CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report only if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

| | | ON BEHALF OF | CANDIDATE | rX | COMMITTEE 2. | LOSE | MST 3 |
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| NAME OF FILING COMMITTEE | CANDIDATE OR LOBBYIST | | 100 CO 10 | | ASTRONOMY. | | 12/1/10 |
| Peter Schw | eyer ——————————————————————————————————— | | | | | | |
| 1529 Catal | ina Avenue | | | | | | |
| Allentown | | STATE PA | | ZIP COD | 18103 | | |
| TYPE OF REPORT (CHECK ONE) | NAME OF OFFICE SOUGHT BY CANDIDATE Allentown Council | DISTRICT NO. | PARTY | 8 | MO. | DF ELEC | YEAR |
| BTH TUESDAY PRE-PRIMARY | | | | | 1072 122 232 | CE USE O | 2012 NLY |
| 2nd FRIDAY PRE-PRIMARY | DATES OF REPORTING 1 1 12 TO | 12 31 12 | | | | | - Was all |
| 30 DAY POST-PRIMARY | CASH BALANCE AT END | c N/A | | | | | |
| OTH TUESDAY 4. PRE-ELECTION | OF REPORTING PERIOD: TOTAL AMOUNT OF FILER'S | \$ | | | | | |
| 2nd FRIDAY PRE-ELECTION | OUTSTANDING DEBTS OR LIABILITY AT THE END OF REPORTING PERIO | N/A | | | | | |
| 30 pay POST-ELECTION | AMENDMENT YES | ио х | | | | | |
| ANNUAL X | TERMINATION | | | 1 | | | |
| REPORT | REPORT? YES | NO X | | | | | |
| REPORT | REPORT? YES | AVIT SECTION | | | * 111 | | |
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Department of State

Bureau of Commissions, Elections and Legislation

North Office Building

Harrisburg, PA 17120-0029

(717) 787-5280

INSTRUCTIONS FOR FILING THE CAMPAIGN FINANCE STATEMENT

- 1. You may file this statement in lieu of a full report when the amount of contributions (including in-kind contributions) received, the amount of money expended and the liabilities incurred each did not exceed \$250.00 during the reporting period.
- 2. File this statement in the office where the nomination petitions, nomination certificate or nomination papers of the candidate(s) supported were filed.
- 3. A candidate must file a statement or report that is separate from one filed by her/his authorized committee.
- 4. Each statement shall be subscribed and swom to by the candidate (if it is the candidate's personal report) or the treasurer of the political committee, acknowledging the accuracy of the report. In addition, those reports filed on behalf of a candidate's political committee, authorized by a candidate and created solely for the purpose of influencing an election on behalf of that candidate, shall be subscribed and sworn to by that candidate.
- 5. Reports must be filed according to the following schedule. For specific dates, consult the Election Calendar.

First report deadline:

Cycle 1

Sixth Tuesday Pre-Primary. Reporting period closes 50 days prior to the election.

(Required only by statewide candidates on the ballot and political committees supporting

statewide candidates.)

Second report deadline:

Cycle 2

Second Friday Pre-Primary. Reporting period closes 15 days prior to the election. (Required by all candidates on the ballot and committees supporting such candidates.)

Third report deadline:

Cycle 3

30 days Post-Primary. Reporting period closes 20 days after the election.

(Required by all candidates on the ballot and committees supporting such candidates.)

Fourth report deadline:

Cycle 4

6th Tuesday Pre-Election. Reporting period closes 50 days prior to the election.

(Required only by statewide candidates on the ballot and political committees supporting

statewide candidates.)

Fifth report deadline:

Cycle 5

2nd Friday Pre-Election. Reporting period closes 15 days prior to the election.

(Required by all candidates on the ballot and committees supporting such candidates.)

Sixth report deadline:

Cycle 6

30 days Post-Election. Reporting period closes 20 days after the election.

(Required by all candidates on the ballot and committees supporting such candidates.)

Annual report deadline:

Cycle 7

January 31st of the following year. Statement must be complete as of December 31.

- 6. Political committees that are required to file pre-election reports are also required to file at all subsequent reporting deadlines for that election.
- 7. Retain copies of all records for a period of 3 years. Although no detailed campaign expense report is filed, you are required to keep a record of the names and addresses of each person from whom a contribution of over \$10.00 has been received and a record of all other information required to be reported pursuant to the Campaign Expense Reporting Law.

