

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 Ed Pawlowski										
STREET ADDRESS 43 N. 11th Street										
CITY Allentown			STATE PA		ZIP CODE 18101					
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE Mayor- City of Allentown		DISTRICT NO. -	PARTY Dem.	DATE OF ELECTION				
						MO.	DAY	YEAR		
<input type="checkbox"/> 6TH TUESDAY PRE-PRIMARY										
<input type="checkbox"/> 2ND FRIDAY PRE-PRIMARY										
<input checked="" 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										
		DATES OF REPORTING PERIOD		MO.	DAY	YEAR	TO	MO.	DAY	YEAR
				05	06	14		06	09	14
		CASH BALANCE AT END OF REPORTING PERIOD:		\$						
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$						
		AMENDMENT REPORT?	YES		NO	<input checked="" type="checkbox"/>				
		TERMINATION REPORT?	YES		NO	<input checked="" type="checkbox"/>				
FOR OFFICE USE ONLY										

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS
14th DAY OF **June** 20**14**

Ed Pawlowski
 SIGNATURE

Ed Pawlowski
 PRINTED NAME

MY COMMISSION EXPIRES **09/26/2015**
 MO. DAY YR.

610 **437-7575**
 AREA CODE DAYTIME TELEPHONE NUMBER

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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

Notarial Seal
Cynthia Y. Mota, Notary Public
 City of Allentown, Lehigh County,
 My Commission Expires Sept. 26, 2015
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Commonwealth of Pennsylvania - Campaign Finance Report

(NOTE: This report must be clear and legible. It should be typed)

Filer Identification Number		Report Filed By:	Candidate <input type="checkbox"/>	Committee <input type="checkbox"/>	Lobbyist <input checked="" type="checkbox"/>	
Name of Filing Committee, Candidate or Lobbyist			Friends of Ed Pawlowski			
Street Address			43 N. 11th Street			
City	Allentown	State	PA	Zip Code	18101	

TYPE OF REPORT (Place x under report type)

1-6th Tuesday Pre-Primary	2-2nd Friday Pre-Primary	3-30 Day Post Primary	4-6th Tuesday Pre-Election	5-2nd Friday Pre-Election	6-30 Day Post Election	7 - Annual	Special 2nd 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)		05/20/2014	YEAR	2014	AMENDMENT REPORT?	<input type="checkbox"/>	TERMINATION REPORT?	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	05/06/2014	06/09/2014	
A. Amount Brought Forward From Last Report		\$106,981.45	
B. Total Monetary Contributions and Receipts (From Schedule I)		\$0.00	
C. Total Funds Available (Sum of Lines A and B)		\$106,981.45	
D. Total Expenditures (From Schedule III)		\$24,061.30	
E. Ending Cash Balance (Subtract Line D from Line C)		\$82,920.15	
F. Value of In-Kind Contributions Received (From Schedule II)		\$0.00	
G. Unpaid Debts and Obligations (From Schedule IV)		\$0.00	

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

16th day of June 20 14
 Sally A. Corvino
 Signature


 Signature of Person Submitting Report
 Samuel C. Ruchewicz
 Printed Name

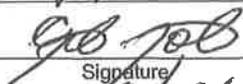
My commission expires 3 1 15
 MO. DAY YR.

610 841-3733
 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

14th day of June 20 14

 Signature
 My commission expires 09/26/2015
 MO. DAY YR.

x 
 Signature of Person Submitting Report
 Ed Pawlowski
 Printed Name
 (610) 434-0266
 Area Code Daytime Telephone Number

COMMONWEALTH OF PENNSYLVANIA
 Notarial Seal
 Cynthia Y. Mota, Notary Public
 City of Allentown, Lehigh County
 Commission Expires Sept. 26, 2015
 PENNSYLVANIA ASSOCIATION OF NOTARIES

COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL
 Sally A. Corvino, Notary Public
 City of Allentown, Lehigh County
 My commission expires March 01, 2015

Schedule I
Contributions and Receipts
 Detailed Summary Page

Name of Filing Committee or Candidate Friends of Ed Pawlowski	Reporting Period From <u>5/6/2014</u> to <u>6/12/2014</u>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
	TOTAL for the Reporting Period	(1) \$0.00

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND B)		
Contributions Received from Political Committees (Part A)		\$0.00
All Other Contributions (Part B)		\$0.00
	TOTAL for the Reporting Period	(2) \$0.00

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND D)		
Contributions Received from Political Committees (Part C)		\$0.00
All Other Contributions (Part D)		\$0.00
	TOTAL for the Reporting Period	(3) \$0.00

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)		
	TOTAL for the Reporting Period	(4) \$0.00

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.)	\$0.00
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SCHEDULE II
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 Friends of Ed Pawlowski	Reporting Period From 5/6/2014 To 6/12/2014
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the Reporting Period	(1)	\$0.00

2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)		
TOTAL for the Reporting Period	(2)	\$0.00

