

CAMPAIGN FINANCE REPORT

1 of 13
(COVER PAGE)

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number: ▶		Report Filed By: ▶		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.}		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 ▶		PAPER <input checked="" type="checkbox"/> DISKETTE <input type="checkbox"/>						
Name of Office Sought by Candidate: Allentown Council				DATE OF ELECTION		District Number		Office Code		Party Code		County Code	
				MO. DAY YEAR 11 5 2013									
Summary of Receipts and Expenditures from: ▶										FOR OFFICE USE ONLY			
				MO. DAY YEAR 01 01 2013		To		MO. DAY YEAR 12 31 2013					
A. Amount Brought Forward From Last Report				\$.00							
B. Total Monetary Contributions and Receipts (From Schedule I)				\$		9,300.00							
C. Total Funds Available (Sum of Lines A and B)				\$		9,300.00							
D. Total Expenditures (From Schedule III)				\$		3,751.86							
E. Ending Cash Balance (Subtract Line D from Line C)				\$		5,548.14							
F. Value of In-Kind Contributions Received (From Schedule II)				\$		-0-							
G. Unpaid Debts and Obligations (From Schedule IV)				\$		-0-							

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

28th day of January, 2014
 Signature: [Signature]
 Notarial Seal
 Signature: Wendy J. Reppert, Notary Public
 City of Bethlehem, Lehigh County
 My commission expires June 1, 2016
 MO. DAY YR. 01 01 2016

[Signature]
 Signature of Person Submitting Report
Serema L. Davis
 Printed Name
484 358 5884
 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

28th day of January, 2014
 Signature: [Signature]
 Notarial Seal
 Signature: Wendy J. Reppert, Notary Public
 City of Bethlehem, Lehigh County
 My commission expires June 1, 2016
 MO. DAY YR. 01 01 2016

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

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends of Joe Davis</i>	Reporting Period From <i>1-1-13</i> To <i>12-31-13</i>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ - 0 -

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)	\$ 300.00
TOTAL for the Reporting Period (2)	\$ 300.00

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ 8,500.00
All Other Contributions (Part D)	\$ 500.00
TOTAL for the Reporting Period (3)	\$ 9,000.00

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 (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	\$ 9,300.00
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CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate Friends of Joe Davis	Reporting Period From <u>1-1-13</u> To <u>12-31-13</u>
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Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$

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

PAGE TOTAL \$ - 0 -

ALL OTHER CONTRIBUTIONS

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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 1-1-13 To 12-31-13
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Joseph Davis	01	10	2013	\$ 100.00
Mailing Address 1035 N. Tacoma St.				\$
City Allentown	State Pa	Zip Code (Plus 4) 18109 - 1654		\$
IBEW Local # 375	03	12	2013	\$ 200.00
Mailing Address 1201 Liberty St.				\$
City Allentown	State Pa	Zip Code (Plus 4) 18104 -		\$
Full Name of Contributor				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Full Name of Contributor				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Full Name of Contributor				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Full Name of Contributor				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Full Name of Contributor				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Full Name of Contributor				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$

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

PAGE TOTAL
\$ 300.00

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 1-1-13 To 12-31-13
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Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
Bricklayers + Allied Craftsmen Local #5 PAC	2	1	13	\$ 2,500.00
Mailing Address 2163 Berryhill St.	MO.	DAY	YEAR	\$
City Harrisburg	State Pa	Zip Code (Plus 4) 17104 -		\$
Laborers Local #1174 PAC	2	21	13	\$ 500.00
Mailing Address 465 Allentown Drive	MO.	DAY	YEAR	\$
City Allentown	State Pa	Zip Code (Plus 4) 18109 -		\$
Steamfitters Local #420 PAC	2	18	13	\$ 1,000.00
Mailing Address 14420 Townsend Rd	MO.	DAY	YEAR	\$
City Philadelphia	State Pa	Zip Code (Plus 4) 19154 -		\$
Carpenters Local #600 PAC	2	19	13	\$ 500.00
Mailing Address 1803 Spring Garden St.	MO.	DAY	YEAR	\$
City Philadelphia	State Pa	Zip Code (Plus 4) 19130 -		\$
IUPAT District Council #21 PAC	2	25	13	\$ 500.00
Mailing Address 2980 Southampton Rd	MO.	DAY	YEAR	\$
City Philadelphia	State Pa	Zip Code (Plus 4) 19154 -		\$
Roofers Local #30 PAC	3	7	13	\$ 500.00
Mailing Address 6447 Torresdale Ave	MO.	DAY	YEAR	\$
City Philadelphia	State Pa	Zip Code (Plus 4) 91353 -		\$
Cement Masons Local #592 PAC	3	15	13	\$ 1,000.00
Mailing Address 2315 S. 22nd St	MO.	DAY	YEAR	\$
City Philadelphia	State Pa	Zip Code (Plus 4) 19145 -		\$
IU Operating Engineers #542 PAF	3	20	13	\$ 500.00
Mailing Address 1375 Virginia Drive Suite #100	MO.	DAY	YEAR	\$
City Philadelphia	State Pa	Zip Code (Plus 4) 19034 -		\$