LATE FILING PENALTY

A penalty of \$10.00 for each day or part of the day (excluding Saturdays, Sundays and holidays) that the statement is overdue, plus an additional fee of \$10.00 for each of the first six days that a statement is overdue, will be assessed.

In addition, any candidate or treasurer of a political committee, or person acting as such treasurer, who shall fail to file an account of primary or election expenses, as required by the Law, shall be guilty of a misdemeanor and, upon conviction thereof, shall be sentenced to pay a fine not exceeding \$5,000 (five thousand dollars) or to undergo an imprisonment of not less than one (1) month nor more than two (2) years, or both, in the discretion of the court.

Further penalties are provided by law.

Postmarks are acceptable as proof of timely filing where report is sent by first class mail and postmarked by the United States Postal Service, no later than the day prior to the filing deadline.

。 【中国的第三人称形式,我们是有关的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的,我们就是一个人的人的人的人的人的人

PAGE 1 OF ____15 CAMPAIGN FINANCE REPORT (COVER PAGE)

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

| Name of Office Sought by Cendidate: Allentown Council Summary of Receipts and Expenditures from: A Amount Brought Forward From Last Report B. Total Monetary Contributions and Receipts (From Schedule II) Total Expenditures (From Schedule III) Total Expenditures (From Schedule III) Total Expenditures (From Schedule III) Total Expenditures (Subtract Line D from Line C) F. Value of In-Kind Contributions Received (From Schedule II) A per of the per of the per or computer diskate, age to the best of my knowledge and ballef tructures of the per or computer diskate, age to the best of my knowledge and ballef tructures of the per or computer diskate, age to the best of my knowledge and ballef tructures of the per or computer diskate, age to the best of my knowledge and ballef tructures of the per or computer diskate, age to the best of my knowledge and ballef tructures of the per or computer diskate, age to the best of my knowledge and ballef tructures of the per or computer diskate, age to the best of my knowledge and ballef tructures of the per or computer diskate, age to the best of my knowledge and ballef tructures of the per or computer diskate, age to the best of my knowledge and ballef tructures of the per or computer diskate, age to the best of my knowledge and ballef tructures of the per or computer diskate, age to the best of my knowledge and ballef tructures of the per or computer diskate, age to the best of my knowledge and ballef tructures of the per or computer diskate, age to the best of my knowledge and ballef tructures of the per or computer diskate, age to the best of my knowledge and ballef tructures or the per or computer diskate, age to the best of my knowledge and ballef tructures or the per or computer diskate, age to the best of my knowledge and ballef tructures or the per or computer diskate, age to the best of my knowledge and ballef tructures or the per | |
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| Street Address: PO Box 4364 City: Allentown TYPE OF REPORT TYPE OF | |
| TYPE OF REPORT STATEMARY 1. 240. FILE AT STATEMARY 2. 50. FILE STATEMARY 3. ARCHIDARY STATEMARY 3. ARCHIDARY STATEMARY 3. ARCHIDARY STATEMARY 3. ARCHIDARY STATEMARY STATEMARY 3. ARCHIDARY STATEMARY STATEMAR | _ |
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| iplace X to the right of report type) Name of Office Sought by Candidate: Allentown Council DAY NEAR 1 1 2012 To A Amount Brought Forward From Last Report B. Total Monetary Contributions and Receipts (From Schedule II) D. Total Expenditures (From Schedule III) E. Ending Cash Balance (Subtract Line D from Line C) F. Value of In-Kind Contributions Received (From Schedule III) A AFIDAVIT SECTION PAPER X DISKETTE Value of In-Kind Contributions Received (From Schedule III) A AFIDAVIT SECTION PAPER X DISKETTE Value of In-Kind Contributions and Receipts (From Schedule III) A AFIDAVIT SECTION PAPER X DISKETTE Value of In-Kind Contributions For Code Cod | |
| The right of report type REFORT Name of Office Sought by Cendidate: Allentown Council DATE OF ELECTION MG. DAY VEAR 11 6 2012 DISTRICT Code Code Code Code Code Code Code Code | |
| Allentown Council 11 6 2012 Summary of Receipts and Expenditures from: 1 1 2012 To 12 31 2012 A Amount Brought Forward From Last Report B. Total Monetary Contributions and Receipts (From Schedule II) \$ N/A C. Total Funds Available (Sum of Lines A and B) \$ 16,370.56 D. Total Expenditures (From Schedule III) \$ 8,684.87 E. Ending Cash Balance (Subtract Line D from Line C) \$ 7,685.69 F. Value of In-Kind Contributions Received (From Schedule II) \$ N/A C. Total Debts and Obligations (From Schedule IV) \$ N/A SFIDAVIT SECTION AFFIDAVIT SECTION I swear for 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. | |
