CAMPAIGN FINANCE REPORT

(COVER PAGE)

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

This report must be clear as	James a document	nay be typed of printed	III bide of black link.
Filer Identification Number:	Report Filed By:	GANDIDATE	COMMITTEE 2. LOBBYIST 3.
Name of Filing-Committee, Candidate or Lobbylist:	1100	anell	
Street Address:	1 1	nnell	
City: 2446 W- Allan S	street	Tour Tour	
Allentown	20020	State: PA	Zip 9088/04 -
TYPE OF STATUSPAY 1. 2ND FRIE	T. S. S. C.	30 DAY POST PRIMARY	AMENDWENT YES NO.
AEPORT STHUTUESDAY 4. 2ND FRIE	MARAGINETON P	30 DAY	ZERMINATION STATE
(place X to the right of ANNUAL 7. YEAR	TION	POST ELECTION	AEPORT?
report type) REPORT		FILING METHOD () CHECK ONE	PAPER DISKETTE
Name of Office Sought by Candidate:		DATE OF ELECTIO	N District Office Party County Number Code Pode Code
Allentown Mayor		MO. DAY YEAR	OIH DEW 39
	F-76.	5 7 2021	(SEE INSTRUCTIONS FOR CODES)
Summary of Receipts MO DAY	YEAR	MO. DAY YEAR	FOR OFFICE USE ONLY
and Expenditures from: 5 4 2	02 To	6 7 2021	
A. Amount Brought Forward From Last Report	\$.	8387.40	CONTRACT SECURITY SEC
B. Total Monetary Contributions and Receipts (From Sch	hedule I) \$	28,740 00	
C. Total Funds Available (Sum of Lines A and B)	\$	37,127,40	T 83 2 5 1
D. Total Expenditures (From Schedule III)	\$	34 276.34	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	2.851.06	70 %
F. Value of In-Kind Contributions Received (From Sche	dule II) \$	0	
G. Unpaid Debts and Obligations (From Schedule IV)	5		
	AFFIDAVIT S	ECTION	
PART I - If this is a Committee report, treasurer sign		The second secon	
I swear (or affirm) that this report, including the attached sched correct and complete.	dules, on paper	or computer diskette, are to	the best of my knowledge and belief true,
Sworn to and subscribed before me this		611.1.	1 (DM
day of June	0 21	1/While	10/1hm
- Chumshi Compone	yealth of Pomey	ivania - Notary Seal 127	of Petson Submitting Report
Signature	ILL M. GOETA NO	otary Public	Printed Name
My commission expires 03 08 2412 MO. DAY MACO	Lehigh Cor minission Expire	S AUGUSTALE A COOLE	Paytime Telephone Number
	ommission Nemi		
PART I will this is a report of a Candidate's Authoriz			
I swear (or affirm) that to the best of my knowledge and belief (P.L. 1333; No. 320) as amended.	uns pointical c	committee has not violated	any provisions of the Act of June 3, 1937
Sworn to and subscribed before me this		PA	0000
day of June 20	21 ennsylvania - No	Cary Seal a Sign	nature of Candidate
JILL M. GOET	TZ, Notary Public		10 P. O (onn+)
My commission expires (V - (V - My Commission E)			Printed Name
MO. LDAY Commission	Number 10 19798	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 I

PAGE 2 OF ____

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Detailed Summary rage	
Name of Filing-Committee or Candidate Reporting P Reporting P From 2	- bi 12 - 2100014 - i
1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CON	FOR TOP
1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50,00 OR LESS PER CONTRIBUTIONS AN	
TOTAL for the Reporting Feriod	
2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	 \$
All Other Contributions (Part B)	\$ 1250.00
TOTAL for the Reporting Period (2	\$ 1250.00
3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ 15,500.00
All Other Contributions (Part D)	\$ 11,990.00
TOTAL for the Reporting Period (3	\$ 27,49000
4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ET	C. (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.)	\$ 28,740.00

