

Commonwealth of Pennsylvania
CAMPAIGN FINANCE REPORT

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

Filer Identification Number: <input type="checkbox"/>		Report Filed By: <input type="checkbox"/>		CANDIDATE ¹	COMMITTEE ² <input checked="" type="checkbox"/>	LOBBYIST ³
Name of Filing Committee, Candidate or Lobbyist: <u>Friends of Mary Ellen Koval</u>						
Street Address: <u>523 N Carlisle St.</u>						
City: <u>Allentown</u>			State: <u>PA</u>	Zip Code: <u>18109 -</u>		
TYPE OF REPORT (place X to the right of report type)	5TH TUESDAY PRE-PRIMARY ¹	2ND FRIDAY PRE-PRIMARY ²	30 DAY POST PRIMARY ³	AMENDMENT REPORT?	YES	NO <input checked="" type="checkbox"/>
	8TH TUESDAY PRE-ELECTION ⁴	2ND FRIDAY PRE-ELECTION ⁵ <input checked="" type="checkbox"/>	30 DAY POST ELECTION ⁶	TERMINATION REPORT?	YES	NO <input checked="" type="checkbox"/>
	ANNUAL REPORT ⁷	YEAR	<u>2011</u>	FILING METHOD () CHECK ONE	PAPER <input checked="" type="checkbox"/>	DISKETTE

Name of Office Sought by Candidate: <u>Controller, City of Allentown</u>			DATE OF ELECTION			District Number	Office Code	Party Code	County Code
MO.	DAY	YEAR	MO.	DAY	YEAR	<u>NA</u>	<u>OTH</u>	<u>DEM</u>	<u>39</u>
<u>11</u>	<u>8</u>	<u>2011</u>				(SEE INSTRUCTIONS FOR CODES)			

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY
	<u>6</u>	<u>7</u>	<u>2011</u>		<u>10</u>	<u>24</u>	<u>2011</u>	
A. Amount Brought Forward From Last Report	\$ <u>5389.00</u>							
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ <u>10,125.00</u>							
C. Total Funds Available (Sum of Lines A and B)	\$ <u>15,514.00</u>							
D. Total Expenditures (From Schedule III)	\$ <u>13,752.00</u>							
E. Ending Cash Balance (Subtract Line D from Line C)	\$ <u>1758.00</u>							
F. Value of In-Kind Contributions Received (From Schedule II)	\$ <u>0.00</u>							
G. Unpaid Debts and Obligations (From Schedule IV)	\$ <u>2500.00</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

28th day of October
Jean J. Bressan
 Signature
 My commission expires 12 15 2012
 MO. DAY YR.

COMMONWEALTH OF PENNSYLVANIA
 Not a Notary Public
 Jean J. Bressan
 Upper Merion Township
 My Commission Expires Dec. 15, 2012
 Association of Notaries

Paul D. Balascki
 Signature of Person Submitting Report
Paul D. Balascki
 Printed Name
610 262-9710
 Area Code Daytime Telephone Number

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 report, including the attached schedules, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete. My 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

28th day of October
Jean J. Bressan
 Signature
 My commission expires 12 15 2012
 MO. DAY YR.

COMMONWEALTH OF PENNSYLVANIA
 Not a Notary Public
 Jean J. Bressan
 Upper Merion Township
 My Commission Expires Dec. 15, 2012
 Association of Notaries

M.E. Koval
 Signature of Candidate
M.E. Koval
 Printed Name
610 432-7932
 Area Code Daytime Telephone Number

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate Friends of Mary Ellen Koval	Reporting Period From 6/1/2011 To 10/24/2011
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$ 1300⁰⁰

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)	\$ 2025.⁰⁰
TOTAL for the Reporting Period	(2) \$ 2475.⁰⁰

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ 580.⁰⁰
All Other Contributions (Part D)	\$ 50.⁰⁰
TOTAL for the Reporting Period	(3) \$ 630.⁰⁰

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period	(4) \$ 0⁰⁰

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.)	\$ 10,125.⁰⁰
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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 Friends of Mary Ellen Koval	Reporting Period From <u>6/7/2011</u> To <u>10/24/2011</u>
---	---