| Allentown Council Mo. DAY YEAR 11 6 2012 (SEE INSTRUCTIONS FOR CO FOR OFFICE USE ONLY) Summary of Receipts and Expenditures from: | |
| Summary of Receipts and Expenditures from: A. Amount Brought Forward From Last Report B. Total Monetary Contributions and Receipts (From Schedule II) C. Total Funds Available (Sum of Lines A and B) D. Total Expenditures (From Schedule III) E. Ending Cash Balance (Subtract Line D from Line C) F. Value of In-Kind Contributions Received (From Schedule III) G. Unpaid Debts and Obligations (From Schedule IV) AFFIDAVIT SECTION AFFIDAVIT SECTIO | |
| Summary of Receipts and Expenditures from: 1 1 2012 To 2 31 2012 A Amount Brought Forward From Last Report B. Total Monetary Contributions and Receipts (From Schedule II) \$ N/A C. Total Funds Available (Sum of Lines A and B) \$ 16,370.56 D. Total Expenditures (From Schedule III) \$ 8,684.87 E. Ending Cash Balance (Subtract Line D from Line C) \$ 7,685.69 F. Value of In-Kind Contributions Received (From Schedule II) \$ N/A G. Unpaid Debts and Obligations (From Schedule IV) \$ N/A AFFIDAVIT SECTION AFFIDAVIT SECTION 1 sweer for 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. | - |
| B. Total Monetary Contributions and Receipts (From Schedule I) C. Total Funds Available (Sum of Lines A and B) D. Total Expenditures (From Schedule III) \$ 8,684.87 E. Ending Cash Balance (Subtract Line D from Line C) \$ 7,685.69 F. Value of In-Kind Contributions Received (From Schedule II) \$ N/A G. Unpaid Debts and Obligations (From Schedule IV) **AFFIDAVIT SECTION AFFIDAVIT SECTION AFFIDAVIT SECTION Sweet for 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. | |
| C. Total Funds Available (Sum of Lines A and B) \$ 16,370.56 D. Total Expenditures (From Schedule III) \$ 8,684.87 E. Ending Cash Balance (Subtract Line D from Line C) \$ 7,685.69 F. Value of In-Kind Contributions Received (From Schedule II) \$ N/A G. Unpaid Debts and Obligations (From Schedule IV) AFFIDAVIT SECTION AFFIDAVIT SE | - 1 |
| D. Total Expenditures (From Schedule III) \$ 8,684.87 E. Ending Cash Balance (Subtract Line D from Line C) \$ 7,685.69 F. Value of In-Kind Contributions Received (From Schedule II) \$ N/A G. Unpaid Debts and Obligations (From Schedule IV) \$ N/A AFFIDAVIT SECTION AFFIDAVIT SECTION AFFIDAVIT SECTION 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. | |
| E. Ending Cash Balance (Subtract Line D from Line C) \$ 7,685.69 F. Value of In-Kind Contributions Received (From Schedule II) \$ N/A G. Unpaid Debts and Obligations (From Schedule IV) \$ N/A AFFIDAVIT SECTION AFFIDAVIT SECTION Silve 1 (this is 2 Candidate report condicate 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. | |
| F. Value of In-Kind Contributions Received (From Schedule II) \$ N/A G. Unpaid Debts and Obligations (From Schedule IV) \$ N/A AFFIDAVIT SECTION AFFIDAVIT SECTION I swear for 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. | |
| G. Unpaid Debts and Obligations (From Schedule IV) AFFIDAVIT SECTION AFFIDAVIT SECTION I sweer for 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. | |
| AFFIDAVIT SECTION Which is a condition of conditions and the standard schedules, on paper or computer diskette, are to the best of my knowledge and belief true correct and complete. | |
| Minds of committee could be reading the attached schedules, on paper or computer diskette, are to the best of my knowledge and belief true correct and complete. | |
| 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. | ALC: N |
| current and comprete. | Je. |
| | |
| 30 day of DONUGA COMMONWEALTH OF PENNSYL ANIA | |
| NOTARIAL SEAL Signature of Person Submitting Report AMANDA SCHREY, Notary Public Fimothy P. Brennan | = /. |
| Signature City of Allentown, Lehigh County My Commission Expires March 13, 1013 Printed Name 841-4020 | = 1 |
| My commission expires MO. DAY YR. Area Code Daytima Telephone Number | = |
| PARTELL - II Dus is a report of a Chinaragus Authorized Committee, capilidate shall sign here | PESSON |
| 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 line 3, 1977 | 7 |
| (P.L. 1333, No. 320) as amended. Sworn to and subscribed before me this | |
| 30 day of | |
| MON de CIMENTE COMMONWEALTH OF PENNSYLVANIA PETER G. Schweyer | |
| Signature AMANDA SCHREY, Notary Public Printed Name | - |
| My commission expires Manca City of Allentown, Lehigh County 510 434-7243 Mo. My Commission Expires March 13, 2013 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