PAGE TOTAL

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

\$ **7,000.00**

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>1-1-13</u> To <u>12-31-13</u>
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Full Name of Contributing Committee	DATE			AMOUNT
	MO	DAY	YEAR	
Mailing Address: Plumbers Local #690 PAF 2791 Southampton Rd City: Philadelphia State: Pa Zip Code (Plus 4): 19154 -	4	8	13	\$ 500.00
Full Name of Contributing Committee Sheet Metal Workers Local #19 PAC Mailing Address: 1301 South Columbus Blvd City: Philadelphia State: Pa Zip Code (Plus 4): 19147 -	4	2	13	\$ 500.00
Full Name of Contributing Committee Int. Assoc. of Heat & Frost Insulators & Allied Workers #23 Mailing Address: 3262 Schoolhouse Rd. City: Middletown State: Pa Zip Code (Plus 4): 17057 -	5	6	13	\$ 500.00
Full Name of Contributing Committee Mailing Address: City: State: Zip Code (Plus 4):				\$
Full Name of Contributing Committee Mailing Address: City: State: Zip Code (Plus 4):				\$
Full Name of Contributing Committee Mailing Address: City: State: Zip Code (Plus 4):				\$
Full Name of Contributing Committee Mailing Address: City: State: Zip Code (Plus 4):				\$
Full Name of Contributing Committee Mailing Address: City: State: Zip Code (Plus 4):				\$
Full Name of Contributing Committee Mailing Address: City: State: Zip Code (Plus 4):				\$
Full Name of Contributing Committee Mailing Address: City: State: Zip Code (Plus 4):				\$
Full Name of Contributing Committee Mailing Address: City: State: Zip Code (Plus 4):				\$
Full Name of Contributing Committee Mailing Address: City: State: Zip Code (Plus 4):				\$

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

PAGE TOTAL
\$ 1,500.00

ALL OTHER CONTRIBUTIONS

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 1-1-13 To 12-31-13
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Joseph + Maureen Topper	4	8	2013	\$ 500.00
Mailing Address 1762 Arden Lane	MO.	DAY	YEAR	\$
City Bethlehem	MO.	DAY	YEAR	\$
State Pa	Zip Code (Plus 4) 18015 - 5828			\$
Employer Name Lehigh Gas	Occupation President			
Employer Mailing Address/Principal Place of Business 1425 Mountain Dr. Bethlehem, Pa				

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	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	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	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				

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

PAGE TOTAL
\$ **500.00**

PART E
OTHER RECEIPTS

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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 1-1-13 To 12-31-13
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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 <u>1-1-13</u> To <u>12-31-13</u>
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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 <i>(Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)</i>	\$ -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 1-1-13 To 12-31-13
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Description of Contribution:				

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

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

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

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

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

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

PAGE TOTAL
\$ - 0 -

PART G
IN-KIND CONTRIBUTIONS RECEIVED
 VALUE OVER \$250.00

Name of Filing Committee or Candidate Friends of Joe Davis	Reporting Period From 1-1-13 To 12-31-13
--	---

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Employer of Contributor	Occupation			
Employer Mailing Address/Principal Place of Business	Description of Contribution			
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Employer of Contributor	Occupation			
Employer Mailing Address/Principal Place of Business	Description of Contribution			
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Employer of Contributor	Occupation			
Employer Mailing Address/Principal Place of Business	Description of Contribution			
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Employer of Contributor	Occupation			
Employer Mailing Address/Principal Place of Business	Description of Contribution			
Mailing Address				\$
City				\$
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
\$ 101

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Friends of Joe Davis	Reporting Period From 1-1-13 To 12-31-13
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To Whom Paid Friends of Jeff Glazier	MO. 3	DAY 7	YEAR 13	Amount \$ 300.00
Mailing Address 2915 Parkway Blvd		Description of Expenditure Donation		
City Allentown	State Pa	Zip Code (Plus 4) 18104 -		

To Whom Paid Paul Rosko Agency	MO. 3	DAY 7	YEAR 13	Amount \$ 25.00
Mailing Address 1530 W. Broad St.		Description of Expenditure Notary		
City Bethlehem	State Pa	Zip Code (Plus 4) 18018 -		

To Whom Paid Paul Rosko Agency	MO. 3	DAY 9	YEAR 13	Amount \$ 15.00
Mailing Address 1530 W. Broad St.		Description of Expenditure Notary		
City Bethlehem	State Pa	Zip Code (Plus 4) 18018 -		

To Whom Paid Staples	MO. 3	DAY 19	YEAR 13	Amount \$ 47.68
Mailing Address 2138 W. Union Blvd		Description of Expenditure Campaign Supplies		
City Bethlehem	State Pa	Zip Code (Plus 4) 18018 -		

To Whom Paid Committee to Re-elect Robert Halal	MO. 4	DAY 2	YEAR 13	Amount \$ 100.00
Mailing Address 3678 Crescent Court East Suite "A"		Description of Expenditure Donation		
City Whitehall	State Pa	Zip Code (Plus 4) 18052 -		

