

Commonwealth of Pennsylvania  
**CAMPAIGN FINANCE REPORT**

PAGE 1 OF 3  
(COVER PAGE)

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

Filer Identification Number: <span style="float:right">▶</span>		Report Filed By: <span style="float:right">▶</span>		CANDIDATE <sup>1.</sup>		COMMITTEE <sup>2.</sup> <input checked="" type="checkbox"/>		LOBBYIST <sup>3.</sup>	
Name of Filing Committee, Candidate or Lobbyist: <u>Friends of Country Robinson</u>									
Street Address: <u>PO Box 9232</u>									
City: <u>Allentown</u>				State: <u>PA</u>		Zip Code: <u>18105 - 9232</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
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST ELECTION	6.	TERMINATION REPORT?	YES	NO
	ANNUAL REPORT	<input checked="" type="checkbox"/>	YEAR	<u>2018</u>		FILING METHOD <span style="float:right">▶</span>		PAPER <input checked="" type="checkbox"/>	DISKETTE
Name of Office Sought by Candidate: <u>Allentown City Council</u>					DATE OF ELECTION		District Number	Office Code	Party Code
					MO. DAY YEAR <u>11 5 19</u>			<u>0th</u>	<u>Dem</u>
									County Code <u>39</u>
							(SEE INSTRUCTIONS FOR CODES)		
Summary of Receipts and Expenditures from: <span style="float:right">▶</span>		MO. DAY YEAR		To		MO. DAY YEAR		FOR OFFICE USE ONLY	
		<u>1 1 2018</u>				<u>12 31 2018</u>		<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> RECEIVED 2019 JAN 31 AM 8:58 ELECTION BOARD OF LEHIGH COUNTY </div>	
A. Amount Brought Forward From Last Report		\$		<u>767.83-</u>					
B. Total Monetary Contributions and Receipts (From Schedule I)		\$		<u>0.00-</u>					
C. Total Funds Available (Sum of Lines A and B)		\$		<u>867.83</u>					
D. Total Expenditures (From Schedule III)		\$		<u>804.76</u>					
E. Ending Cash Balance (Subtract Line D from Line C)		\$		<u>63.07</u>					
F. Value of In-Kind Contributions Received (From Schedule II)		\$		<u>0.00-</u>					
G. Unpaid Debts and Obligations (From Schedule IV)		\$		<u>0.00-</u>					

**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

31st day of January 2019  
COMMONWEALTH OF PENNSYLVANIA  
NOTARIAL SEAL  
EILEEN AGUILERA  
Notary Public  
ALLENTOWN, LEHIGH COUNTY  
My Commission Expires Aug 26, 2020.  
Signature [Signature]  
DAY YR. 24 20

[Signature]  
Signature of Person Submitting Report  
Printed Name CHARMEN H. BELL  
Area Code 610 Daytime Telephone Number 390 9357

**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

31st day of January 2019  
COMMONWEALTH OF PENNSYLVANIA  
NOTARIAL SEAL  
EILEEN AGUILERA  
Notary Public  
ALLENTOWN, LEHIGH COUNTY  
My Commission Expires Aug 26, 2020.  
Signature [Signature]  
DAY YR. 24 20

Country G. Robinson  
Signature of Candidate  
Printed Name Country G. Robinson  
Area Code 484 Daytime Telephone Number 951-7066

## STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <u>Friends of Courtney Robinson</u>	Reporting Period From <u>1/1/2018</u> To <u>12/31/2018</u>
--	---

To Whom Paid <u>Stephanie Kocher</u>			MO. <u>1</u>	DAY <u>4</u>	YEAR <u>18</u>	Amount <u>\$ 144.40</u>
Mailing Address <u>1507 West Turner St</u>			Description of Expenditure <u>Reimbursement of expenses</u>			
City <u>Allentown</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18102 -</u>				
To Whom Paid <u>Old Allentown Preservation Association</u>			MO. <u>1</u>	DAY <u>4</u>	YEAR <u>18</u>	Amount <u>\$ 50.00</u>
Mailing Address <u>147 North 10th St</u>			Description of Expenditure <u>Event Sponsorship</u>			
City <u>Allentown</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18102 -</u>				
To Whom Paid <u>Jack's Slice</u>			MO. <u>1</u>	DAY <u>24</u>	YEAR <u>18</u>	Amount <u>\$ 250.00</u>
Mailing Address <u>3400 Tilghman St</u>			Description of Expenditure <u>Inaugural Event</u>			
City <u>Allentown</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18102 -</u>				
To Whom Paid <u>Postmaster</u>			MO. <u>1</u>	DAY <u>31</u>	YEAR <u>18</u>	Amount <u>\$ 76.00</u>
Mailing Address <u>442 Hamilton St</u>			Description of Expenditure <u>PO Box rental - 2018</u>			
City <u>Allentown</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18101 - 1611</u>				
To Whom Paid <u>Courtney A. Robinson</u>			MO. <u>2</u>	DAY <u>5</u>	YEAR <u>18</u>	Amount <u>\$ 144.36</u>
Mailing Address <u>1507 West Turner St</u>			Description of Expenditure <u>Reimbursement for website cost</u>			
City <u>Allentown</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18102 -</u>				
To Whom Paid <u>Lehigh Valley Labor Council</u>			MO. <u>4</u>	DAY <u>3</u>	YEAR <u>18</u>	Amount <u>\$ 40.00 -</u>
Mailing Address <u>PO Box 20226</u>			Description of Expenditure <u>Labor Day Picnic</u>			
City <u>Lehigh Valley</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18002 -</u>				
To Whom Paid <u>Daniella Sheekleford</u>			MO. <u>9</u>	DAY <u>21</u>	YEAR <u>18</u>	Amount <u>\$ 100.00</u>
Mailing Address <u>823 North 23rd St</u>			Description of Expenditure <u>Donation</u>			
City <u>Allentown</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18104 -</u>				
To Whom Paid			MO.	DAY	YEAR	Amount
Mailing Address						\$
City			Description of Expenditure			
	State	Zip Code (Plus 4)				

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

PAGE TOTAL

\$ 804.76

## PART E

# OTHER RECEIPTS

**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	Reporting Period
Friends of Courtney Robinson	From 1/1/2018 To 12/31/2018

Full Name <i>Lehigh Valley young Democrats</i>							
Mailing Address							
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount	
		-	12	31	2018	\$ 100.00 —	
Receipt Description <i>unasked Donation</i>							
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**

\$ 100.00/105