N/A

SCHEDULE I

CONTRIBUTIONS AND RECEIPTS

| Detailed Summary Page | | | | |
|-----------------------------------------------------------------|-----------------------|----------------------|-----------------------------------------|------------------------------|
| Name of Filing Committee or Candidate Friends of Peter Schweyer | Reporting Per From | i od L/201 | L2 то_ | 12/31/2012 |
| | | | | |
| 1 UNITEMIZEO CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS | PER CONT | RIBUT | IOR | |
| TOTAL for the Reporting Period | d (1) | \$ | N/A | |
| | ÅL DESIGNATION OF | | | |
| 2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART | B) | | | |
| Contributions Received from Political Committees (Part A) | | \$ | N/A | |
| All Other Contributions (Part B) | | \$ | N/A | |
| TOTAL for the Reporting Period | d (2) | \$ | N/A | |
| | | | | |
| 3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D) | | 1 | | |
| Contributions Received from Political Committees (Part C) | | \$ | N/A | |
| All Other Contributions (Part D) | | \$ | N/A | |
| TOTAL for the Reporting Period | d (3) | \$ | N/A | |
| | | Disastive news | | Value of the contract of the |
| 4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED C | HECKS, ETC | : (FRC | 200000000000000000000000000000000000000 | T E) |
| TOTAL for the Reporting Period | d (4) | \$ | N/A | |
| 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 8.)

| PAGE | 3 | OF | 15 |
|------|---|----|----|
| | | | |

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.

| Friend of Peter Schweyer | Reporting Period From 1/1/20 | 12 то 12/31/2012 |
|----------------------------------------------------------|------------------------------|------------------|
| | DATE | AMOUNT |
| Full Name of Contributing Committee | MON DEDAYM NYEAR | \$ |
| Mailing Address | MO DAY YEAR | |
| City State Zip Code (Plus 4) | MQ DAY YEAR | \$ |
| Full Name of Contributing Committee | SAMORE REDAYER SAVEAR | |
| Mailing Address | MG. DAY YEAR | \$ |
| City State Zip Code (Plus 4) | BMO. DAY YEAR | \$ |
| 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 | MO, DAY YEAR | \$ |
| City State Zip Code (Plus 4) | MO. DAY YEAR | \$ |
| Full Name of Contributing Committee | MO. DAY YEAR | \$ |
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| City State Zip Code (Plus 4) | MO. DAY YEAR | \$ |
| Full Name of Contributing Committee | SECTIONS SECTIONS SECTIONS | \$ |
| Mailing Address | MO. YEAR | \$ |
| City State Zip Code (Plus 4) | MO. DAY YEAR | \$ |
| Enter Grand Total of Part A on Schedule I, Detailed Summ | eary Page, Section 2. | PAGE TOTAL \$ |

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 | 9 % |
|---------------------------------------|---------|--------------------------|-------------|---------------------|----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Friends of Peter Schweyer | | | | From 1 | /1/20 | 12 To 12/31/2012 |
| | | | | DATE | | AMOUNT |
| Full Name of Contributor | | | MO. | DAY | YEAR | |
| Malling Address | | | MO. | DAY | YEAR | s |
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| | | | | | | \$ |
| Full Name of Contributor | | | MO. | DAY | YEAR | \$ |
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| | | | ESEMU. | DAY | TEAR | \$ |
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| | | | MOS | DAY | YEAR | \$ |
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| Enter Grand Total of Part B on Sched | ule I, | Detailed Summary | Page | , Section | 2. | PAGE TOTAL \$ |
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| AGE | 5 | OF_ | 15 | |
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| | | | | |

