

(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: Friends of Joe Davis				
Street Address: 1035 N. Tacoma St.				
City: Allentown		State: Pa	Zip Code: 18109 - 1654	

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 <input type="checkbox"/> NO <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION ^{4.}	2ND FRIDAY PRE-ELECTION ^{5.}	30 DAY POST ELECTION ^{6.}	TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
	ANNUAL REPORT ^{7.} <input checked="" type="checkbox"/>	YEAR	FILING METHOD () CHECK ONE <input checked="" type="checkbox"/>	PAPER <input checked="" type="checkbox"/> DISKETTE <input type="checkbox"/>

Name of Office Sought by Candidate:	DATE OF ELECTION	District Number	Office Code	Party Code	County Code
	MO. DAY YEAR				
	05 19 2015				
(SEE INSTRUCTIONS FOR CODES)					

Summary of Receipts and Expenditures from:	MO. DAY YEAR	To	MO. DAY YEAR	FOR OFFICE USE ONLY
	12 31 2014		05 09 2015	
A. Amount Brought Forward From Last Report	\$ 3378.14			
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ 9150.00			
C. Total Funds Available (Sum of Lines A and B)	\$ 12,528.14			
D. Total Expenditures (From Schedule III)	\$ 4,610.00			
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 7,918.14			
F. Value of In-Kind Contributions Received (From Schedule II)	\$ -0-			
G. Unpaid Debts and Obligations (From Schedule IV)	\$ 100.00			

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.

Wendy J. Reppert, Notary Public
City of Bethlehem, Lehigh County
My Commission Expires June 1, 2016

Sworn to and subscribed before me this 4th day of May, 2015

Signature: [Signature]
MO. DAY YR. 06/01/2016

Signature of Person Submitting Report: Yolanda E. Davis
Printed Name: Yolanda E. Davis
Area Code: 610 Daytime Telephone Number: 434-1297

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 4th day of May, 2015

Signature: [Signature]
MO. DAY YR. 06/01/2016

Signature of Candidate: Joseph J. Davis
Printed Name: Joseph J. Davis
Area Code: 610 Daytime Telephone Number: 434-1297

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
Wendy J. Reppert, Notary Public
City of Bethlehem, Lehigh County
My Commission Expires June 1, 2016
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

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

Detailed Summary Page

Name of Filing Committee or Candidate Friends of Joe Davis	Reporting Period From 12-31-2014 To 05-01-2015
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$ 100.00

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ - 0 -
All Other Contributions (Part B)	\$ - 0 -
TOTAL for the Reporting Period	(2) \$ 0

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ 9,050.00
All Other Contributions (Part D)	\$ 0
TOTAL for the Reporting Period	(3) \$ 9,050.00

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
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>	\$ 9,150.00
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\$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 Friends of Joe Davis	Reporting Period From 12-31-2014 To 05-04-2015
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$

PAGE TOTAL

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

\$ 0.00

**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 Friends of Joe Davis	Reporting Period From <u>12-31-2014</u> To <u>05-04-2015</u>
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Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
Roofers Local #20 Political Action + Education Fund	02	12	2015	\$ 500.00
Mailing Address 6447 Torresdale Ave.	MO.	DAY	YEAR	\$
City Philadelphia, Pa	State Pa	Zip Code (Plus 4) 19135 -		\$
Bricklayers + Allied Craftsman Local #5 Pa. PAC	02	16	2015	\$ 1000.00
Mailing Address 2163 Berryhill St.	MO.	DAY	YEAR	\$
City Harrisburg	State Pa	Zip Code (Plus 4) 17104 -		\$
Carpenters PAC of Philadelphia + Vicinity	02	16	2015	\$ 1000.00
Mailing Address 1803 Spring Garden St.	MO.	DAY	YEAR	\$
City Philadelphia	State Pa	Zip Code (Plus 4) 19130 - 3916		\$
Int'l Union of Operating Engineers Local #542 PAF	02	17	2015	\$ 1000.00
Mailing Address 1375 Virginia Dr. Suite 100	MO.	DAY	YEAR	\$
City Fort Washington	State Pa	Zip Code (Plus 4) 19034 - 3257		\$
IBEW Local Union #375 Political Action Committee	02	20	2015	\$ 500.00
Mailing Address 1201 W. Liberty St.	MO.	DAY	YEAR	\$
City Allentown	State Pa	Zip Code (Plus 4) 18102 -		\$
Laborer's Local #1174 Political Action Committee	02	20	2015	\$ 500.00
Mailing Address 465 Allentown Dr.	MO.	DAY	YEAR	\$
City Allentown	State Pa	Zip Code (Plus 4) 18109 - 912		\$
Int'l Union of Painters + Allied Trades PAC	03	02	2015	\$ 300.00
Mailing Address 2980 Southampton Rd	MO.	DAY	YEAR	\$
City Philadelphia	State Pa	Zip Code (Plus 4) 19154 -		\$
Steamfitters Local Union #420 Pol. Ed. Fund	03	24	2015	\$ 2,000.00
Mailing Address 14420 Townsend Rd	MO.	DAY	YEAR	\$
City Philadelphia	State Pa	Zip Code (Plus 4) 19154 - 1028		\$

