

# CAMPAIGN FINANCE REPORT

PAGE 1 OF 13  
(COVER PAGE)

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

<b>Filer Identification Number:</b>		<b>Report Filed By:</b>		<b>CANDIDATE</b> 1.		<b>COMMITTEE</b> 2. <input checked="" type="checkbox"/>		<b>LOBBYIST</b> 3.	
Name of Filing Committee, Candidate or Lobbyist: <b>Friends of Jeff Glazier</b>									
Street Address: <b>2915 Parkway Boulevard</b>									
City: <b>Allentown</b>					State: <b>PA</b>		Zip Code: <b>18104</b>		
<b>TYPE OF REPORT</b>  (place X to the right of report type)	<b>6TH TUESDAY PRE-PRIMARY</b>	1.	<b>2ND FRIDAY PRE-PRIMARY</b>	2. <input checked="" type="checkbox"/>	<b>30 DAY POST PRIMARY</b>	3.	<b>AMENDMENT REPORT?</b>	YES	NO
	<b>6TH TUESDAY PRE-ELECTION</b>	4.	<b>2ND FRIDAY PRE-ELECTION</b>	5.	<b>30 DAY POST ELECTION</b>	6.	<b>TERMINATION REPORT?</b>	YES	NO
	<b>ANNUAL REPORT</b>	7.	<b>YEAR</b>		<b>FILING METHOD</b> ( ) CHECK ONE		<b>PAPER</b>	<input checked="" type="checkbox"/>	<b>DISKETTE</b>
Name of Office Sought by Candidate: <b>Allentown City Controller</b>					<b>DATE OF ELECTION</b>		<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>
					MO. DAY YEAR <b>05 21 2019</b>			<b>OTH</b>	<b>DEM</b>
								<b>39</b>	
							(SEE INSTRUCTIONS FOR CODES)		
<b>Summary of Receipts and Expenditures from:</b>		MO. DAY YEAR <b>01 01 2019</b>		To MO. DAY YEAR <b>05 06 2019</b>		<b>FOR OFFICE USE ONLY</b>			
A. Amount Brought Forward From Last Report		\$		<b>2725.45</b>					
B. Total Monetary Contributions and Receipts (From Schedule I)		\$		<b>5160.00</b>					
C. Total Funds Available (Sum of Lines A and B)		\$		<b>7885.45</b>					
D. Total Expenditures (From Schedule III)		\$		<b>1050.95</b>					
E. Ending Cash Balance (Subtract Line D from Line C)		\$		<b>6834.50</b>					
F. Value of In-Kind Contributions Received (From Schedule II)		\$		<b>-0-</b>					
G. Unpaid Debts and Obligations (From Schedule IV)		\$		<b>-0-</b>					

<b>AFFIDAVIT SECTION</b>	
<b>PART I - If this is a Committee report, sign here.</b>	<b>If this is a Candidate report, candidate sign here.</b>
I swear (or affirm) that this report, including 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 <u>6th</u> day of <u>May</u> 20 <u>19</u>	
Signature of Person Submitting Report: <u>Andrew J. Weiss</u>	
Printed Name: <u>Andrew J. Weiss</u>	
Area Code: <u>610</u> Daytime Telephone Number: <u>434-2637</u>	
My commission expires <u>09 11 2019</u>	

<b>PART II - If this is a report of a Candidate's Authorized Committee, candidate shall sign here.</b>
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 (Act 320) as amended.
Sworn to and subscribed before me this <u>13th</u> day of <u>May</u> 20 <u>19</u>
Signature of Candidate: <u>Jeff Glazier</u>
Printed Name: <u>Jeff Glazier</u>
Area Code: <u>610</u> Daytime Telephone Number: <u>657-887</u>
My commission expires <u>Nov. 13/2022</u>

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

**CONTRIBUTIONS AND RECEIPTS****Detailed Summary Page**

Name of Filing Committee or Candidate

Friends of Jeff Glazier

Reporting Period

From 01/01/2019 To 05/06/2019

**1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR**

TOTAL for the Reporting Period

(1)

\$ 510.00

**2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)**

Contributions Received from Political Committees (Part A)

\$ 450.00

All Other Contributions (Part B)

\$ 2850.00

TOTAL for the Reporting Period

(2)

\$ 3300.00

**3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)**

Contributions Received from Political Committees (Part C)

\$ -0-

All Other Contributions (Part D)

\$ 1350.00

TOTAL for the Reporting Period

(3)