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.

| | | | | Reporting | | |
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| Friends of Peter Schweyer | | | From. | 1/1/20 | 12 To 12/31/2012 | |
| | | | | DATE | | AMOUNT |
| Full Name of Contributing Committee | 6 | | MO) | DAY | YEAR | \$ |
| Mailing Address | | | MO | DAY | YEAR | |
| City | State | Zip Code (Plus 4) | 100000 | | | \$ |
| | Otote | | SIMO. | DAY | YEAR | \$ |
| Full Name of Contributing Committee | 9 | | MO. | E 0744 | YEAR | \$ |
| Mailing Address | | | 90 | DAY | VEAD | • |
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| City | State | Zip Code (Plus 4) | MO. | DAY | YEAR | \$ |
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| and the state of t | | | MO. | DAY | YEAR. | \$ |
| City | State | Zip Code (Plus 4) | MO. | DAY | YEAR | |
| Full Name of Contributing Committee | | | USSOT CO. | DAY | | \$ |
| | | | M. M.C. | DAY | YEAR | \$ |
| Mailing Address | 11,2-12 | | ⇒ MO. | DAY | YEAR | \$ |
| City | State | Zip Code (Plus 4) | MO. | DAY | YEAR | |
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| Full Name of Contributing Committee | | | . MO. | DAY | YEAR | \$ |
| Mailing Address | | | ··· MO. | DAY | YEAR | • |
| City | State | Zip Code (Plus 4) | -Unit 2027 | 90 KW302072-05-0 | | \$ |
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| Full Name of Contributing Committee | SOUL STANKS OF STANKS | CHRISTIAN CONTRACTOR | . Mo. | DAY | YEAR | company and the company of the compa |
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| Full Name of Contributing Committee | termination of an involve | | MO. | DAY | YEAR | |
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| Full Name of Contributing Committee | THE REAL PROPERTY OF THE PERSON NAMED OF | | MQ | DAY | YEAR | |
| Mailing Address | | | | | | \$ |
| marring Compass | | | MQ. | DAY | YEAR | \$ |
| City | State | Zip Code (Plus 4) | MO. | DAY | YEAR | |
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| Cakes Count & Total Cales | | | | | | PAGE TOTAL |
| Enter Grand Total of Part | C on Schedule I, E | Detailed Summar | y Page | , Section | n 3. | \$ |
| EB-502 (7-99) | | | | | | |

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ALL OTHER CONTRIBUTIONS

PAGE 6 OF 15

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.)

| Friends of Peter Schweyer | | (e) (b) | | From 1/ | | .2 то12/31/2012 |
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| | | | | DATE | | AMOUNT |
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| Mailing Address | | | MO. | DAY | YEAR | \$ |
| City | State | Zip Code (Plus 4) | MO | DAY | YEAR | \$ |
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| Full Name of Contributor | | Section of the second sections | MO. | DAY | YEAR | \$ |
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| Employer Name | | | Occupa | tion | | |
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| Employer Name | | | Occupa | tion | L- | |
| Employer Mailing Address/Principal Place of Business | | | | - | | |
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| Employer Name | | | Occupa | tion | L | |
| Employer Mailing Address/Principal Place of Business | | New Control of the Co | | - | | |
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| Enter Grand Total of Part D on Sched | ule i, | Detailed Summar | y rage | , Sectio | n 3. | \$ |

| PAGE | 7 | OF | 15 |
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| | | | |

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.

| Friends of Peter S | | | From | 1/1/2012 To | 12/31/201 |
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| EB-502 (7-99) | | | , | Language Control | |

PAGE 8 OF 15

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 Friends of Peter Schweyer | Reporting Per From $\frac{1/1}{1}$ | | To 12/31/2012 |
|-------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|--------|---------------|
| UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED VALUE OF S | 50 00 OR L | ESS PE | CONTRIBUTOR |
| TOTAL for the Reporting Period | (1) | \$ | |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF SHOOT TO \$4 | 19:00 (FROM | PART | F) |
| TOTAL for the Reporting Period | (2) | \$ | |
| 3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FRO | M PART 6 | | |
| TOTAL for the Reporting Period | I (3) | \$ | |
| TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS | a la villa de la compansa de la comp | | |
| REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.) | | \$ | |

