Commonwealth of Pennsylvania - Campaign Finance Report (Note: This report must be clear and legible, It should be typed)

		(NOCC. 11	-	_	NAME OF TAXABLE PARTY.				aid be typed	Delica de la Carta		Labbadet	
Filer Identification Number		Report Filed By (Mark X)		sy C	Candidate			Committee		\times	Lobbyist		
Name of Filing Committee, Candidate or Lobbyist			Friends of Ed Pawlowski										
Street Address	43 N. 11th Street												
City Allentown				Sta			PA		Zip Code	Zip Code 18101			
Type of Report (Place x under report type)													
1-6 th Tuesday			4- 6th Tuesday 5- 2nd Friday				6- 30 D	6- 30 Day Post 7- Annual Special 2 nd Friday Special 30				0 Day	
1- 6" Tuesday Pre-Primary	2- 2" Friday Pre-Primary			Election	Pre- El		Election		Pre-Elec		and the second s		
									\square				
Date Of Election			Year				Amend	ment		Terminati	ion		1
(MM/DD/YYYY) N/A					201	8	Report			Report			
Summary of Receipts and Expenditures From Date 1/1/2018			To Date 12/31/2018						For	Office Use (Only		
A. Amount Brought Forward From Last Repor				\$	0								
B. Total Monetary Contributions and Receipts				\$ 0									
(From Schedule I) C. Total Funds Available				\$			1						
(Sum of Lines A and B)				0									
D. Total Expenditures				\$ 0									
(From Schedule III)				0									
E. Ending Cash Balance (Subtract Line D from Line C)				\$ 0									
F. Value of In-Ki	ons Received	-	\$	_									
(From Schedule II)					0								
G. Unpaid Debt	1	\$ 77,190											
(From Schedule IV)													
Part 1- If this is a C	ommittee rene	t. treasurer sign h	ere If	this is a Car		davit Se		gn here					
I swear (or affirm)	that this report.	including the atta	ched s	chedules o	n paper, is	to the	best of m	y knowled	ige and belief to	rue, correct a	nd comple	te.	
Sworn to and subs							1	1			-		
26 day of	Janua	2 21					- Xu	Sa	Kowt	OWI	- Per		
MAR	Signature of Person Submitting report												
Lisa Pawlowski for Ed Pawlowski (Unavailable for signatur Signature Printed Name													
My Commission expires 12 4 202				Z			610 349-1046						
MO. DAY YR.							Area Code	Area Code Daytime Telephone Number					
Part II. If this is a -	eport of a Candi	date's Authorized	Come	nittee cann	lidate she	l sign h	ere.						
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 ofSignature of Candidate													
Signature				eror Process			Printed Name						
My Commission expires													
iviy commission e	MO. DAY YR.				Area Code Daytime Telephone Number					r			

Commonwealth of Pennsylvania - Notary Seal Monserrate L. Cohen, Notary Public Lehigh County

My commission expires December 4, 2022 Commission number 1343749

Member, Pennsylvania Association of Notaries

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 and Address of the Owner, where the Owner, which is the Owner, which is the Owner, where the Owner, which is the Owner,	OR OTHER DESIGNATION		
Filer Identification Num	ber:						
Land of the State State							
Name of Creditor	64119 4 41	Ed Pawlov	<i>y</i> ski				Outstanding Balance of Debt
House#	Stre	et Address	43 N. 11th Street			E DEBT INCURRED MIM/DD/YYYY]	\$
						1/20/2016	
City		Allentown		State	PA	Zip Code 18101	35,000
Description of Debt	10.25	Legal bills	paid, to WBD, as loan to the	FOEP comm	ittee	學學學學學	[2-4
Name of Creditor	131	Ed Pawlov	vski				Outstanding Balance of Debt
House #	Stre	et Address	43 N. 11th Street		PORTE VIPUREDINA	E DEBT INCURRED MIM/DD/YYYY]	•
City		I		State	1/1/	2017 - 12/31/2017 Zip	0.000
		Allentown		granes to the	PA	Code 18101	2,600
Description of Debt		Legal bills	paid, to WBD, as loan to the	FOEP comm	ittee		
Name of Creditor	dige-pages	Ed Pawlov	vski				Outstanding Balance of Debt
House #	Stre	eet Address			DATE DEBT INCURRED [MM/DD/YYYY]		\$
ne of other		and the second	43 N. 11th Street		1/1/2018 - 12/31/2018		
City		Allentown		State	PA	Zip Code 18101	925
Description of Debt		Legal bills	paid, to WBD, as loan to the	FOEP comm	ittee		
Name of Creditor	7.50 /gaj						Outstanding Balance of Debt
House #	Stre	et Address				E DEBT INCURRED	\$
	in for a					MM/DD/YYYY]	
City				State		.Zip	
Description of Debt				1.2 - 1.4		Code	
	11 /						
Name of Creditor							Outstanding Balance of Debt :
House #	Stre	et Address				EDEBT INCURRED	
1.4					Processor of the	MM/DD/YYYY]	
City				, Statie‡1	- 100	Zip Code	
Description of Debt	, ¥					. Ave. 1994 of the State of the	
Name of Ereditor, 1		WBD (For	merly WSCR)				Outstanding Balance of Debister
House M	1-14/2	et Address	PO Box 601879			E DEBT INCURRED MIM/DD/YYYYI)	Service Annual Control of the Contro
City 198	4.4	1 (1) (1		State		2016-2017	38,665
City: Description of Debt	1	Charlotte		131	NC	Code 28260	00,000