	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributing Committee Boilermakers Local 13 PAC	09	19	2011	\$ 100 ⁰⁰
Mailing Address 2300 New Falls Rd.	MO.	DAY	YEAR	\$
City Newportville State PA Zip Code (Plus 4) 19056 -	MO.	DAY	YEAR	\$
Full Name of Contributing Committee Sheet Metal Workers 19 PAC	09	15	2011	\$ 100 ⁰⁰
Mailing Address 1301 S. Columbus Blvd	MO.	DAY	YEAR	\$
City Philadelphia State PA Zip Code (Plus 4) 19147 -	MO.	DAY	YEAR	\$
Full Name of Contributing Committee Painters & Allied Trades	10	21	2011	\$ 250 ⁰⁰
Mailing Address 2980 Southampton Rd.	MO.	DAY	YEAR	\$
City Philadelphia State PA Zip Code (Plus 4) 19154 -	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$

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 Friends of Mary Ellen Koval	Reporting Period From 6/1/2011 To 10/24/2011
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	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributor Mr & Mrs Robert Bennett	08	04	2011	\$ 250 ⁰⁰
Mailing Address 970 N. 38th St.	MO.	DAY	YEAR	\$
City Allentown	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18104 -	MO.	DAY	YEAR	\$
Full Name of Contributor Mr & Mrs Frank Schweighardt	08	03	2011	\$ 250 ⁰⁰
Mailing Address 15 Bastian Lane	MO.	DAY	YEAR	\$
City Allentown	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18104 -	MO.	DAY	YEAR	\$
Full Name of Contributor Mr. Stephen Shaak	08	02	2011	\$ 75 ⁰⁰
Mailing Address 10 S. West St.	MO.	DAY	YEAR	\$
City Allentown	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18102 -	MO.	DAY	YEAR	\$
Full Name of Contributor Mr. Robert Tavianni	07	04	2011	\$ 100 ⁰⁰
Mailing Address 306 E. Prospect St.	MO.	DAY	YEAR	\$
City Nazareth	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18064 -	MO.	DAY	YEAR	\$
Full Name of Contributor C.D. Miller	08	01	2011	\$ 100 ⁰⁰
Mailing Address 1605 N. Cedar Crest Blvd.	MO.	DAY	YEAR	\$
City Allentown	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18104 -	MO.	DAY	YEAR	\$
Full Name of Contributor Maxwell Davison	08	09	2011	\$ 100 ⁰⁰
Mailing Address 2335 Fox Meadow Dr.	MO.	DAY	YEAR	\$
City Allentown	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18104 -	MO.	DAY	YEAR	\$
Full Name of Contributor Volkmar Dierolf	08	09	2011	\$ 100 ⁰⁰
Mailing Address 208 N. Marshall St.	MO.	DAY	YEAR	\$
City Allentown	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18104 -	MO.	DAY	YEAR	\$
Full Name of Contributor Boyle Ventures	10	22	2011	\$ 250 ⁰⁰
Mailing Address 1209 Hausman Rd.	MO.	DAY	YEAR	\$
City Allentown	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18104 -	MO.	DAY	YEAR	\$

