	CA	MPAIGN	FINANCE REI	PORT		:	
	Name and A	ddress of	Filing Candidate	or Com	nitte	e	
Name: Address: City, State	, Zip:	Friends of Allen Cerullo 8258 Hensingersville Rd. Alburtis, PA 18011 Report Filed By					
Candidate		No	Committee			Yes	
Type of Ro	eport		Election Date	Amendo	ed	Termination	
30 Day Po	ost Primary	5/19/2009	Yes		No		
Office Sou	ight By Candida	ite	Party	County			
County Commissioner – District #1 Republican Lehigh							
	Sun	mary of	Receipts & Expen	ditures			
From:	6/9/2009		To:	6/16/20	09		
A. Amoun	nt Brought Forw	ard From	Last Report		(\$1,	123.33)	
B. Total Monetary Contributions & Receipts (from Schedule I)					\$1,400.00		
C. Total Funds Available (Sum of Lines A & B)					\$276.67		
D. Total Expenditures (from Schedule III)					\$ -0-		
E. Ending	Cash Balance (	Subtract I	Line D from Line C	()	\$27	76.67	
F. Value o	of In-Kind Cont	ributions I	Received (from Sch	edule II)	\$ -	0-	
G. Unpaid	d Debts & Oblig	ations (fro	om Schedule IV)		\$8,	618.50	

<sup>\*</sup>Complete reports including signatures are on file in the Office of Voter Registration.

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

PAGE 2 OF \_\_\_\_\_5\_\_\_

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Peri	od			
Friends of Allen Cerullo	From <b>0</b> 6	6/09/2009	9 то 06/16/2009		
1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR L	ESS PER CON	TRIBUTO	DR		
TOTAL for the Reporting Period	. (1)	\$	0.00		
2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PAI	RT B)		Angelijas op iz Staniska politika		
Contributions Received from Political Committees (Part A)		\$			
All Other Contributions (Part B)		\$			
TOTAL for the Reporting Period	(2)	\$			
		<u> </u>			
3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART C					
Contributions Received from Political Committees (Part C)		\$	0.00		
All Other Contributions (Part D)		\$	1400.00		
TOTAL for the Reporting Period	(3)	\$	1400.00		
4. OTHER RECEIPTS – REFUNDS, INTEREST EARNED, RETUR	NED CHECKS,	ETC. (F	ROM PART E)		
TOTAL for the Reporting Period	(4)	\$			
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.)		\$	1400.00		

#### 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			Reporting Period						
Friends of Allen Cerullo			From 06/09/2009 To 06/16/2009						
			DATE			AMOUNT			
Full Name of Contributor			MO.	DAY	YEAR				
Allen R Cerullo			06	15	2009	\$	1400.00		
Mailing Address			MO.	DAY	YEAR	_			
7946 Claussville Road	la.	7. 0 1 (0)		5.1	1/545	<u>\$</u>			
City Fogelsville	State PA	Zip Code (Plus 4) 18051 -	MO.	DAY	YEAR	\$			
Employer Name		10001	Occupat	ion	<u> </u>	<b>.</b>			
Employer Name PPL Services				Office worker					
Employer Mailing Address/Principal Place of E	Business			_			-		
Two North Ninth Street Allentown,	PA 18101	·							
Full Name of Contributor			MO.	DAY	YEAR	<u></u>			
Matter and Address of			MO.	DAY	YEAR	\$			
Mailing Address			MIO.	DAT	TEAR	\$			
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Ψ			
,		, , ,				\$			
Employer Name			Occupat	ion					
		<u></u>							
Employer Mailing Address/Principal Place of E	Business								
Full Name of Contributor			MO.	DAY	YEAR				
Tun Name of Continuator						\$			
Mailing Address			MO.	DAY	YEAR				
						\$			
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	_			
			Occupat	tion	<u> </u>	\$	<u>.</u>		
Employer Name			Occupa	LIOII					
Employer Mailing Address/Principal Place of I	Business		1			<del>,,</del>			
Full Name of Contributor			MO.	DAY	YEAR	\$			
Mailing Addross			MO.	DAY	YEAR	<b>3</b>			
Mailing Address			ino.		1	\$			
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	-			
		• • • • • • • • • • • • • • • • • • •				\$			
Employer Name			Occupa	tion		÷			
					·		<del></del>		
Employer Mailing Address/Principal Place of	Business								
Full Name of Contributor			MO.	DAY	YEAR				
	·					\$			
Mailing Address			MO.	DAY	YEAR				
	10	7:- O-d- (Di 4)		DAY	VEAD	\$			
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$			
Employer Name			Occupa	tion	J	ΙΨ			
Employer name				.=					
Employer Mailing Address/Principal Place of	Business								
inter Crand Total of Part D or	011115	11 -1 0	. 04	2		PAGE	TOTAL		
MANU CHANNEL TAKE AND DENT IT AN	SCHOOLIG I DATA	HEA SHMMON POA	ID SACTIC	10 S					