\$ 1350.00

**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.)

\$ 5160.00

## PART A

## 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 <u>Friends of Jeff Glazier</u>	Reporting Period From <u>01/01/2019</u> To <u>05/06/2019</u>
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				DATE			AMOUNT
Full Name of Contributing Committee	MO.	DAY	YEAR				
<u>Friends of Peter Schwyer</u>	<u>01</u>	<u>31</u>	<u>2019</u>				\$ <u>100.00</u>
Mailing Address <u>Box 4364</u>	MO.	DAY	YEAR				\$
City <u>Allentown</u>	MO.	DAY	YEAR				\$
State <u>PA</u>	Zip Code (Plus 4) <u>18105</u>						\$
<u>IAFF 302</u>	<u>01</u>	<u>31</u>	<u>2019</u>				\$ <u>100.00</u>
Mailing Address <u>732 W. Chew St. Suite 302</u>	MO.	DAY	YEAR				\$
City <u>Allentown</u>	MO.	DAY	YEAR				\$
State <u>PA</u>	Zip Code (Plus 4) <u>18102</u>						\$
<u>Friends of Mike Schlossberg</u>	<u>01</u>	<u>31</u>	<u>2019</u>				\$ <u>250.00</u>
Mailing Address <u>944 N. 19th St.</u>	MO.	DAY	YEAR				\$
City <u>Allentown</u>	MO.	DAY	YEAR				\$
State <u>PA</u>	Zip Code (Plus 4) <u>18104</u>						\$
Full Name of Contributing Committee	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State	Zip Code (Plus 4)						\$
Full Name of Contributing Committee	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State	Zip Code (Plus 4)						\$
Full Name of Contributing Committee	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State	Zip Code (Plus 4)						\$
Full Name of Contributing Committee	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State	Zip Code (Plus 4)						\$
Full Name of Contributing Committee	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State	Zip Code (Plus 4)						\$
Full Name of Contributing Committee	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	MO.	DAY	YEAR				\$
State	Zip Code (Plus 4)						\$

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

PAGE TOTAL

\$ 450.00



## ALL OTHER CONTRIBUTIONS

\$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		Reporting Period	
Friends of Jeff Glazier		From 01/01/2019 To 05/06/2019	

  

Full Name of Contributor	Mailing Address	City	State	Zip Code (Plus 4)	DATE			AMOUNT
					MO.	DAY	YEAR	
James and Terri Bartholomew	317 N. Broad St.	Allentown	PA	18104 -	01	31	2019	\$ 100.00
								\$
								\$
David and Patricia Hoffman	806 N. 30th St.	Allentown	PA	18104 -	01	31	2019	\$ 100.00
								\$
								\$
Todd Larmer	2720 W. Livingston St.	Allentown	PA	18104 -	01	31	2019	\$ 100.00
								\$
								\$
Joseph and Bonnie McMahon	834 N. 26th St.	Allentown	PA	18104 -	01	31	2019	\$ 100.00
								\$
								\$
Aland and Mary Selinger	1018 N. Broad St.	Allentown	PA	18104 -	01	31	2019	\$ 100.00
								\$
								\$
Jeff Wenck	3929 Kilmer Ave	Allentown	PA	18104 -	01	31	2019	\$ 100.00
								\$
								\$
Lee Butz	840 W. Hamilton St. Suite 210	Allentown	PA	18101 -	01	31	2019	\$ 250.00
								\$
								\$
Greg Butz	1636 Berkwood Drive	Orefield	PA	18069 -	01	31	2019	\$ 250.00
								\$
								\$