PAGEOF	
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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	SAMUEL OF			Reporting	Period	and the second s
222			- 1	From _		То
	100			DATE		AMOUNT
Full Name of Contributing Committee			- MO	HEST AY	YEAR	ST
Mailing Address		00-	L. Mo	DAY	VEAR	\$
	- Marine 1 - 10		7,54	C. C		\$
City	State	Zip Code (Plus 4)	MO.	V DAY	YEAR	
Full Name of Contributing Committee				l Abay	MANDADI.	\$ @
			33.23.43.632.4		a cas interest in 1959	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	Mo	DAY	VEAR	
			,			\$
Full Name of Contributing Committee			. Mo.	DAY	YEAR	
Mailing Address.			MO	DAY	VEAD	\$
Cia						\$
City	State	Zip Code (Plus 4)	MO	DAY	YEAR!	\$
Full Name of Contributing Committee			MO	DAY	VEAD	The state of the s
Mailing Address			- WO	DATE	TEME	\$
mening Address			мо	DAY	YEAR	\$
City	itate	Zip Code (Plus 4)	/ Mo	DAY	VEAR	•
		_				\$
Full Name of Contributing Committee			∴ мо	DÁY	YEAR	\$
Mailing Address			Mo	DAY	VEAD	Ψ
City						\$
S	tate	Zip Code (Plus 4)	· Mo.	DAY	YEAR	\$
Full Name of Contributing Committee			Mo.	DAY	YEAR	
Mailing Address						\$
			MON	DAY	YEAR	\$
City	tate	Zip Code (Plus 4)	MO.	DAY	YEAR	
F50 AC \$7 # 35	-				V In Street, and	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			∴Mo. &	DAY	YEAR	
City	ate	Zim Dada (Div. 4)				\$
31	aire	Zip Code (Plus. 4)	MO.	DAY	YEAR	\$
ull Name of Contributing Committee			- Mox	D/AYA	YEAR	
Mailing Address				DAY		\$
			TAMOS SE	UAY	O YEAR	\$
St	ate	Zip Code (Plus 4)	× Mo.	DAY	YEAR	
						\$
Enter Grand Total of Part A on Schedul	e I,	Detailed Summary	/ Page.	Section	2	PAGE TOTAL
FR 700 (7 00)				, yet me Pi	- 1	\$

PAGE	OF	

PART B **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 Filling Committee or Candidate	Reporting Period	1. //-/-
Friends of Ray O Connell	From 0/9/	21: To 6 17/21
	DATE	AMOUNT
Full trains of contributor Spedu	MO. DAY YEAR	\$ 200.00
Mai Mng, Address	MO. DAY YEAR	\$
City Of Onches State Zip Code (Plus 4)	MO. DAY YEAR	
Mentour & FA 19104		\$
Full syme of contributor, when beene	S P ZY	\$ 200 0
Marling Address They Street	Mo. DAY YEAR	\$
Allen town State 12 in Code (Plus 4)	MO DAY YEAR	\$
Full Name of Contributor	MO. DAY YEAR	\$ 100.00
Maining Address Reimert	S 4 4 MO. DAY YEAR	\$
City // State / Fin Code (Plus 4)	MO DAY YEAR	*39
City Allentum FA 1862	C	\$
Full Name of Contributor, Den Wochter	MO DAY YEAR	\$ 250,00
Waiting Address Lord Road	MO. YEAR	\$
City State Pip Gode (Pius 4)	MO. DAY YEAR	\$
Full Name of Contributor Breoks	MO. DAY: YEAR	\$ 25,00
Meiling Address Limekeln Road	DAY YEARS	\$
City Sin Code (Plus 4)	MO. DAY YEAR	
		\$
Full Name of Contributor 1806	4 29 21	\$ 250.00
Mailing Address Cunter Dury Road	MODAYYEAR	\$
City Zip Code (Plus 4)	MO. A MAY YEAR	\$
Full Name of Contributor	MONTH HOAY OF YEAR	
Mailing Address	MO. DAY - YEAR	\$
		\$
City State Zip Code (Plus 4)	MO. DAY YEAR	\$
Full Name of Contributor	MO. DAY YEAR	\$
Mailing Address	MO, DAY YEAR	\$
City State Zip Code (Plus 4)	MO. DAY YEAR	d*
		PAGE TOTAL
Enter Grand Total of Part B on Schedule I, Detailed Summary	V Page, Section 2	\$ 1250.60
Enter Draid Total Of Part D on Schedule I, Detailed Summar	y rage, dection 2.	- 1,000.00