PAGE TOTAL
\$ 1225⁰⁰

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

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 Friends of Marg Ellen Koval	Reporting Period From <u>6/7/2011</u> To <u>10/24/2011</u>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Dr. + Mrs. Thomas Whalen	08	06	2011	\$ 250 ⁰⁰
Mailing Address 1072 Buckingham Dr.	MO.	DAY	YEAR	\$
City Allentown	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18104 -	MO.	DAY	YEAR	\$
Mr. Frank Banko	08	11	2011	\$ 100 ⁰⁰
Mailing Address 915 W. Broad St.	MO.	DAY	YEAR	\$
City Bethlehem	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18018 -	MO.	DAY	YEAR	\$
Mr. J. B. Reilly	08	12	11	\$ 100 ⁰⁰
Mailing Address 1577 Saucon Valley Rd.	MO.	DAY	YEAR	\$
City Bethlehem	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18018 -	MO.	DAY	YEAR	\$
Diane Snyder	08	20	2011	\$ 150 ⁰⁰
Mailing Address 135 N. Main St.	MO.	DAY	YEAR	\$
City Allentown	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18104 -	MO.	DAY	YEAR	\$
Tu Nueva Casa	08	08	2011	\$ 100 ⁰⁰
Mailing Address 233 W. Hamilton	MO.	DAY	YEAR	\$
City Allentown	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18101 -	MO.	DAY	YEAR	\$
El Torero	08	09	2011	\$ 100 ⁰⁰
Mailing Address 44 N. 6th St.	MO.	DAY	YEAR	\$
City Allentown	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18011 -	MO.	DAY	YEAR	\$
	MO.	DAY	YEAR	\$
	MO.	DAY	YEAR	\$
	MO.	DAY	YEAR	\$
	MO.	DAY	YEAR	\$
	MO.	DAY	YEAR	\$
	MO.	DAY	YEAR	\$
	MO.	DAY	YEAR	\$

PAGE TOTAL
\$ 800.00

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

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 Filing Committee or Candidate Friends of Mary Ellen Koval	Reporting Period From 6/7/2011 To 10/24/2011
---	---

	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributing Committee Steamfitters Local #420	08	03	2011	\$ 450 ⁰⁰
Mailing Address 14420 Townsend Rd.	07	18	2011	\$ 300 ⁰⁰
City Philadelphia	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 18154 -				
Full Name of Contributing Committee Bricklayers + Allied Craftsmen	06	15	2011	\$ 500 ⁰⁰
Mailing Address 2163 Berryhill St.	MO.	DAY	YEAR	\$
City Harrisburg	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 17104 -				
Full Name of Contributing Committee Carpenters PAC of Phila & Vicinity	06	13	2011	\$ 500 ⁰⁰
Mailing Address 1803 Spring Garden St.	10	13	2011	\$ 200 ⁰⁰
City Philadelphia	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 19130 -				
Full Name of Contributing Committee 140E Local 542	06	15	2011	\$ 500 ⁰⁰
Mailing Address 1375 Virginia Dr. #100	MO.	DAY	YEAR	\$
City Fort Washington	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 19034 -				
Full Name of Contributing Committee Plumbers #690	07	25	2011	\$ 1000 ⁰⁰
Mailing Address 2791 Southampton Rd.	MO.	DAY	YEAR	\$
City Philadelphia	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 19154 -				
Full Name of Contributing Committee IBEW	07	07	2011	\$ 400 ⁰⁰
Mailing Address 900 Seventh St, N.W	MO.	DAY	YEAR	\$
City Washington	MO.	DAY	YEAR	\$
State DC				
Zip Code (Plus 4) 2001 -				
Full Name of Contributing Committee Laborers #1174	06	28	2011	\$ 500 ⁰⁰
Mailing Address 465 Allentown Dr.	08	22	2011	\$ 250 ⁰⁰
City Allentown	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 18109 -				
Full Name of Contributing Committee Roosters Local #30	09	12	2011	\$ 500 ⁰⁰
Mailing Address 6447 Torresdale Ave	MO.	DAY	YEAR	\$
City Philadelphia	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 19135 -				

PAGE TOTAL
\$ 5100⁰⁰

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

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 Filing Committee or Candidate Friends of Mary Ellen Koval	Reporting Period From 6/7/2011 To 10/24/2011
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				DATE			AMOUNT
Full Name of Contributing Committee				MO.	DAY	YEAR	
Insulators + Asbestos PLC				07	26	2011	\$ 250 ⁰⁰
Mailing Address 3263 Schoolhouse Rd				MO.	DAY	YEAR	\$ 500 ⁰⁰
City Middletown	State PA	Zip Code (Plus 4) 17057 -		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	\$
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	\$
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	\$
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	\$

