

## Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	Report Filed By (Mark X)	Candidate	<input checked="" type="checkbox"/>	Committee	<input type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		John William Reynolds					
Street Address		34 W Elizabeth Avenue					
City	Bethlehem	State	PA	Zip Code	18018		

Type of Report (Place x under report type)

1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary	4- 6 <sup>th</sup> Tuesday Pre-Election	5- 2 <sup>nd</sup> Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)		Year		Amendment Report	Termination Report			
		2016		<input type="checkbox"/>	<input type="checkbox"/>			

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	01/01/2016	12/31/2016	
A. Amount Brought Forward From Last Report	\$	0	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	0	
C. Total Funds Available (Sum of Lines A and B)	\$	0	
D. Total Expenditures (From Schedule III)	\$	0	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	0	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	0.	

Affidavit Section

Part 1- If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I, the undersigned, being duly sworn, depose and say that the foregoing is true, correct and complete to the best of my knowledge and belief.

# Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number		Report Filed By (Mark X)		<input type="checkbox"/>	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		Friends of J. William Reynolds						
Street Address		34 W Elizabeth Avenue						
City	Bethlehem	State	PA	Zip Code	18018			

Type of Report (Place x under report type)

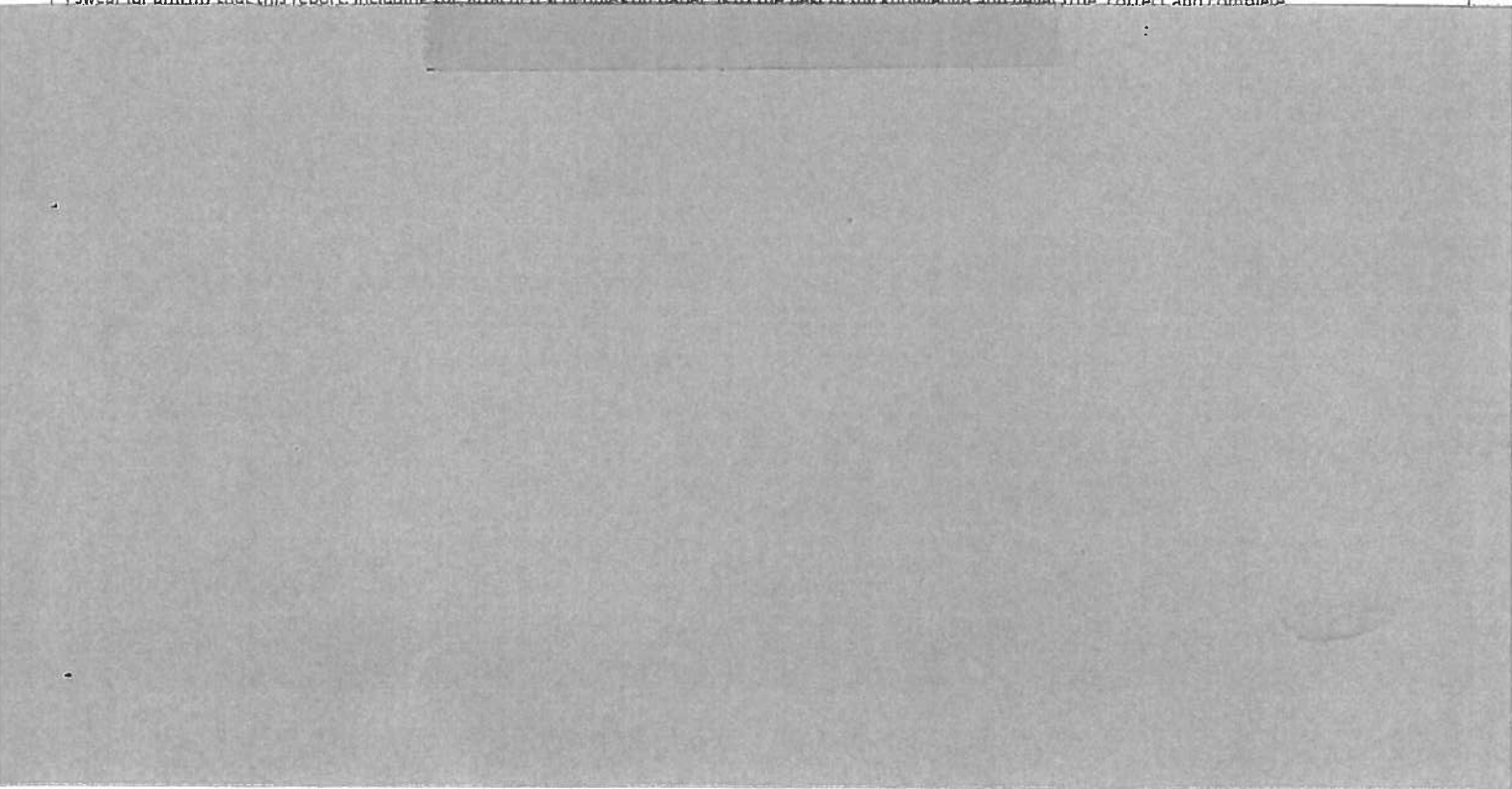
1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary	4- 6 <sup>th</sup> Tuesday Pre- Election	5- 2 <sup>nd</sup> Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)			Year		Amendment Report		Termination Report	
			2016		<input type="checkbox"/>		<input type="checkbox"/>	

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	01/01/2016	12/31/2016	
A. Amount Brought Forward From Last Report		\$ 29,876.24	
B. Total Monetary Contributions and Receipts (From Schedule I)		\$ 0.00	
C. Total Funds Available (Sum of Lines A and B)		\$ 29,876.24	
D. Total Expenditures (From Schedule III)		\$ 1,210.00	
E. Ending Cash Balance (Subtract Line D from Line C)		\$ 28,666.24	
F. Value of In-Kind Contributions Received (From Schedule II)		\$ 0.00	
G. Unpaid Debts and Obligations (From Schedule IV)		\$ 0.00	

Affidavit Section

Part 1- 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, is to the best of my knowledge and belief true, correct and complete.