PAGE TOTAL
\$ 6,800.00

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate Friends of Joe Davis	Reporting Period From 12-31-2014 To 05-04-2015
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				

Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL

0

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate Friends of Joe Davis	Reporting Period From 12-31-2014 To 05-04-2015
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Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.	PAGE TOTAL \$ - 0-
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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 Friends of Joe Davis	Reporting Period From 12-31-2014 To 05-04-2015
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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

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)		
TOTAL for the Reporting Period	(2)	\$ 0

3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)		
TOTAL for the Reporting Period	(3)	\$ 0

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
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IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Friends of Joe Davis	Reporting Period From <u>12-31-2014</u> To <u>05-04-2015</u>
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				DATE			AMOUNT
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							

Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							

Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							

Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							

Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							

Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL

\$ 0

VALUE OVER \$250.00

Name of Filing Committee or Candidate Friends of Joe Davis	Reporting Period From 12-31-2014 To 05-04-2015
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				DATE			AMOUNT
Full Name of Contributor	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State	Zip Code (Plus 4)						
Employer of Contributor	Occupation						
Employer Mailing Address/Principal Place of Business	Description of Contribution						
Full Name of Contributor	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State	Zip Code (Plus 4)						
Employer of Contributor	Occupation						
Employer Mailing Address/Principal Place of Business	Description of Contribution						
Full Name of Contributor	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State	Zip Code (Plus 4)						
Employer of Contributor	Occupation						
Employer Mailing Address/Principal Place of Business	Description of Contribution						
Full Name of Contributor	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State	Zip Code (Plus 4)						
Employer of Contributor	Occupation						
Employer Mailing Address/Principal Place of Business	Description of Contribution						
Full Name of Contributor	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State	Zip Code (Plus 4)						
Employer of Contributor	Occupation						
Employer Mailing Address/Principal Place of Business	Description of Contribution						

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

PAGE TOTAL

\$ 0

Name of Filing Committee or Candidate Friends of Joe Davis	Reporting Period From 12-31-2014 To 05-04-2015
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To Whom Paid Paul Rosko Agency	MO. 01	DAY 23	YEAR 2015	Amount \$ 30.00
Mailing Address 1530 W. Broad St.	Description of Expenditure Notary fee for reports			
City Bethlehem	State Pa	Zip Code (Plus 4) 18018 -		

To Whom Paid Lehigh County	MO. 02	DAY 05	YEAR 2015	Amount \$ 40.00
Mailing Address	Description of Expenditure Filing reports			
City	State	Zip Code (Plus 4) -		

To Whom Paid Citizens for a Better Allentown	MO. 02	DAY 26	YEAR 2015	Amount \$ 1,500.00
Mailing Address	Description of Expenditure donation to committee			
City	State	Zip Code (Plus 4) -		

To Whom Paid Citizens for a Better Allentown	MO. 04	DAY 08	YEAR 2015	Amount \$ 2,000.00
Mailing Address	Description of Expenditure donation to committee			
City	State	Zip Code (Plus 4) -		

To Whom Paid Allentown Presidents Council	MO. 04	DAY 16	YEAR 2015	Amount \$ 40.00
Mailing Address	Description of Expenditure donation for dinner			
City	State	Zip Code (Plus 4) -		

To Whom Paid Friends of Jerry Palagonia	MO. 04	DAY 17	YEAR 2015	Amount \$ 500.00
Mailing Address	Description of Expenditure campaign donation			
City	State	Zip Code (Plus 4) -		

To Whom Paid Friends of Courtney Robinson	MO. 04	DAY 25	YEAR 2015	Amount \$ 300.00
Mailing Address	Description of Expenditure campaign donation			
City	State	Zip Code (Plus 4) -		

To Whom Paid Lehigh Valley Labor Council	MO. 04	DAY 25	YEAR 2015	Amount \$ 200.00
Mailing Address 3360 Airport Rd	Description of Expenditure Ad for awards dinner			
City Allentown	State Pa	Zip Code (Plus 4) 18109 -		

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

PAGE TOTAL
\$ 4,610.00

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 Joe Davis	Reporting Period From 12-30-2014 To 05-04-2015
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Name of Creditor Joseph Davis				Outstanding Balance of Debt \$ 100.00		
Mailing Address 1035 N. Tacoma St.	DATE DEBT INCURRED	MO.	DAY	YEAR		
City Allentown, Pa		State Pa	Zip Code (Plus 4) 18109 - 1654			
Description of Debt loan to open campaign committee account						

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 \$ 100.00