PAGE TOTAL
\$ 750.00

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

PART D
ALL OTHER CONTRIBUTIONS

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 Friends of Mary Ellen Koval	Reporting Period From <u>6/7/2011</u> To <u>10/24/2011</u>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Sovereign Enterprises	08	10	2011	\$ 250 ⁰⁰
Mailing Address 1865 Troxell St.	10	17	2011	\$ 250 ⁰⁰
City Allentown State PA Zip Code (Plus 4) 18109 -				\$
Employer Name		Occupation		
Employer Mailing Address/Principal Place of Business				

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

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

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

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
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 \$ 500.00

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 Friends of Mary Ellen Koval	Reporting Period From 6/7/2011 To 10/24/2011
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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						

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-
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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 Mary Ellen Koval</u>	Reporting Period From <u>6/7/2011</u> To <u>10/24/2011</u>
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ <u>0-</u>

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

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

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.)	\$ <u>Ø</u>
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**SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED**

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Friends of Mary Ellen Koval	Reporting Period From 6/26/11 To 10/24/2011
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				DATE			AMOUNT
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL \$ 0

**SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00**

Name of Filing Committee or Candidate <i>Friends of Mary Ellen Koval</i>	Reporting Period From <i>6/7/2011</i> To <i>10/24/2011</i>
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				DATE			AMOUNT
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
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 \$ <i>0</i>

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Friends of Mary Ellen Koval	Reporting Period From 8/7/2011 To 12/24/2011
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To Whom Paid	MO.	DAY	YEAR	Amount	Description of Expenditure
L.V. Print Center Mailing Address 1337 N. Nelson St. City Allentown State PA Zip Code (Plus 4) 18109-	07	27	2011	\$578 ⁵⁶	Print Materials
USPS Mailing Address West Side Post Office City Bethlehem State PA Zip Code (Plus 4) 18018-	07	27	2011	\$220 ⁰⁰	Stamps
LCDC Mailing Address P.O. Box 33 City Allentown State PA Zip Code (Plus 4) 18105-	09	06	2011	\$100 ⁰⁰	Notebuilder Software
Staples Mailing Address 4628 Broadway City Allentown State PA Zip Code (Plus 4) 18104-	09	18	2011	\$222 ²⁵	Printer & Paper
Weather Damron Mailing Address 2426 Clear Street Dr. City Allentown State PA Zip Code (Plus 4) 18102-	10	04	2011	\$250 ⁰⁰	Campaign work
Celeste Dee Mailing Address 2426 Clear Street Dr. City Allentown State PA Zip Code (Plus 4) 18102-	10	04	2011	\$250 ⁰⁰	Campaign work
L.V. Print Center Mailing Address 1337 N. Nelson St. City Allentown State PA Zip Code (Plus 4) 18109-	10	09	11	\$9000 ⁰⁰	Print Materials & Mailings
Sandra Vulcano Mailing Address 531 Philadelphia Rd. City Easton State PA Zip Code (Plus 4) 18042-	10	09	2011	\$1585 ⁴¹	Yard Signs

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

PAGE TOTAL
\$12,206.²²

**SCHEDULE III
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate Friends of Mary Ellen Koval	Reporting Period From <u>01/20/11</u> To <u>10/24/2011</u>
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To Whom Paid Kelly Bauer	MO.	DAY	YEAR	Amount
Mailing Address 6. Cedar St	10	22	2011	\$ 50⁰⁰
City Whitaker	State PA		Zip Code (Plus 4) 18072-	Description of Expenditure Yard Sign Placement

To Whom Paid LVDC	MO.	DAY	YEAR	Amount
Mailing Address P.O. Box 33	10	23	2011	\$ 1500⁰⁰
City Allentown	State PA		Zip Code (Plus 4) 18105-	Description of Expenditure GO TV

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
			-	

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
\$ 1550.⁰⁰

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 Friends of Mary Ellen Koval	Reporting Period From <u>6/17/2011</u> To <u>10/24/2011</u>
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Name of Creditor Mary Ellen Koval				Outstanding Balance of Debt \$ 2500⁰⁰	
Mailing Address 523 N. Carlisle St.	DATE DEBT INCURRED	MO. 03	DAY 01	YEAR 2011	
City Allentown	State PA	Zip Code (Plus 4) 18109-			

Description of Debt
loan to start campaign

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-
