2018	Amount \$ 47.58
Mailing Address 1313 Center St.	Description of Expenditure Finance meeting			
City Bethlehem	State PA	Zip Code (Plus 4) 18018 -		

To Whom Paid The Morning Call	MO. 01	DAY 30	YEAR 2018	Amount \$ 15.96
Mailing Address 101 N 6th St.	Description of Expenditure monthly subscription			
City Allentown	State PA	Zip Code (Plus 4) 18001 -		

To Whom Paid The Morning Call	MO. 02	DAY 27	YEAR 2018	Amount \$ 15.96
Mailing Address 101 N 6th St.	Description of Expenditure Monthly subscription			
City Allentown	State PA	Zip Code (Plus 4) 18101 -		

To Whom Paid The Morning Call	MO. 03	DAY 27	YEAR 2018	Amount \$ 15.96
Mailing Address 101 N 6th St.	Description of Expenditure monthly subscription			
City Allentown	State PA	Zip Code (Plus 4) 18101 -		

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
\$ 734.56

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <u>Friends of Bryan Callahan</u>	Reporting Period From <u>11/1/2018</u> To <u>4/30/2018</u>
---------------------------------------------------------------------------	---------------------------------------------------------------

To Whom Paid <u>Key Stone Victory Fund</u>	MO. <u>3</u>	DAY <u>30</u>	YEAR <u>18</u>	Amount <u>\$ 250.00</u>
Mailing Address <u>PO Box 22656</u>	Description of Expenditure <u>Donation</u>			
City <u>Philadelphia</u>	State <u>PA</u>	Zip Code (Plus 4) <u>19110</u>		

To Whom Paid <u>Celeste Dee</u>	MO. <u>4</u>	DAY <u>9</u>	YEAR <u>2018</u>	Amount <u>\$ 60.00</u>
Mailing Address <u>647 W. Union St</u>	Description of Expenditure <u>Ticket for Syrian Dinner</u>			
City <u>Whitehall</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18052</u>		

To Whom Paid <u>Friends of Dean Donaher</u>	MO. <u>4</u>	DAY <u>9</u>	YEAR <u>18</u>	Amount <u>\$ 250.00</u>
Mailing Address <u>710 Wedgewood Dr.</u>	Description of Expenditure <u>Donation</u>			
City <u>Bethlehem</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18017</u>		

To Whom Paid <u>Lehigh Valley Habitat Council</u>	MO. <u>4</u>	DAY <u>9</u>	YEAR <u>18</u>	Amount <u>\$ 200.00</u>
Mailing Address <u>PO Box 20226</u>	Description of Expenditure <u>Dinner Tax + Program Ad</u>			
City <u>Lehigh Valley</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18002</u>		

To Whom Paid <u>Committee to Elect Mike Stack</u>	MO. <u>4</u>	DAY <u>26</u>	YEAR <u>18</u>	Amount <u>\$ 500.00</u>
Mailing Address <u>PO Box 292</u>	Description of Expenditure <u>DONATION</u>			
City <u>Newtown</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18940</u>		

To Whom Paid	MO.	DAY	YEAR	Amount <u>\$</u>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4) <u>-</u>		

To Whom Paid	MO.	DAY	YEAR	Amount <u>\$</u>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4) <u>-</u>		

To Whom Paid	MO.	DAY	YEAR	Amount <u>\$</u>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4) <u>-</u>		

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

PAGE TOTAL
\$ 1,260.00

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 Friends of Bryan Callahan	Reporting Period From <u>1/1/18</u> To <u>4/30/18</u>
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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				-		
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 \$ _____