| AGE 9 OF 15 |
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SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| hweyer | | | Reporting From 1 | | 12 To 12/31/2012 |
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SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Friends of Peter Schweyer DATE AMOUNT Full Name of Contributor State Zip Code (Plus 4) DAY YEAR \$ Employer of Contributor City State Zip Code (Plus 4) DAY YEAR \$ Employer of Contributor Mailing Address/Principal Place of Business Full Name of Contributor Employer of Contributor Employer Mailing Address/Principal Place of Business City State Zip Code (Plus 4) Description of Contributor Employer Mailing Address/Principal Place of Business Description of Contributor Employer Mailing Address/Principal Place of Business City State Zip Code (Plus 4) Description of Contribution Employer Mailing Address/Principal Place of Business Description of Contribution Full Name of Contributor Employer Mailing Address/Principal Place of Business Full Name of Contributor Employer Mailing Address/Principal Place of Business Full Name of Contributor State Zip Code (Plus 4) Description of Contribution Employer Mailing Address/Principal Place of Business Full Name of Contributor Description of Contribution Employer Mailing Address/Principal Place of Business Description of Contribution Full Name of Contributor Employer Mailing Address/Principal Place of Business Description of Contribution Full Name of Contributor Employer Mailing Address/Principal Place of Business Description of Contribution Description of Contribution Full Name of Contributor Employer Mailing Address/Principal Place of Business Description of Contribution Employer Mailing Address/Principal Place of Business Description of Contributor Employer Mailing Address/Principal Place of Business Description of Contributor Employer Mailing Address Business Description of Contributor Employer Mailing Address Business Description of Contributor Employer Mailing Address | Name of Filing Committee or Candidate | | | - | Reporting | Period | and the surface of the Control | |
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| Full Name of Contributor MG. DAY YEAR \$ Mailing Address MO. DAY YEAR | Employer of Contributor | | | Occupa | tion | | | |
| Full Name of Contributor MG. DAY YEAR \$ Mailing Address MO. DAY YEAR | Harrison Spatia Address Inch S. J. D. | | | | | | | |
| Mailing Address MO DAY YEAR | employer Melling Address/Principal Place of Business | | | Descrip | otion of Con | tribution | | |
| Mailing Address MO DAY YEAR | Full Name of Contributor | Minosha S | | 20570700 | tol state of the part | 2007-200-00E | | |
| ENGINEERING PARTITION OF THE PROPERTY OF THE P | run Hame of Commoutor | | | SERIO | DAT | TEAH | \$ | |
| e | Mailing Address | | | MO. | DAY | YEAR | | |
| | | | | | | | \$ | |
| City State Zip Code (Plus 4) MO BAY YEAR \$ | City | State | Zip Code (Plus 4) | MOX | DAY | PRATY | ¢ | |
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| Employer Mailing Address/Principal Place of Business Description of Contribution | Employer Mailing Address/Principal Place of Business | | | Descrin | tion of Con | tribution | | |
| Priori di Contribution | | | | 223011 | 0. 0011 | unon | | |
| PAGE TOTAL | | - A-48-54 | | | West Inc. | | PAGE TOTAL | |
| Enter Grand Total of Part G on Schedule II. In-Kind Contributions Detailed | Enter Grand Total of Part G on Sched | lule II, | In-Kind Contribu | itions [| Detailed | | in and | |
| Summary Page, Section 3. | | | 20 | | | | φ | |