3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)		
TOTAL for the Reporting Period	(3)	\$0.00

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.)		\$0.00
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STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period			
Friends of Ed Pawlowski				From <u>5/6/2014</u> To <u>6/9/2014</u>			
To Whom Paid			MO.	DAY	YEAR	Amount	
7 Points Consulting			5	8	2014	\$16,610.00	
Mailing Address				Description of Expenditure			
840 W Hamilton Street, Suite #321				Invoice 128A			
City		State	Zip Code (Plus 4)				
Allentown		PA	18104				
To Whom Paid			MO.	DAY	YEAR	Amount	
Verizon Wireless			5	8	2014	\$399.29	
Mailing Address				Description of Expenditure			
PO Box 5029				Wireless Phone Charges			
City		State	Zip Code (Plus 4)				
Wallingford		CT	06492				
To Whom Paid			MO.	DAY	YEAR	Amount	
Lehigh Valley Print Center			5	13	2014	\$185.50	
Mailing Address				Description of Expenditure			
1337 Nelson Street				Invoices #3826 & #3872			
City		State	Zip Code (Plus 4)				
Allentown		PA	18109				
To Whom Paid			MO.	DAY	YEAR	Amount	
Rosetta Stone			5	13	2014	\$45.58	
Mailing Address				Description of Expenditure			
1919 N. Lynn Street, 7th Floor				Language Software			
City		State	Zip Code (Plus 4)				
Arlington		VA	22209				
To Whom Paid			MO.	DAY	YEAR	Amount	
Allentown School District Foundation			5	14	2014	\$500.00	
Mailing Address				Description of Expenditure			
31 S Penn St.				Sponsorship - 2014			
City		State	Zip Code (Plus 4)				
Allentown		PA	18105				
To Whom Paid			MO.	DAY	YEAR	Amount	
The Main Gate			5	14	2014	\$800.00	
Mailing Address				Description of Expenditure			
18th & Liberty Streets				Invoice #0507M - McCord Rally Costs			
City		State	Zip Code (Plus 4)				
Allentown		PA	18103				
To Whom Paid			MO.	DAY	YEAR	Amount	
Turkey Hill #0249			5	15	2014	\$42.22	
Mailing Address				Description of Expenditure			
70 Station Cir				Fuel for Campaign			
City		State	Zip Code (Plus 4)				
Hazleton		PA	18202-9726				
To Whom Paid			MO.	DAY	YEAR	Amount	
Enterprise Rent-A-Car			5	16	2014	\$181.00	
Mailing Address				Description of Expenditure			
600 Corporate Park Drive				Car Rental			
City		State	Zip Code (Plus 4)				
Saint Louis		MO	63105				
To Whom Paid			MO.	DAY	YEAR	Amount	
7 Points Consulting, LLC			5	23	2014	\$3,135.00	
Mailing Address				Description of Expenditure			
840 W Hamilton Street Suite #321				Invoice #156			
City		State	Zip Code (Plus 4)				
Allentown		PA	18101				

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

PAGE TOTAL

\$21,898.59

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Friends of Ed Pawlowski			Reporting Period From <u>5/6/2014</u> To <u>6/9/2014</u>			
To Whom Paid Friends of Leslie Alteri			MO.	DAY	YEAR	Amount
			5	30	2014	\$250.00
Mailing Address 4120 Douglass Drive			Description of Expenditure Donation			
City Bethlehem	State PA	Zip Code (Plus 4) 18020				
To Whom Paid NGP Van, Inc.			MO.	DAY	YEAR	Amount
			5	30	2014	\$1,380.00
Mailing Address 1101 15th Street, NW, Suite 500			Description of Expenditure Invoice #68729			
City Washington	State DC	Zip Code (Plus 4) 20005				
To Whom Paid Edwin Pawlowski			MO.	DAY	YEAR	Amount
			6	2	2014	\$82.10
Mailing Address 43 N 11th St			Description of Expenditure 06022014 Reimbursement - Travel & Related Expenses			
City Allentown	State PA	Zip Code (Plus 4) 18101-1019				
To Whom Paid First Bank Merchant Services			MO.	DAY	YEAR	Amount
			6	3	2014	\$19.95
Mailing Address 6201 Powers Ferry Road			Description of Expenditure Fee			
City Atlanta	State GA	Zip Code (Plus 4) 30339				
To Whom Paid Venny's Pizza			MO.	DAY	YEAR	Amount
			6	3	2014	\$42.20
Mailing Address 840 W Hamilton Street First Floor			Description of Expenditure Food Donation			
City Allentown	State PA	Zip Code (Plus 4) 18101				
To Whom Paid Verizon Wireless			MO.	DAY	YEAR	Amount
			6	9	2014	\$388.46
Mailing Address PO Box 5029			Description of Expenditure Campaign Wireless Phones			
City Wallingford	State CT	Zip Code (Plus 4) 06492				

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

DSEB-502 (7-99)

PAGE TOTAL

\$2,162.71