

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 ^{2.} <input checked="" type="checkbox"/>		LOBBYIST ^{3.}			
Name of Filing Committee, Candidate or Lobbyist: <i>Friends of Jeff Glazier</i>											
Street Address: <i>159 Hamilton Street</i>											
City: <i>Allentown</i>					State: <i>PA</i>		Zip Code: <i>18101 -</i>				
TYPE OF REPORT (place X to the right of report type)	8TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST PRIMARY	3.	AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST ELECTION	6.	TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	YEAR		FILING METHOD () 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	Party Code	County Code	
					MO.	DAY	YEAR				
					<i>11</i>	<i>5</i>	<i>2013</i>	<i>15</i>	<i>OTH</i>	<i>DEM</i>	<i>39</i>
(SEE INSTRUCTIONS FOR CODES)											
Summary of Receipts and Expenditures from:			MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY	
			<i>10</i>	<i>21</i>	<i>2013</i>		<i>11</i>	<i>25</i>	<i>2013</i>		
A. Amount Brought Forward From Last Report				\$		<i>2239.08</i>					
B. Total Monetary Contributions and Receipts (From Schedule I)				\$		<i>0.00</i>					
C. Total Funds Available (Sum of Lines A and B)				\$		<i>2239.08</i>					
D. Total Expenditures (From Schedule III)				\$		<i>350.00</i>					
E. Ending Cash Balance (Subtract Line D from Line C)				\$		<i>1889.08</i>					
F. Value of In-Kind Contributions Received (From Schedule II)				\$		<i>0.00</i>					
G. Unpaid Debts and Obligations (From Schedule IV)				\$		<i>0.00</i>					

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

3rd day of *DECEMBER* 20 *13*

Kimberly A. Wellner
Signature

My commission expires *01* *15* *16*
MO. DAY YR.

Andrew J. Weiss
Signature of Person Submitting Report

Andrew J. Weiss
Printed Name

610
Area Code

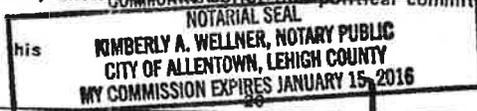
434-2637
Daytime Telephone Number

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 report, including the attached schedules, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete. (P.L. 1333, No. 320) as amended.

Sworn to and subscribed before me this

day of



Signature

Expires

MO. DAY YR.

Signature of Candidate

Printed Name

Area Code

Daytime Telephone Number

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <i>Friends of Jeff Glazier</i>	Reporting Period From <i>10/21/2013</i> To <i>11/25/2013</i>
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To Whom Paid <i>Papenfuse for Mayor</i>	MO. <i>10</i>	DAY <i>24</i>	YEAR <i>2013</i>	Amount \$ <i>50.00</i>
Mailing Address <i>1423 1/2 N. 3rd St.</i>				
Description of Expenditure <i>Contribution to Political Committee</i>				
City <i>Harrisburg</i>	State <i>PA</i>	Zip Code (Plus 4) <i>17102-</i>		

To Whom Paid <i>Friends of Mike Schlossberg</i>	MO. <i>10</i>	DAY <i>24</i>	YEAR <i>2013</i>	Amount \$ <i>300.00</i>
Mailing Address <i>944 N. 19th St.</i>				
Description of Expenditure <i>Contribution to Political Committee</i>				
City <i>Allentown</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18104-</i>		

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 \$ <i>350.00</i>
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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 <i>Jeff Colanton</i>						
STREET ADDRESS <i>2915 Parkway Blvd</i>						
CITY <i>Allentown</i>		STATE <i>PA</i>	ZIP CODE <i>1804-</i>			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION	
	<i>Allentown City Council</i>		<i>15</i>	<i>Dem</i>	MO. <i>11</i>	DAY <i>05</i> YEAR <i>13</i>
6TH TUESDAY PRE-PRIMARY	1.	DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY		
2ND FRIDAY PRE-PRIMARY	2.	MO. <i>10</i> DAY <i>21</i> YEAR <i>13</i>	TO	MO. <i>11</i> DAY <i>05</i> YEAR <i>13</i>		
30 DAY POST-PRIMARY	3.	CASH BALANCE AT END OF REPORTING PERIOD:		\$ <i>0</i>		
6TH TUESDAY PRE-ELECTION	4.	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ <i>0</i>		
2ND FRIDAY PRE-ELECTION	5.	AMENDMENT REPORT?		YES	NO	<input checked="" type="checkbox"/>
30 DAY POST-ELECTION	6.	TERMINATION REPORT?		YES	NO	<input checked="" type="checkbox"/>
ANNUAL REPORT	7.					

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 _____ DAY OF _____ 20____

 SIGNATURE

MY COMMISSION EXPIRES _____ MO. _____ DAY _____ YR.

 SIGNATURE OF PERSON SUBMITTING REPORT

Jeff Colanton
 PRINTED NAME

610 _____
 AREA CODE

657-8507
 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

Department of State • Bureau of Commissions, Elections and Legislation
 210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280