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

PAGE TOTAL

\$ 1100.00

## ALL OTHER CONTRIBUTIONS

\$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				Reporting Period			
Friends of Jeff Glazier				From 01/01/2019 To 05/06/2019			
				DATE			AMOUNT
Full Name of Contributor	Kevin and Mary Ellen Hansen			MO.	DAY	YEAR	\$ 250.00
Mailing Address	7601 Blue Church Rd. South			MO.	DAY	YEAR	\$
City	Coopersburg	State	PA	Zip Code (Plus 4)	18036 -		\$
Full Name of Contributor	Gavin and Nancy Holihan			MO.	DAY	YEAR	\$ 250.00
Mailing Address	3039 W. Livingston St.			MO.	DAY	YEAR	\$
City	Allentown	State	PA	Zip Code (Plus 4)	18104 -		\$
Full Name of Contributor	Henry and Suzanne Lyons			MO.	DAY	YEAR	\$ 250.00
Mailing Address	2829 W. Chew St.			MO.	DAY	YEAR	\$
City	Allentown	State	PA	Zip Code (Plus 4)	18104 -		\$
Full Name of Contributor	Charles and Ruth Maroon			MO.	DAY	YEAR	\$ 250.00
Mailing Address	316 N. 27th St.			MO.	DAY	YEAR	\$
City	Allentown	State	PA	Zip Code (Plus 4)	18104 -		\$
Full Name of Contributor	Danny and Sandra O'Neill			MO.	DAY	YEAR	\$ 250.00
Mailing Address	2904 W. Chew St.			MO.	DAY	YEAR	\$
City	Allentown	State	PA	Zip Code (Plus 4)	18104 -		\$
Full Name of Contributor	Ran and Megan Skinner			MO.	DAY	YEAR	\$ 250.00
Mailing Address	2929 W. Livingston St.			MO.	DAY	YEAR	\$
City	Allentown	State	PA	Zip Code (Plus 4)	18104 -		\$
Full Name of Contributor	Carol Watters			MO.	DAY	YEAR	\$ 250.00
Mailing Address	205 N. Broad St.			MO.	DAY	YEAR	\$
City	Allentown	State	PA	Zip Code (Plus 4)	18104 -		\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State		Zip Code (Plus 4)	-		\$
Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.							PAGE TOTAL
							\$ 1750.00

# 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

Reporting Period

Friends of Jeff Glazier

From 01/01/2019 To 05/06/2019

			DATE			AMOUNT
Full Name of Contributing Committee	MO.	DAY	YEAR			
Mailing Address	MO.	DAY	YEAR	\$		
City	MO.	DAY	YEAR	\$		
State	MO.	DAY	YEAR	\$		
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Full Name of Contributing Committee	MO.	DAY	YEAR	\$		
Mailing Address	MO.	DAY	YEAR	\$		
City	MO.	DAY	YEAR	\$		
State	MO.	DAY	YEAR	\$		
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Full Name of Contributing Committee	MO.	DAY	YEAR	\$		
Mailing Address	MO.	DAY	YEAR	\$		
City	MO.	DAY	YEAR	\$		
State	MO.	DAY	YEAR	\$		
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Full Name of Contributing Committee	MO.	DAY	YEAR	\$		
Mailing Address	MO.	DAY	YEAR	\$		
City	MO.	DAY	YEAR	\$		
State	MO.	DAY	YEAR	\$		
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Full Name of Contributing Committee	MO.	DAY	YEAR	\$		
Mailing Address	MO.	DAY	YEAR	\$		
City	MO.	DAY	YEAR	\$		
State	MO.	DAY	YEAR	\$		
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Full Name of Contributing Committee	MO.	DAY	YEAR	\$		
Mailing Address	MO.	DAY	YEAR	\$		
City	MO.	DAY	YEAR	\$		
State	MO.	DAY	YEAR	\$		
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Full Name of Contributing Committee	MO.	DAY	YEAR	\$		
Mailing Address	MO.	DAY	YEAR	\$		
City	MO.	DAY	YEAR	\$		
State	MO.	DAY	YEAR	\$		
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Full Name of Contributing Committee	MO.	DAY	YEAR	\$		
Mailing Address	MO.	DAY	YEAR	\$		
City	MO.	DAY	YEAR	\$		
State	MO.	DAY	YEAR	\$		
Zip Code (Plus 4)	MO.	DAY	YEAR	\$		

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

PAGE TOTAL

\$ 0



# ALL OTHER CONTRIBUTIONS

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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 <b>Friends of Jeff Glazier</b>	Reporting Period From <b>01/01/2019</b> To <b>05/06/2019</b>
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				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributor <b>Leonard and Rhoda Glazier</b>				<b>01</b>	<b>31</b>	<b>2019</b>	\$ <b>350.00</b>
Mailing Address <b>3216 W. Cedar St.</b>				MO.	DAY	YEAR	\$
City <b>Allentown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18104 -</b>		MO.	DAY	YEAR	\$
Employer Name <b>retired</b>				Occupation			
Employer Mailing Address/Principal Place of Business							

Full Name of Contributor <b>Robert and Kristen Bennett</b>				<b>01</b>	<b>31</b>	<b>2019</b>	\$ <b>500.00</b>
Mailing Address <b>2000 Nottingham Road</b>				MO.	DAY	YEAR	\$
City <b>Allentown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18103 -</b>		MO.	DAY	YEAR	\$
Employer Name <b>Bennett Toyota</b>				Occupation <b>owner</b>			
Employer Mailing Address/Principal Place of Business <b>1951 Lehigh St. Allentown PA 18103</b>							