STATEMENT OF EXPENDITURES

| Friends of Peter Schweyer | Reporting Period From 1/1/2012 To 12/31/2012 |
|-------------------------------------------------------------|---------------------------------------------------------------------|
| To Whom Paid Jehnifer Schweyer | Mg. PAY YEAR Amount 2 1 0 |
| Meiling Address 1529 Cataling Ave | Postage Drinting Reimburseme |
| Allentown PA 18103- | rwinger partiting (kg) minus sara |
| FEARIESS FIRE COMPANY | MO. BAY YEAR Amount \$ 200.00 |
| 12 21-12 29 S. FRONT St. | deposit- ann ouncement |
| Allentown PA 18103 - | |
| To Whom Paid Jennifer Schweyer Mailing Address | MO DAY YEAR Amount 348.41 |
| 1929 Catalina Ave Istate I Tip Gode (Bling 4) | PA State Demo Pty |
| HILENTOWN PA 18103- | weenses |
| "" Jennifer Schweyer | MO DAY YEAR Amount \$ 00.00 |
| 1529 Catalina Ave | à months-cull phone |
| Allentown PA 181B - | (Reimbue sement') |
| Mailing Address Teller enterprises | MO. DAY YEAR Amount A R ADIA \$ 500.0Ψ Description of Expenditure |
| City State Zip Code (Plus 4) | event (tood & hall rental) |
| Allentown PA 18101 - | MO. DAY YEAR Amount |
| Mailing Address 210 (+010 Ctroot | Description of Expenditure |
| alg State Street State Zip Code (Plus 4) | consulting expenses |
| HORRINDURG PA FIO - | MO DAY YEAR Amount |
| Mailing Address 29 b VC 11 a. 1 At | Description of Expenditure |
| State Zip Code (Plus 4) | web hosting |
| Wounutport PA 18088- | MO DAY YEAR Amount |
| Jenniter Schweger 1529 Catalina Ave | MO DAY YEER Amount \$ 208.8 |
| City State Zip Code (Plus 4) | postage (Reimbursement) |
| | PAGE TOTAL |
| Enter Grand Total of Expenditures on Page 1, Report Cover P | age, Item D. \$ 4194.87 |

STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate Friends of Peter Schweyer | Reporting Period From 1/1/2012 To 12/31/2012 |
|------------------------------------------------------------------------|---------------------------------------------------------------|
| | |
| Tack Pressmann scholarship Fund | 3 A01d \$ 250.00 |
| 2030 W Mlghman St, Suite 203 | Description of Expenditure |
| H TIENT TOWN - 1/4 1 1/4 104 - | · ' ' |
| Triends of mike Schlossberg Meiling Address On Riv 1537 | Amount 3 AOIA \$ 350.00 Description of Expenditure |
| PU 00K 1771 | Ashati on |
| Allentown PA 18105- | |
| Mailing Address Demockatic Party | 3 8 2010 \$ 00.00 |
| 300 N and (t) 8th Floor | Description of Expenditure CONCUTON |
| Harrisburg PA 17101- | |
| To Whom Paid "" Jennifer Schweyer Mailing Address | 3 24 2012 \$ 220.00 |
| 15a9 Catalina Ave | a manth wi phone & PD |
| Allentown PA 18103 - | box renewal (keimbuesement) |
| To Whom Paid Amelia Wilt | 4 2 2012 \$ 00.00 |
| Mailing Address 34 S. Saint Greorge St City State Zip Code (Plus 4) | Description of Expenditure (DITTE DUTT ON TO SCHOOL PULLED |
| Allentown PA 18104 - | |
| To Whom Paid Equality PA | 4 A AOIA \$ 250.00 |
| Mailing Address Add N. FRONT ST City State Zip Code (Plus 4) | Description of Expenditure ANNUM |
| Harrisburg DA 17101 - | |
| To Whom Paid The New York Deely Mailing Address 22 | 4 d 2017 \$ 250.00 |
| 40 BOX 1+3 | Description of Expanditure |
| Center Valley PA 18034 - | |
| Allentown St. Patrick's Day committee | Mo Day YEAR Amount \$ 125.00 |
| | Sponsolship for paradl |
| Allentown PA 18102 - | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page | age, Item D. PAGE TOTAL \$ 5 4 5 . 00 |

STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate Friends of Peter Schweyer | Reporting Period From 1/1/2012 To 12/31/2012 |
|-----------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| To Whom Paid TRIENDS OF POTRICK Slattery Mailing Address 10 BOX 1108 Sittle All Tip Code (Files A) | Description of Expenditure |
| East Texas PA 18040 - | |
| Mailing Address | Amount Amount \$ a,50.00 Description of Expenditure |
| THOS N TRONG State Zip Code (Plus 4) HOLRISOURO PA 17101 - | Description of Expenditure (LUNA) ON |
| Allentown PREZ Council | Amount \$ 900.00 Description of Expenditore |
| Clo Ernie Atiyeh 457 W Chew St City Allentown PA 1810d - | dinner Tickets |
| To Whom Paid LCOC | MO DAY YEAR Amount 4 19 2010 \$ 100.00 Description of Expenditure |
| City Allentown PA 18105 - | annation |
| "" Daugherty for congress | 4 24 2013 \$ 00.00 |
| DO BOY TO | Description of Expenditure |
| To Whom Paid | MD. DAY YEAR Amount |
| Mailing Address Al Ac A | 5 av ana \$ 100.00 |
| N and St City Allentown PA 1810a - | Danquot TIX |
| To Whom Paid Tim (MONO) | 5 3 dold \$ 109.00 |
| Mailing Address 435 Ridge AVE State Zip Code (Plus 4) | VOLUNTEER EVENT REIMBURSEMENT |
| Allentown OA 1810a - | Amount |
| MIRIAM HUERTON | U do dold \$ 100.00 Description of Expenditure |
| Liberty Street City Allendown PA 18102 - | donation |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page | PAGE TOTAL \$ 9 0 9,00 |

