

Commonwealth of Pennsylvania
CAMPAIGN FINANCE REPORT

PAGE 1 OF 2
(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.} <input checked="" type="checkbox"/>		COMMITTEE ^{2.} <input type="checkbox"/>		LOBBYIST ^{3.} <input type="checkbox"/>	
Name of Filing Committee, Candidate or Lobbyist: <u>COURTNEY A. ROBINSON</u>											
Street Address: <u>1507 W TURNER ST</u>											
City: <u>ALLENTOWN</u>						State: <u>PA</u>		Zip Code: <u>18102 -</u>			
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	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 		PAPER		<input checked="" type="checkbox"/>	DISKETTE <input type="checkbox"/>	
Name of Office Sought by Candidate: <u>ALLENTOWN CITY COUNCIL</u>						DATE OF ELECTION		District Number	Office Code	Party Code	County Code
						MO. DAY YEAR <u>11 7 2017</u>			<u>OTH</u>	<u>DEM</u>	<u>39</u>
								(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from: 			MO. DAY YEAR <u>6 6 2017</u>			To			MO. DAY YEAR <u>10 23 2017</u>		
A. Amount Brought Forward From Last Report						\$ <u>0</u>					
B. Total Monetary Contributions and Receipts (From Schedule I)						\$ <u>0</u>					
C. Total Funds Available (Sum of Lines A and B)						\$ <u>0</u>					
D. Total Expenditures (From Schedule III)						\$ <u>69.95</u>					
E. Ending Cash Balance (Subtract Line D from Line C)						\$ <u>0</u>					
F. Value of In-Kind Contributions Received (From Schedule II)						\$ <u>0</u>					
G. Unpaid Debts and Obligations (From Schedule IV)						\$ <u>0</u>					
FOR OFFICE USE ONLY											
<div style="display: flex; justify-content: space-between;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">RECEIVED</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">ELECTION BOARD OF LEHIGH COUNTY</div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);">2017 OCT 27 PM 1:11</div> </div>											

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

27th day of October 2017

NOTARIAL SEAL
EILEEN AGUILERA

ALLENTOWN CITY, LEHIGH COUNTY

My commission expires 26 20

Signature

MO. DAY YR.

26 20

Courtney A. Robinson

Signature of Person Submitting Report

Courtney A. Robinson

Printed Name

484

Area Code

951-7066

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

_____ day of _____ 20____

Signature

Signature of Candidate

Printed Name

My commission expires

MO. DAY YR.

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

SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <div style="font-size: 1.2em; font-family: cursive;">COURTNEY A. ROBINSON</div>	Reporting Period From <div style="font-size: 1.2em; font-family: cursive;">6/6/17</div> To <div style="font-size: 1.2em; font-family: cursive;">10/23/17</div>
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To Whom Paid <div style="font-size: 1.2em; font-family: cursive;">STAPLES</div>			MO. <div style="font-size: 1.2em; font-family: cursive;">8</div>	DAY <div style="font-size: 1.2em; font-family: cursive;">20</div>	YEAR <div style="font-size: 1.2em; font-family: cursive;">17</div>	Amount <div style="font-size: 1.2em; font-family: cursive;">\$ 34.⁹⁷</div>
Mailing Address <div style="font-size: 1.2em; font-family: cursive;">2138 W. UNION BLVD</div>			Description of Expenditure <div style="font-size: 1.2em; font-family: cursive;">PRINTER INK</div>			
City <div style="font-size: 1.2em; font-family: cursive;">BETHLEHEM</div>	State <div style="font-size: 1.2em; font-family: cursive;">PA</div>	Zip Code (Plus 4) <div style="font-size: 1.2em; font-family: cursive;">18018 -</div>				
To Whom Paid <div style="font-size: 1.2em; font-family: cursive;">COSTCO WHOLESALE</div>			MO. <div style="font-size: 1.2em; font-family: cursive;">8</div>	DAY <div style="font-size: 1.2em; font-family: cursive;">27</div>	YEAR <div style="font-size: 1.2em; font-family: cursive;">17</div>	Amount <div style="font-size: 1.2em; font-family: cursive;">\$ 16.⁹⁷</div>
Mailing Address <div style="font-size: 1.2em; font-family: cursive;">791 N KROCKS RD.</div>			Description of Expenditure <div style="font-size: 1.2em; font-family: cursive;">OFFICE SUPPLIES</div>			
City <div style="font-size: 1.2em; font-family: cursive;">ALLENTOWN</div>	State <div style="font-size: 1.2em; font-family: cursive;">PA</div>	Zip Code (Plus 4) <div style="font-size: 1.2em; font-family: cursive;">18106 -</div>				
To Whom Paid <div style="font-size: 1.2em; font-family: cursive;">FINE WINE + GOOD SPIRITS 3914</div>			MO. <div style="font-size: 1.2em; font-family: cursive;">10</div>	DAY <div style="font-size: 1.2em; font-family: cursive;">20</div>	YEAR <div style="font-size: 1.2em; font-family: cursive;">17</div>	Amount <div style="font-size: 1.2em; font-family: cursive;">\$ 18.⁰⁹</div>
Mailing Address <div style="font-size: 1.2em; font-family: cursive;">1620 S 4th St</div>			Description of Expenditure <div style="font-size: 1.2em; font-family: cursive;">RAFFLE PRIZE</div>			
City <div style="font-size: 1.2em; font-family: cursive;">ALLENTOWN</div>	State <div style="font-size: 1.2em; font-family: cursive;">PA</div>	Zip Code (Plus 4) <div style="font-size: 1.2em; font-family: cursive;">18103 -</div>				
To Whom Paid			MO.	DAY	YEAR	Amount <div style="font-size: 1.2em; font-family: cursive;">\$</div>
Mailing Address			Description of Expenditure			
City	State	Zip Code (Plus 4)				
To Whom Paid			MO.	DAY	YEAR	Amount <div style="font-size: 1.2em; font-family: cursive;">\$</div>
Mailing Address			Description of Expenditure			
City	State	Zip Code (Plus 4)				
To Whom Paid			MO.	DAY	YEAR	Amount <div style="font-size: 1.2em; font-family: cursive;">\$</div>
Mailing Address			Description of Expenditure			
City	State	Zip Code (Plus 4)				
To Whom Paid			MO.	DAY	YEAR	Amount <div style="font-size: 1.2em; font-family: cursive;">\$</div>
Mailing Address			Description of Expenditure			
City	State	Zip Code (Plus 4)				
To Whom Paid			MO.	DAY	YEAR	Amount <div style="font-size: 1.2em; font-family: cursive;">\$</div>
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

\$ 69.⁹⁵