Full Name of Contributor <b>King Spry Herman Freund &amp; Faul</b>				<b>01</b>	<b>31</b>	<b>2019</b>	\$ <b>500.00</b>
Mailing Address <b>1 W. Broad St. #700</b>				MO.	DAY	YEAR	\$
City <b>Bethlehem</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18018 -</b>		MO.	DAY	YEAR	\$
Employer Name <b>King Spry Herman Freund &amp; Faul</b>				Occupation <b>lawyer</b>			
Employer Mailing Address/Principal Place of Business <b>1 W. Broad St. #700, Bethlehem, PA 18018</b>							

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

Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
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  
\$ **1350.00**

**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 <i>Friends of Jeff Glazier</i>	Reporting Period From <i>01/01/2019</i> To <i>05/06/2019</i>
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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-*



**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 <u>Friends of Jeff Glazer</u>	Reporting Period From <u>01/01/2019</u> To <u>05/06/2019</u>
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<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>	
TOTAL for the Reporting Period (1)	\$ <u>- 0 -</u>

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

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

<b>TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD</b> (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)	\$ <u>- 0 -</u>
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**SCHEDULE II  
PART F**

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**IN-KIND CONTRIBUTIONS RECEIVED**

**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate <u>Friends of Jeff Glazier</u>	Reporting Period From <u>01/01/2019</u> To <u>05/06/2019</u>
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				DATE			AMOUNT
				MO.	DAY	YEAR	\$
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
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.**

<b>PAGE TOTAL</b> \$ <u>-0-</u>
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SCHEDULE II  
PART G  
**IN-KIND CONTRIBUTIONS RECEIVED**  
VALUE OVER \$250.00

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Name of Filing Committee or Candidate <u>Friends of Jeff Glazier</u>	Reporting Period From <u>01/01/2019</u> To <u>05/06/2019</u>
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				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor							\$
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  
\$ 0



## STATEMENT OF EXPENDITURES

12 - 13

Name of Filing Committee or Candidate <i>Friends of Jeff Glazier</i>	Reporting Period From <i>01/01/2019</i> To <i>05/06/2019</i>
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To Whom Paid <i>LV Print Center</i>	MO. <i>01</i>	DAY <i>08</i>	YEAR <i>2019</i>	Amount \$ <i>65.19</i>
Mailing Address <i>1701 Union Blvd</i>				
City <i>Allentown</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18109-</i>		
Description of Expenditure <i>invitations to fundraiser</i>				
To Whom Paid <i>Advantage PEP, LLC</i>	MO. <i>02</i>	DAY <i>13</i>	YEAR <i>2019</i>	Amount \$ <i>418.75</i>
Mailing Address <i>2285 Schoenersville Road</i>				
City <i>Bethlehem</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18017-</i>		
Description of Expenditure <i>Campaign management and postage</i>				
To Whom Paid <i>Jeff Glazier</i>	MO. <i>02</i>	DAY <i>07</i>	YEAR <i>2019</i>	Amount \$ <i>427.01</i>
Mailing Address <i>2915 Parkway Boulevard</i>				
City <i>Allentown</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18101-</i>		
Description of Expenditure <i>reimbursement for fundraiser expenses</i>				
To Whom Paid <i>Presidents Council, Inc.</i>	MO. <i>04</i>	DAY <i>02</i>	YEAR <i>2019</i>	Amount \$ <i>65.00</i>
Mailing Address <i>942 E. Tilghman Street</i>				
City <i>Allentown</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18109-1955</i>		
Description of Expenditure <i>Allentown Crime Watch dinner and ad</i>				
To Whom Paid <i>Allentown Public Library</i>	MO.	DAY	YEAR	Amount \$ <i>75.00</i>
Mailing Address <i>1210 W. Hamilton St.</i>				
City <i>Allentown</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18102-</i>		
Description of Expenditure <i>Contribution to Allentown Public Library gala</i>				
To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address				
City	State	Zip Code (Plus 4)		
Description of Expenditure				
To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address				
City	State	Zip Code (Plus 4)		
Description of Expenditure				
To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address				
City	State	Zip Code (Plus 4)		
Description of Expenditure				

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

PAGE TOTAL

\$ *1050.95*

# SCHEDULE IV 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 <u>Friends of Jeff Glazier</u>	Reporting Period From <u>01/01/2019</u> To <u>05/06/2019</u>
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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