P/	١	GE		OF	

PART C

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 Fung-Committee or Candidate	1)	Convert .		Reporting From	SIGF/.	21	To 6/7/21
				DATE	4 7		AMOUNT
Full Name jof Contributing Committee Alle	ento	u/	MO.	DAY:	XYEAR:	\$	500.00
Mailing Address W London Sh	20/		MQ.	DAY		\$	
City Allestano	1994	7ip Code (Plus 4)	MO	DAY	YEAR	\$	
Full Name of Contributing Committee	1	1/11	DAMOS	DAY	WYEAR	\$	15
Mailing Address Och	eve	ot folice	Mo.	C DAY	Z/ YEAR		15,000.00
City 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	State	Zip Code (Plus 4)	MO	DAY	VPAR	\$	
Mexhanis Dorg	A	17055				\$	
Full Name of Contributing Committee				DAY		*	
Mailing Address	1000		MO	.∵	YEAR	\$	
City	State	Zip Code (Plus 4)	∴MO:	DAY	YEAR	\$	
Full Name of Contributing Committee			oMe	DAY	NYEAR)		
Mailing Address			∴ Mo.	DAY	YEAR	\$	
City	State	Zip Code (Plus 4)		DAY		\$	
		_				\$	
Full Name of Contributing Committee			MO.	DAY	YEAR	\$	
Mailing Address			MO.	DAY	YEAR	\$	
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
Full Name of Contributing Committee			≥ Mo.	DAY	YEAR	-	
Mailing Address		3.00	MO:	DAY	ÝEAR	\$	
City	State	Zip Code (Plus 4)		DAY		\$	
						\$	
Full Name of Contributing Committee			: MO.	DAY	YEAR	\$	
Mailing Address			# MO.	DAY	YEAR	\$	
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
Full Name of Contributing Committee			S MOSS	- DAY	XXXXXXXXX		
Mailing Address			Moss	DAY	YEAR	\$	
City	State	Zip Code (Plus 4)				\$	
N 1815 (1835)			- THU	DAY	YEAR	\$	
Enfor Grand Total of Dark Company		Painting A					TOTAL CO MO
Enter Grand Total of Part C on Sched	uie i,	Detailed Summary	Page,	Section	3.	\$ /	15,560,00

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ALL OTHER CONTRIBUTIONS

PAGE	O	F	

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 Eandidate Wiends of King OCom	Reporting Period To 6/1/21
	DATE AMOUNT
Mailing Agaress Nood Road Tourney Mailing Agaress Nood Road	MO. DAY YEAR \$ WOO GO
City Aller Acron PA 18105 Employer Name	4) MO. DAY YEAR \$
Employer Mailing Address/Principal Place of Business	
Full Name of Contributor SIVIS OVZMann Mailing Address	MO. DAY YEAR \$ 9,990.00
City Allerthum Sia Zip Code (Plus	
Employer Name Employer Mailing Address/Principal Place of Business	Occupation
Full Name of Contributor Cu Twell Mailing Address	MO. DAY YEAR \$ 1,000.00
SUS face Street	\$
Employer Name Mig Miles Miles	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	\$
Employer Name	Decupation
Employer Mailing Address/Principal Place of Business	
Full Name of Contributor	MO. YEAR \$
Mailing Address	MO: DAY YEAR \$
City State Zip Code (Plus	\$
Employer Name	Occupation
Employer Mailing Address/Principal Place of Business	
Enter Grand Total of Part D on Schedule I, Detailed Sum	mary Page, Section 3. PAGE TOTAL 990 60

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PAGE	OF	

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.

