

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 ¹	COMMITTEE ² <input checked="" type="checkbox"/>	LOBBYIST ³	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Friends of Mary Ellen Koval						
STREET ADDRESS 523 N. Carlisle St.						
CITY Allentown		STATE PA	ZIP CODE 18109 -			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO. NA	PARTY Dem	DATE OF ELECTION		
				MO.	DAY	YEAR
6TH TUESDAY PRE-PRIMARY ¹				11	08	2016
2ND FRIDAY PRE-PRIMARY ²						
30 DAY POST-PRIMARY ³						
6TH TUESDAY PRE-ELECTION ⁴						
2ND FRIDAY PRE-ELECTION ⁵						
30 DAY POST-ELECTION ⁶						
ANNUAL REPORT ⁷ <input checked="" type="checkbox"/>						

DATES OF REPORTING PERIOD		TO	
MO.	DAY	YEAR	
01	01	2017	
MO.	DAY	YEAR	
12	31	2017	

CASH BALANCE AT END OF REPORTING PERIOD:	\$ 6569.13
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:	\$ 0

AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>
TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>

AFFIDAVIT SECTION

PART I -
 statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 statement is filed on behalf of a Candidate, the Candidate must sign here.
 statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OF LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS	
22 ND DAY OF <u>JANUARY</u> 20 <u>18</u>	
<u>Elaine A. Fink</u> SIGNATURE	
MY COMMISSION EXPIRES	
5 3 2020 MO. DAY YR.	

<u>Paul D. Balascki</u> SIGNATURE OF PERSON SUBMITTING REPORT	
<u>Paul D. Balascki</u> PRINTED NAME	
<u>610</u> AREA CODE	<u>262-9710</u> DAYTIME TELEPHONE NUMBER

PART II -
 statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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	
22 ND DAY OF <u>JANUARY</u> 20 <u>18</u>	
<u>Elaine A. Fink</u> SIGNATURE	
MY COMMISSION EXPIRES	
5 3 2020 MO. DAY YR.	

<u>M.E. Koval</u> SIGNATURE OF CANDIDATE	
<u>M.E. Koval</u> PRINTED NAME	
<u>610</u> AREA CODE	<u>432-7932</u> DAYTIME TELEPHONE NUMBER

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

NOTARIAL SEAL
 ELAINE A. FINK
 Notary Public
 WHITEHALL TWP, LEHIGH COUNTY
 My Commission Expires May 3, 2020

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