

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 <input checked="" type="checkbox"/>		COMMITTEE <input type="checkbox"/>		LOBBYIST <input type="checkbox"/>			
Name of Filing Committee, Candidate or Lobbyist: NAT L. HYMAN											
Street Address: C/O 727 N. MEADOW STREET											
City: ALLENTOWN					State: PA		Zip Code: 18102				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	<input type="checkbox"/>	2ND FRIDAY PRE-PRIMARY	<input type="checkbox"/>	30 DAY POST PRIMARY	<input type="checkbox"/>	AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>	
	8TH TUESDAY PRE-ELECTION	<input type="checkbox"/>	2ND FRIDAY PRE-ELECTION	<input checked="" type="checkbox"/>	30 DAY POST ELECTION	<input type="checkbox"/>	TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	<input checked="" type="checkbox"/>	YEAR		FILING METHOD () CHECK ONE		PAPER	<input checked="" type="checkbox"/>	DISKETTE		
Name of Office Sought by Candidate: MAYOR - CITY OF ALLENTOWN					DATE OF ELECTION		District Number	Office Code	Party Code	County Code	
					MO.	DAY	YEAR				
					11	7	2017				
(SEE INSTRUCTIONS FOR CODES)											
Summary of Receipts and Expenditures from:					MO.	DAY	YEAR	FOR OFFICE USE ONLY			
					6	6	2017				
					To	MO.	DAY	YEAR			
						10	23	2017			
A. Amount Brought Forward From Last Report					\$ < 40,931.20 >						
B. Total Monetary Contributions and Receipts (From Schedule I)					\$ 0.00						
C. Total Funds Available (Sum of Lines A and B)					\$ < 40,931.20 >						
D. Total Expenditures (From Schedule III)					\$ 0.00						
E. Ending Cash Balance (Subtract Line D from Line C)					\$ < 40,931.20 >						
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 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

26th day of **OCTOBER** 20 **17**

Suzanne T. Miller
 Signature

My commission expires **02 25 2021**
 MO. DAY YR.

Nat L. Hyman
 Signature of Person Submitting Report

NAT L. HYMAN
 Printed Name

610 **433-4114**
 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 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

_____ day of _____ 20 _____

 Signature

My commission expires _____
 MO. DAY YR.

 Signature of Candidate

 Printed Name

_____ **Area Code** _____ **Daytime Telephone Number**

COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL
 Suzanne T. Miller, Notary Public
 City of Allentown, Lehigh County
 My Commission Expires Feb. 25, 2021
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

State • Bureau of Commissions, Elections and Legislation
 Building • Harrisburg, PA 17120-0029 • (717) 787-5280