

COMMONWEALTH OF PENNSYLVANIA
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.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF		CANDIDATE	<input checked="" type="checkbox"/>	COMMITTEE	<input type="checkbox"/>	LOBBYIST	<input type="checkbox"/>	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Mary Ellen Koval</i>										
STREET ADDRESS <i>523 N Carlisle St.</i>										
CITY <i>Allentown</i>				STATE <i>PA</i>		ZIP CODE <i>18109 -</i>				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.		PARTY		DATE OF ELECTION	
6TH TUESDAY PRE-PRIMARY		<i>Controller, City of Allentown</i>			<i>-</i>		<i>Dem</i>		<i>11 8 2011</i>	
2ND FRIDAY PRE-PRIMARY		DATES OF REPORTING PERIOD		MC		DAY		YEAR		
30 DAY POST-PRIMARY <input checked="" type="checkbox"/>		<i>5 3 2011 - 6 6 2011</i>								
6TH TUESDAY PRE-ELECTION		CASH BALANCE AT END OF REPORTING PERIOD: <i>\$ - 0 -</i>								
2ND FRIDAY PRE-ELECTION		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: <i>\$ 0 -</i>								
30 DAY POST-ELECTION		AMENDMENT REPORT?		YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	FOR OFFICE USE ONLY		
ANNUAL REPORT		TERMINATION REPORT?		YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>			

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates Committee, the Treasurer must sign here
 If statement is filed on behalf of a Candidate, the Candidate must sign here
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here

~~SWORN TO AND SUBSCRIBED BEFORE ME THIS~~
~~DAY OF~~ *20*
~~SIGNATURE~~
~~MY COMMISSION EXPIRES~~ MC DAY YR
~~SIGNATURE OF PERSON SUBMITTING REPORT~~
~~PRINTED NAME~~ *Paul D. Balascki*
~~AREA CODE~~ *610* ~~DAYTIME TELEPHONE NUMBER~~ *262-9710*

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here

~~SWORN TO AND SUBSCRIBED BEFORE ME THIS~~
~~DAY OF~~ *JUNE* 20*11*
~~SIGNATURE~~
~~MY COMMISSION EXPIRES~~ MC DAY YR
~~SIGNATURE OF CANDIDATE~~
~~PRINTED NAME~~ *Mary Ellen Koval*
~~AREA CODE~~ *610* ~~DAYTIME TELEPHONE NUMBER~~ *432-7932*

COMMONWEALTH OF PENNSYLVANIA
 NOTARY SEAL
 DEBRA BENYO, Notary Public
 City of Allentown, Lehigh County
 Expires September 27, 2014