

CAMPAIGN FINANCE REPORT				
Name and Address of Filing Candidate or Committee				
Name:	<i>Committee To Elect Dan McCarthy</i>			
Address:	<i>210 N. 27th St.</i>			
City, State, Zip:	<i>Allentown, PA 18104</i>			
Report Filed By				
Candidate	<i>No</i>	Committee	<i>Yes</i>	
Type of Report	Election Date	Amended	Termination	
<i>2nd Friday Pre-election</i>	<i>11/3/2009</i>	<i>No</i>	<i>No</i>	
Office Sought By Candidate	Party	County		
<i>County Commissioner- District 4</i>	<i>Democratic</i>	<i>Lehigh</i>		
Summary of Receipts & Expenditures				
From:	<i>6/8/2009</i>	To:	<i>10/19/2009</i>	
A. Amount Brought Forward From Last Report			<i>\$106.00</i>	
B. Total Monetary Contributions & Receipts (from Schedule I)			<i>\$1,750.00</i>	
C. Total Funds Available (Sum of Lines A & B)			<i>\$1,856.00</i>	
D. Total Expenditures (from Schedule III)			<i>\$1,659.00</i>	
E. Ending Cash Balance (Subtract Line D from Line C)			<i>\$197.00</i>	
F. Value of In-Kind Contributions Received (from Schedule II)			<i>-0-</i>	
G. Unpaid Debts & Obligations (from Schedule IV)			<i>\$720.00</i>	

*Complete reports, including signatures are on file in the Office of Voter Registration.

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS

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Detailed Summary Page

Name of Filing Committee or Candidate COMMITTEE TO ELECT DAN MCCARTHY	Reporting Period From 6/9/09 To 10/19/09
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ —

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)	\$ —
TOTAL for the Reporting Period (2)	\$

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ 750.00
All Other Contributions (Part D)	\$ 1,000.00
TOTAL for the Reporting Period (3)	\$ 1,750.00

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM 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.)	\$ 1,750.00
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OVER \$250.00

Name of Filing Committee or Candidate

Reporting Period

From 6/9/09 To 10/19/09

COMMITTEE TO ELECT DAN MCCARTHY

Full Name of Contributing Committee		DATE			AMOUNT
LEHIGH VALLEY ASSOCIATION OF REALTORS - PAC		MO.	DAY	YEAR	\$ 750.00
Mailing Address:		MO.	DAY	YEAR	\$
10 SO. COMMERCE WAY					
City	State	Zip Code (Plus 4)			\$
BETHLEHEM	PA.	18017-			\$
Full Name of Contributing Committee		MO.	DAY	YEAR	\$
Mailing Address:		MO.	DAY	YEAR	\$
					\$
City	State	Zip Code (Plus 4)			\$
		-			\$
Full Name of Contributing Committee		MO.	DAY	YEAR	\$
Mailing Address:		MO.	DAY	YEAR	\$
					\$
City	State	Zip Code (Plus 4)			\$
		-			\$
Full Name of Contributing Committee		MO.	DAY	YEAR	\$
Mailing Address:		MO.	DAY	YEAR	\$
					\$
City	State	Zip Code (Plus 4)			\$
		-			\$
Full Name of Contributing Committee		MO.	DAY	YEAR	\$
Mailing Address:		MO.	DAY	YEAR	\$
					\$
City	State	Zip Code (Plus 4)			\$
		-			\$
Full Name of Contributing Committee		MO.	DAY	YEAR	\$
Mailing Address:		MO.	DAY	YEAR	\$
					\$
City	State	Zip Code (Plus 4)			\$
		-			\$
Full Name of Contributing Committee		MO.	DAY	YEAR	\$
Mailing Address:		MO.	DAY	YEAR	\$
					\$
City	State	Zip Code (Plus 4)			\$
		-			\$
Full Name of Contributing Committee		MO.	DAY	YEAR	\$
Mailing Address:		MO.	DAY	YEAR	\$
					\$
City	State	Zip Code (Plus 4)			\$
		-			\$
Full Name of Contributing Committee		MO.	DAY	YEAR	\$
Mailing Address:		MO.	DAY	YEAR	\$
					\$
City	State	Zip Code (Plus 4)			\$
		-			\$
Full Name of Contributing Committee		MO.	DAY	YEAR	\$
Mailing Address:		MO.	DAY	YEAR	\$
					\$
City	State	Zip Code (Plus 4)			\$
		-			\$
Full Name of Contributing Committee		MO.	DAY	YEAR	\$
Mailing Address:		MO.	DAY	YEAR	\$
					\$
City	State	Zip Code (Plus 4)			\$
		-			\$