1400.00 \$

PAGE \_\_\_3\_\_ OF \_\_\_\_5\_\_

### 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.

e of Filing Committee or Candidate  iends of Allen Cerullo  From 06/09/20					<b>09</b> то <b>06/16/2009</b>		
Name of Creditor Allen R Cerullo					Outstandi	ng Balance of Debt	
Mailing Address 7946 Claussville Road	DATE DEBT INCURRED	мо. 3	DAY 27	YEAR 2006			
City Fogelsville		State PA	Zip Code 18051 -	(Plus 4)			
Description of Debt Campaign expenses							
Name of Creditor Allen R Cerullo					Outstandi \$	ng Balance of Debt 490.00	
Mailing Address 7946 Claussville Road	DATE DEBT INCURRED	<b>мо.</b> 5	DAY 01	YEAR 2006		La servició de la se La servició de la servició de	
Fogelsville		State PA	Zip Code 18051 -				
Description of Debt Campaign expenses				1			
Name of Creditor Allen R Cerullo					Outstandi \$	ng Balance of Debt 3018.50	
Mailing Address 7946 Claussville Rd	DATE DEBT INCURRED	мо. 6	05	YEAR 2006			
City Fogelsville		State PA	Zip Code 18051 -				
Description of Debt Campaign expenses		<del></del>				-	
Name of Creditor Allen R Cerullo					Outstandi \$	ng Balance of Debt 1200.00	
Mailing Address 7946 Claussville Rd	DATE DEBT INCURRED	мо. 4	DAY 10	YEAR 2008			
City Fogelsville		State PA	Zip Code 18051 -				
Description of Debt campaign expense	· · · · · · · · · · · · · · · · · · ·						
Name of Creditor Allen R Cerullo		_		,	Outstandi \$	ng Balance of Debt 1200.00	
Mailing Address 7946 Claussville Rd	DATE DEBT INCURRED	мо. 4	30	YEAR 2008			
City Fogelsville	INSORALE I	State PA	Zip Code 18051	(Plus 4)			
Description of Debt campaign expenses		- · · · · · · · · · · · · · · · · · · ·					
Name of Creditor Allen R Cerullo		+ _**			Outstandi \$	ing Balance of Debt 800.00	
Mailing Address 7946 Claussville Rd	DATE DEBT INCURRED	мо. 5	07	YEAR 2008			
City Fogelsville		State PA	Zip Code 18051	(Plus 4)			
Description of Debt campaign expenses							
Enter Grand Total of Unpaid Debts on Pag	je 1, Report Cover Page,	Item G.			PAGE TO	7218 50	

PAGE <u>4</u> OF <u>5</u>

## STATEMENT OF UNPAID DEBTS

PAGE \_\_\_\_5 OF \_\_\_\_5

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			Reporting Period					
Friends of Allen Cerullo								
		Fro	om <u>06/</u> 0	19/200	9 To <u>06/16/2009</u>			
Name of Creditor			<u>-</u>	-	Outstanding Balance of Debt			
Allen R Cerullo				1	\$ 1400.00			
Mailing Address	DATE	MO.	DAY	YEAR				
7946 Claussville Road	DEBT	06	15	2009				
city Fogelsville		State PA	Zip Code 18051 -	(Plus 4)				
Description of Debt Campaign expenses		<b></b>						
Name of Creditor					Outstanding Balance of Debt			
Mailing Address	DATE	1	DAY T	VEAD	\$			
Maining Address	DEBT	MO.	DAY	YEAR	SAASTAAN Haastaan			
City	INCORNED	State	Zip Code	(Plus 4)				
Description of Debt								
Name of Creditor					Outstanding Balance of Debt			
0					\$			
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR				
City		State	Zip Code -	(Plus 4)				
Description of Debt					A A A A A A A A A A A A A A A A A A A			
Name of Creditor					Outstanding Balance of Debt \$			
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR				
City		State	Zip Code -	(Plus 4)				
Description of Debt			<u> </u>		Constitution of the Consti			
Name of Creditor					Outstanding Balance of Debt			
Mailing Address	DATE	MO.	DAY	YEAR				
	DEBT INCURRED							
City		State	Zip Code	(Plus 4)				
Description of Debt					Lauten (n. n. n. n. ) — Etti den kiloneta (Estimen him n.) — An Save Sava eta in Save			
Name of Creditor					Outstanding Balance of Debt			
Mailing Address	DATE DEBT	MO.	DAY	YEAR				
	INCURRED							
City		State	Zip Code -	(Pius 4)				
Description of Debt								
					PAGE TOTAL			
Enter Grand Total of Unpaid Debts on Pag	je 1, Report Cover Page	, Item G.			\$ 1400.00			