SCHEDULE I  
**Contributions and Receipts**  
 Detailed Summary Page

Filer Identification Number	
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<b>1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor</b>	
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Total for the reporting period	(1)	\$	0.00
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<b>2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)</b>	
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Contributions Received from Political Committees (Part A)	\$	0.00	
All Other Contributions (Part B)	\$	0.00	
Total for the reporting period	(2)	\$	0.00

<b>3. Contributions Over \$250.00 (From Part C and Part D)</b>	
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Contributions Received from Political Committees (Part C)	\$	0.00	
All Other Contributions (Part D)	\$	0.00	
Total for the reporting period	(3)	\$	0.00

<b>4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)</b>	
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Total for the reporting period	(4)	\$	0.00
Total Monetary Contributions and Receipts during this reporting period <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i>			0.00

SCHEDULE III  
Statement of Expenditures

Filer Identification Number:	
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To Whom Paid		Paypal			Date [MM/DD/YYYY]	\$	5.00
House #	2211	Street Address	N 1st Street		Description of Expenditure		
City	San Jose	State	CA	Zip Code	95131		
Payment Services							

To Whom Paid		Paypal			Date [MM/DD/YYYY]	\$	5.00
House #	2211	Street Address	N 1st Street		Description of Expenditure		
City	San Jose	State	CA	Zip Code	95131		
Payment Services							

To Whom Paid		Friends of John Morganelli: PAC			Date [MM/DD/YYYY]	\$	200.00
House #	835	Street Address	<del>835</del> Barnsdale Road		Description of Expenditure		
City	Bethlehem	State	PA	Zip Code	18017		
Campaign Contribution							

To Whom Paid		Paypal			Date [MM/DD/YYYY]	\$	5.00
House #	2211	Street Address	N 1st Street		Description of Expenditure		
City	San Jose	State	CA	Zip Code	95131		
Payment Services							

To Whom Paid		Paypal			Date [MM/DD/YYYY]	\$	5.00
House #	2211	Street Address	N 1st Street		Description of Expenditure		
City	San Jose	State	CA	Zip Code	95131		
Payment Services							

To Whom Paid		Bethlehem City Democratic Committee			Date [MM/DD/YYYY]	\$	100.00
House #		Street Address	PO Box 1792		Description of Expenditure		
City	Bethlehem	State	PA	Zip Code	18018		
Political Donation <del>Payment Services</del>							

To Whom Paid		Paypal			Date [MM/DD/YYYY]	\$	5.00
House #	2211	Street Address	N 1st Street		Description of Expenditure		
City	San Jose	State	CA	Zip Code	95131		
Payment Services							

To Whom Paid		Paypal			Date [MM/DD/YYYY]	\$	5.00
House #	2211	Street Address	N 1st Street		Description of Expenditure		
City	San Jose	State	CA	Zip Code	95131		
Payment Services							

SCHEDULE III  
Statement of Expenditures

Filer Identification Number:	
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To Whom Paid		Paypal				Date [MM/DD/YYYY]	\$	5.00
House #	2211	Street Address	N 1st Street			Description of Expenditure		
City	San Jose	State	CA	Zip Code	95131	Payment Services		
To Whom Paid		Paypal				Date [MM/DD/YYYY]	\$	5.00
House #	2211	Street Address	N 1st Street			Description of Expenditure		
City	San Jose	State	CA	Zip Code	95131	Payment Services		
To Whom Paid		Bethlehem City Democratic Committee				Date [MM/DD/YYYY]	\$	100.00
House #		Street Address	PO Box 1792			Description of Expenditure		
City	Bethlehem	State	PA	Zip Code	18018	Political Donation		
To Whom Paid		Paypal				Date [MM/DD/YYYY]	\$	5.00
House #	2211	Street Address	N 1st Street			Description of Expenditure		
City	San Jose	State	CA	Zip Code	95131	Payment Services		
To Whom Paid		Paypal				Date [MM/DD/YYYY]	\$	5.00
House #	2211	Street Address	N 1st Street			Description of Expenditure		
City	San Jose	State	CA	Zip Code	95131	Payment Services		
To Whom Paid		Friends of Josh Shapiro				Date [MM/DD/YYYY]	\$	250.00
House #		Street Address	PO Box 22635			Description of Expenditure		
City	Philadelphia	State	PA	Zip Code	19110	Campaign Contribution		
To Whom Paid		Paypal				Date [MM/DD/YYYY]	\$	5.00
House #	2211	Street Address	N 1st Street			Description of Expenditure		
City	San Jose	State	CA	Zip Code	95131	Payment Services		
To Whom Paid		Paypal				Date [MM/DD/YYYY]	\$	5.00
House #	2211	Street Address	N 1st Street			Description of Expenditure		
City	San Jose	State	CA	Zip Code	95131	Payment Services		

SCHEDULE III  
Statement of Expenditures

Filer Identification Number:	
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To Whom Paid		Friends of Bryan Callahan			Date [MM/DD/YYYY]	\$	500.00
House #	633	Street Address	Main Street		Description of Expenditure		
City	Bethlehem	State	PA	Zip Code	18018	Campaign Contribution	
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			