To Whom Paid Friends of Jim Edinger	MO. 4	DAY 26	YEAR 13	Amount \$ 200.00
Mailing Address 1112 Lehigh St.		Description of Expenditure Donation		
City Easton	State Pa	Zip Code (Plus 4) 18042 -		

To Whom Paid Lehigh Valley Labor Council	MO. 4	DAY 20	YEAR 13	Amount \$ 150.00
Mailing Address 3360 Airport Rd		Description of Expenditure Ad for banquet program		
City Allentown	State Pa	Zip Code (Plus 4) 18109 -		

To Whom Paid Fastsigns	MO. 5	DAY 3	YEAR 13	Amount \$ 569.22
Mailing Address 700 N. 13th St.		Description of Expenditure Campaign Signs		
City Allentown	State Pa	Zip Code (Plus 4) 18102 -		

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

PAGE TOTAL \$ 1406.90

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate		Reporting Period	
Friends of Joe Davis		From 1-1-13 To 12-31-13	

To Whom Paid	MO	DAY	YEAR	Amount
Adrienne Witt Mailing Address: 3410 Shelton Ave. City: Bethlehem State: Pa Zip Code: (Plus 4) 18020 -	5	5	13	\$ 139.96
Description of Expenditure: Reimbursement for campaign supplies				
Paul Roska Agency Mailing Address: 1530 W. Broad St. City: Bethlehem State: Pa Zip Code: (Plus 4) 18018 -	5	6	13	\$ 30.00
Description of Expenditure: Notary				
Lehigh County Dem. Committee Mailing Address: P.O. Box 33 City: Allentown State: Pa Zip Code: (Plus 4) 18105 -	5	10	13	\$ 225.00
Description of Expenditure: Donation				
Paul Roska Agency Mailing Address: 1530 W. Broad St. City: Bethlehem State: Pa Zip Code: (Plus 4) 18018 -	6	18	13	\$ 40.00
Description of Expenditure: Notary				
Daylin for Congress Mailing Address: P.O. Box 228 City: Jenkintown State: Pa Zip Code: (Plus 4) 19046 -	6	29	13	\$ 100.00
Description of Expenditure: Donation				
Friends of Ed Pawlowski Mailing Address: 43 N. 11th St. City: Allentown State: Pa Zip Code: (Plus 4) 18101 -	8	24	13	\$ 100.00
Description of Expenditure: Donation				
Lehigh Valley Labor Council Mailing Address: 3360 Airport Rd City: Allentown State: Pa Zip Code: (Plus 4) 18109 -	9	2	13	\$ 105.00
Description of Expenditure: Donation				
Friends of Ed Pawlowski Mailing Address: 43 N. 11th St. City: Allentown State: Pa Zip Code: (Plus 4) 18101 -	10	2	13	\$ 250.00
Description of Expenditure: donation				

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

PAGE TOTAL
\$ 989.96

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Friends of Joe Davis		Reporting Period From 1-1-13 To 12-31-13	
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To Whom Paid Friends of Julio Guridy		MO 2	DAY 28	YEAR 13	Amount \$ 70.00
Mailing Address P.O. Box 206		Description of Expenditure Donation to campaign			
City Allentown	State Pa	Zip Code (Plus 4) 18105 -			

To Whom Paid Friends of Pete Schweyer		MO 10	DAY 10	YEAR 13	Amount \$ 500.00
Mailing Address P.O. Box 4364		Description of Expenditure Donation to campaign			
City Allentown	State Pa	Zip Code (Plus 4) 18105 -			

To Whom Paid Paul Rosko Agency		MO 12	DAY 2	YEAR 13	Amount \$ 30.00
Mailing Address 1530 W. Broad St		Description of Expenditure Notary			
City Bethlehem	State Pa	Zip Code (Plus 4) 18018			

To Whom Paid Paul Rosko Agency		MO 10	DAY 21	YEAR 13	Amount \$ 30.00
Mailing Address 1530 W. Broad St.		Description of Expenditure			
City Bethlehem	State Pa	Zip Code (Plus 4) 18018 -			

To Whom Paid Pawlowski for Governor		MO 12	DAY 16	YEAR 13	Amount \$ 525.00
Mailing Address P.O. Box 58		Description of Expenditure			
City Allentown	State Pa	Zip Code (Plus 4) 18105 -			

To Whom Paid Lehigh Valley Bldg Trades		MO 3	DAY 27	YEAR 13	Amount \$ 200.00
Mailing Address 1201 W. Liberty St.		Description of Expenditure tickits to picnic			
City Allentown	State Pa	Zip Code (Plus 4) 18104 -			

To Whom Paid:		MO	DAY	YEAR	Amount
Mailing Address:					\$
City:		Zip Code (Plus 4)			

To Whom Paid:		MO	DAY	YEAR	Amount
Mailing Address:					\$
City:		Zip Code (Plus 4)			

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

PAGE TOTAL
\$ 1,355.00

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 Joe Davis	Reporting Period From 1-1-13 To 12-31-13
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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 \$ -0-
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