STATEMENT OF EXPENDITURES

| Friends of Peter Schweyer | From 1/1/2012 To 12/31/2012 |
|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| To Whom Raid Rian Shanker Mailing Address | Amount \$ 50.00 |
| Alentown PA 18102- | donation |
| To Whom Paid Peter Schweyer | 7 3 2012 \$ 200.00 |
| Melling Address 15a9 (ataling Ave City Allutown PA 18103 - | 1 Reimbursement |
| To Whom Paid Heart Hospital Foundation | The second secon |
| Allentown (treet State Zip Code (Plus 4) Allentown OH 1810A - | golf Tourny Spokoorship |
| TO WHOM Paid POSTMANTER | TO DAY YEAR Amount Sp. 00 |
| State Zip Code (Plus 4) Allentown DA 1810A - | PO Box Rental |
| To Whom Paid Casey for senate | MO. DAY: YEAR Amount 8 80 8018 \$ 8.50.00 Description of Expenditure |
| PO BDX 58740 City Philadelphia State Zip Code (Plus 4) Philadelphia Philadelphia - | all north on |
| To Whom Paid Allentown 250 Meiling Address A | 8 20 2012 \$ 50.00 |
| Allentown DA 18101 - | party & dock tix |
| To Whom Paid HAPAC | MO DAY YEAR Amount \$ 350,00 |
| PARRISBURG State Zip Code (Plus 4) PA 17105 - | Description of Expenditure |
| To Whom Rold May Pair Fastival of the ARTS | MO DAY YEAR Amount 9 4 2010 \$ 100,00 |
| Mailing Address A 41 DOWNEY FLAKE LN City State Zip Code (Plus 4) | Description of Expenditura |
| Allentown PA 18103- | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page | page total \$ 1280.00 |

STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate Friends of Peter Schweyer | | | | Reporting From 1 | Period /1/201 | 12 To 12/31/2012 |
|-----------------------------------------------------------------------------|----------|------------------------|---------|---------------------|-------------------------|--------------------------------------------|
| To Whom Boild ends of Dan McNe | ìII | | MQ. | DAY | VEAR . | Amount \$ 100,00 |
| City PO BOX 840 | | Zip Code (Plus 4) | Desgrip | had 0 | enditure | |
| Whitehall To Whom Pald Extends of Julio Gu | State PA | 18052- | | | 2019 | Amount \$ 100,00 |
| Meiling Address PO BOX ADV | State | Zip Code (Plus 4) | Descrip | ONO T | anditure (M | 10000 |
| Allentown To Whom Paid Friends of Gynthia | PA | 18109 - | 数值量 | d 0 | 1013 | Amount \$ 100,00 |
| Mailing Address | | | Descrip | tion of Exp | enditure | \$ 100,00 |
| Allentown | PA | Zip Code (Flus 4) | | | | Amount \$ 250.00 |
| To Whom Paid "" Jack Pressmann Scholarch Mailing Address 4000 W Tilghman St | State | Zip Code (Plus 4) | Descrip | d 4 tion of Exp | enditure | \$ 0,000 |
| Allentown, | PA | 18104 - | MO | DAY | YEAR | Amount |
| Mailing Address City | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | |
| To Whom Paid | | - | MG. | DAY | YEAR. | Amount |
| Mailing Address City | ra | | Descrip | tion of Exp | enditure | I\$ |
| To Whom Paid | State | Zip Code (Plus 4) | Mex | DAY | YEAR | Amount |
| Malling Address | | | Descrip | tion of Exp | enditure | \$ |
| City To Whom Paid | State | Zip Code (Plus 4) — | | | | Amount |
| Mailing Address | | | | tion of Exp | | |
| City | State | Zip Code (Plus 4) | | | × | PAGE TOTAL |
| Enter Grand Total of Expenditures on Pag | ge 1, l | Report Cover Pa | age, ii | tem D. | | \$ 750.00 |