			Reporting	Period	
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		the same page, the respecting a	d - Englishmen visit .	agent us tagen	es estate a ser la bretanta es
Is. I		- Burtisan	sel Angelenna es v	15.44.22.3	
State	Zip Gode (Plus 4)	MO.	DAY	YEAR	\$
			1		Vanish and below to the Santa of the sant
	The Market Age of Color 1988.	. (A-186 BY (A-16)	eng. ce.	dretter i Sir 💉 🦠	The same of the sa
State	Zip Code (Plus 4)	MO.	∜DAY	YEAR	Amount \$
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	The state of the s	एक विकास स्टब्स्ट विकास स्टब्स्ट स्टब्स्ट स्टब्स्ट स्टब्स्ट स्टब्स्ट स्टब्स्ट स्टब्स्ट स्टब्स्ट स्टब्स्ट स्टब्स	ig i Babasarasi	r startion Fig.	West of Market
State	Zip Code (Plus 4)	- Mo.	, DAY	YEAR.	Amount
	1000 P		<u> </u>		\$
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State	Zip Code (Plus 4)			Total Table	Amount
	need.			CAR	\$
		•			
		The second second second	a sees desiring a	PERMIT	
State	Zip Code (Plus 4)	::MOL:	DAY	YEAR	
			L1		\$
		es pro-constant day of			
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		V.E. 24 (400)	PARK A	YEAR	Amoun
State	Zip Code (Plus 4)	ARCC SS	Same Charles	S. E. D. WALLEY	
State	Zip Code (Plus 4) -		200		\$
State		. ARCS			\$
State.					
	State	State Zip Code (Plus 4) State Zip Code (Plus 4) State Zip Code (Plus 4)	State Zip Code (Plus 4) Mo	State Zip Code (Plus 4) OAA	State Zip Code (Plus 4)

SCHEDULE II

PAGE	OF .
1 7400	Oi,

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	Reporting Per	riod	1
	From	То	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF S	\$50.00 OR L	ESS PER CONTRIBUTO	R
TOTAL for the Reporting Perio	d (1)	\$	
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$2	50.00 (FRON	A PART F)	
TOTAL for the Reporting Period	d (2)	\$	
		ugamenta, turis kabo o y ila estifacio	
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FRO	OM PART G)	
TOTAL for the Reporting Period	d (3)	\$	
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)	Fig. Pages Access Acces	\$	

PAGE	OF	:

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Rep	orting	Period	Z. S. C. O. St. J. St. St. Marrier 1974 - Scientification 1
	F	rom	780 79	То
1770 日 15 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		DATE		AMOUNT
	MO.	DAY	YEAR	\$
Meiling Address	MO	DAY	YEAR	\$
City State Zip Code (Plus 4)	Mo	DAY	XEAR?	L .
Description of Contribution:				3
Full Name of Contributor	MO.	DAY	YEAR	\$
Måiling Address	мо	DAY	YEAR	2
City State Zip Code (Plus 4)	MO.	DAV	-VeXe	\$
		DANCE	· · · · · · · · · · · · · · · · · · ·	\$
Description of Contribution:				•
Full Name of Contributor	MO:	DAY	YEAR	I PA
Mailing Address				\$
	MO:	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Description of Contribution:			-	7
Full Name of Contributor		Displacement	5 No. 10 No. 20 No. 4 Table 20 No.	
	MO.	DAY	YEAR	\$
Mailing Address	Mo.	DAY	YEAR	\$
City State Zip Code (Plus 4)	мо.	DAY :	YEAR	
Description of Contribution:				\$
Full Name of Contributor	мо.	DAY	YEAR	\$
Mailing Address	MO: Ex	SAY.	YEAR	
City State Zip Code (Plus 4)	мож	YA V	VEAD	\$
Description of Contribution:		20.00	indexed the a	\$
best iption of Contribution:				
Full Name of Contributor	NO. (AY	YEAR	
Mailing Address	/10833 C. E	(A.V	Veable	\$
		/OSE (SEP 25)	LEAD OF	\$
City State Zip Code (Plus 4)	/O	AY	YEARA	\$
Description of Contribution:				
				:
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Summary Page, Section 2.	Detail	led		PAGE TOTAL
A CONTRACTOR OF THE PROPERTY O			L	\$