PAGE TOTAL

\$ 750.00

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

PART D
ALL OTHER CONTRIBUTIONS

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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 COMMITTEE TO ELECT DAN MCCARTHY	Reporting Period From 6/9/09 To 10/19/09
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		DATE			AMOUNT
		MO.	DAY	YEAR	
Full Name of Contributor TOM & KATHY GORE		10	5	09	\$ 500.00
Mailing Address 916 N. CEDAR CREST BLVD.		MO.	DAY	YEAR	\$
City ALLENTOWN	State PA	Zip Code (Plus 4) 18104			\$
Employer Name THE CRAYOLA FACTORY / DEKA BATTERY		Occupation MANAGERS			
Employer Mailing Address/Principal Place of Business EASTON, PA. 18042 / LYONS, PA.					
Full Name of Contributor DANIEL K. MCCARTHY (LOAN)		10	5	09	\$ 500.00
Mailing Address 210 N. 27TH ST.		MO.	DAY	YEAR	\$
City ALLENTOWN	State PA	Zip Code (Plus 4) 18104			\$
Employer Name DAVIS & MCCARTHY PC.		Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 1146 S. CEDAR CREST BLVD., ALLENTOWN, PA. 18103					
Full Name of Contributor		MO.	DAY	YEAR	\$
Mailing Address		MO.	DAY	YEAR	\$
City	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	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	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
\$ 1,000.00

SCHEDULE III
STATEMENT OF EXPENDITURES

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Name of Filing Committee or Candidate COMMITTEE TO ELECT DAN MC CARTHY	Reporting Period From 6/1/09 To 10/19/09
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To Whom Paid LEHIGH County DEMOCRATIC COMMITTEE Mailing Address P.O. Box 33 City ALLENTOWN	State PA	Zip Code (Plus 4) 18105	MO. 9	DAY 1	YEAR 09	Amount \$ 100.00						
Description of Expenditure FEE ALLENTOWN FAIR BOOTH												
To Whom Paid 360 JMG, LLC Mailing Address 718 SEVENTH STREET SUITE 310 City WASHINGTON, DC	State DC	Zip Code (Plus 4) 20001	MO. 9	DAY 25	YEAR 09	Amount \$ 820.00						
Description of Expenditure PRM CARDS												
To Whom Paid LEHIGH VALLEY PRINT SHOP Mailing Address 1231 AIRPORT ROAD City ALLENTOWN	State PA	Zip Code (Plus 4) 18101	MO. 10	DAY 6	YEAR 09	Amount \$ 689.00						
Description of Expenditure YARD SIGNS												
To Whom Paid BAR ASSOCIATION OF LEHIGH COUNTY Mailing Address 1114 WALNUT STREET City ALLENTOWN	State PA	Zip Code (Plus 4) 18102	MO. 10	DAY 13	YEAR 09	Amount \$ 50.00						
Description of Expenditure MEMBERSHIP LIST												
To Whom Paid Mailing Address City 							State 	Zip Code (Plus 4) 	MO. 	DAY 	YEAR 	Amount \$
Description of Expenditure 												
To Whom Paid Mailing Address City 							State 	Zip Code (Plus 4) 	MO. 	DAY 	YEAR 	Amount \$
Description of Expenditure 												
To Whom Paid Mailing Address City 							State 	Zip Code (Plus 4) 	MO. 	DAY 	YEAR 	Amount \$
Description of Expenditure 												
To Whom Paid Mailing Address City 							State 	Zip Code (Plus 4) 	MO. 	DAY 	YEAR 	Amount \$
Description of Expenditure 												

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

PAGE TOTAL \$ 1,659.00

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 COMMITTEE TO ELECT DAN MCCARTHY	Reporting Period From 6/9/09 To 10/19/09
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Name of Creditor DANIEL K. MCCARTHY				Outstanding Balance of Debt \$ 500.00	
Mailing Address 210 N. 27TH ST.		DATE DEBT INCURRED MO: 10 DAY: 5 YEAR: 09			
City ALLENTOWN		State: PA Zip Code (Plus 4): 18104			
Description of Debt LOAN					

Name of Creditor DANIEL K. MCCARTHY				Outstanding Balance of Debt \$ 220.00	
Mailing Address 210 N. 27TH ST.		DATE DEBT INCURRED MO: 10 DAY: 19 YEAR: 09			
City ALLENTOWN,		State: PA Zip Code (Plus 4): 18104			
Description of Debt POSTAGE					

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address		DATE DEBT INCURRED			
City		MO: DAY: YEAR:			
State: Zip Code (Plus 4):		-			
Description of Debt					

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address		DATE DEBT INCURRED			
City		MO: DAY: YEAR:			
State: Zip Code (Plus 4):		-			
Description of Debt					

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address		DATE DEBT INCURRED			
City		MO: DAY: YEAR:			
State: Zip Code (Plus 4):		-			
Description of Debt					

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address		DATE DEBT INCURRED			
City		MO: DAY: YEAR:			
State: Zip Code (Plus 4):		-			
Description of Debt					

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

PAGE TOTAL

\$ 720.00