PAG	E	OF	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period			
				From	То		
		and worth, and transferred in the second second second second		DAT		AMOUNT	
Full Name of Contributor			₩ MO.		YEAR A	\$	
						**	
Mailing Address			MO.	DAY	YEAR	\$	
Сіту	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
Employer of Contributor			Occupa	tion			
Employer of Containated							
Employer Mailing Address/Principal Place of Business			Descri	ction of C	ontribution		
		7 70 80 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MOc		YEAR		
Full Name of Contributor			MUc	UAX		\$	
Mailing Address			MO.	DAY	YEAR	S	
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	_	
						-\$	
Employer of Contributor			Occupa	ition			
Employer Mailing Address/Principal Place of Business			Descri	otion of C	ontribution		
	21			THE PARTY OF THE P			
Full Name of Contributor			MO.	DAY	RABY	\$	
Malling Address			MOS	DAY	YEAR		
						\$	
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
Employer of Contributor			Occupa	tion			
		D		a managan Nagan di			
Employer Mailing Address/Principal Place of Business		Descri	ition of C	ontribution			
Full Name of Contributor			MO.	DAY	YEAR		
						\$	
Mailing Address			MO.	DAY	YEAR	\$	
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
		, mee		****		- P	
Employer of Contributor			Occupa	ition			
Employer Mailing Address/Principal Place of Business			Descri	otion of C	ontribution		
	g serve acre						
Full Name of Contributor			MO.	DAY	YEAR	\$	
Mailing Address			MO.	DAY	YEAR	\$	
City	State	Zip Code (Plus 4)	· MO:	O DAV	YEAR	.*	
	Stote	Tib once it in all		- Mari	the Cash.	\$	
Employer of Contributor		Occupa	tion				
Employer Mailing Address/Principal Place of Business		Descri	otion of C	ontribution			
enthroset medund vetaressecuricibet close of positiess							
	7 7 7	and the same of th				PAGE TOTAL	
Enter Grand Total of Part G on School Summary Page, Section 3.	dule II	, In-Kind Contribu	utions !	Detaile	d	\$	
Jummary rage, Dection 3.							

DSEB-502 (7-99)

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Transfs of Rey C	Connell	Reporting Period From 5/4/	21 TO 6721
To Whom Paid		MO. DAY YEAR	Amount \$
Mailing Address		Description of Expenditure	
Gity	tate Zip Code (Plus 4)		
To Whom Paid		MO DAY YEAR	Amount
			\$
Mailing Address		Description of Expenditure	
City IN	(a.) May	# 3,000	$ \downarrow$ _
# 16075/11/217 TSE LL # 16175/11/217 fanor	((AL) III	9797 11 700	
5/11/217 fanor	avola la social	,	
# 161 / RON O	Connell	# 1,000.	66
# 1627 5/14/217 Ray O	pinser)		
	Maria a d	45,000	106
HI63/3/10/21 Navigati	on (Paymont	#2) #5,00	0.06
# 16475/15/217 Lehigh Navigati # 16475/17/21 TSE (Expense) for	. Election lo	4 45,00	-
# 165 7 5 124 217 Lchi	gh Mining	7 43,00	
Maria		11,890	2.75
# 1667 TSE LLC # 1677 Letrigh LV Pi # 16875128/21 Ray # 16976/2/21 Now T	(<i>FC</i>)	# 11,18	3,59
#1677 temos LV 1	and countly	4 1,00	10.00
# 16875/20/21 (EXP	enses)	(41) \$15	00.80
#16976/2/21 New T	orro News fo	bla (na)	7
· 200		MOZ ZEDAY NE YEAR	Amount
Mailing Address		Description of Expenditure	\$
City	Kodo. 1972-1984 - Pinding Al	100 mg 25 mg	
S S	tate Zip Code (Plus 4)		
Enter Grand Total of Expenditures on Page	1. Report Cover Pa	age, Item D.	* 34 276.34

		₩-