

Commonwealth of Pennsylvania  
**CAMPAIGN FINANCE REPORT**

PAGE 1 OF 4

(COVER PAGE)

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

<b>Filer Identification Number:</b>		<b>Report Filed By:</b>		<input checked="" type="checkbox"/> CANDIDATE		<input checked="" type="checkbox"/> COMMITTEE		<input type="checkbox"/> LOBBYIST													
Name of Filing Committee, Candidate or Lobbyist: <u>Candida Affa</u>																					
Street Address: <u>Primrose Lane</u>																					
City: <u>Allentown</u>				State: <u>PA</u>		Zip Code: <u>18104</u>															
TYPE OF REPORT  (place X to the right of report type)	8TH TUESDAY PRE-PRIMARY		1.		2ND FRIDAY PRE-PRIMARY		2. <input checked="" type="checkbox"/>		30 DAY POST-PRIMARY		3.		AMENDMENT REPORT?		YES		NO		<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION		4.		2ND FRIDAY PRE-ELECTION		5.		30 DAY POST-ELECTION		6.		TERMINATION REPORT?		YES		NO		<input checked="" type="checkbox"/>		
	ANNUAL REPORT		7.		YEAR		<u>2019</u>		FILING METHOD		<input checked="" type="checkbox"/> CHECK ONE		PAPER		<input checked="" type="checkbox"/>		DISKETTE		<input type="checkbox"/>		
Name of Office Sought by Candidate: <u>City Council</u>										DATE OF ELECTION		District Number		Office Code		Party Code		County Code			
										<u>5/21/2019</u>						<u>DEM</u>		<u>39</u>			
																				(SEE INSTRUCTIONS FOR CODES)	
Summary of Receipts and Expenditures from:										MO. DAY YEAR		MO. DAY YEAR		FOR OFFICE USE ONLY							
										<u>1/1/2019</u>		<u>5/6/2019</u>									
A. Amount Brought Forward From Last Report										\$		<u>0</u>									
B. Total Monetary Contributions and Receipts (From Schedule I)										\$		<u>0</u>									
C. Total Funds Available (Sum of Lines A and B)										\$		<u>0</u>									
D. Total Expenditures (From Schedule III)										\$		<u>2000.00</u>									
E. Ending Cash Balance (Subtract Line D from Line C)										\$		<u>-2000.00</u>									
F. Value of In-Kind Contributions Received (From Schedule II)										\$		<u>0</u>									
G. Unpaid Debts and Obligations (From Schedule IV)										\$		<u>0</u>									

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 correct and complete.									
Sworn to and subscribed before me this									
<div style="display: flex; justify-content: space-between;"> <div> <u>9th</u> day of <u>MAY</u> 20<u>19</u>  <u>[Signature]</u>            Signature            My commission expires <u>08</u> <u>01</u> <u>2019</u>            MO. DAY YR.         </div> <div style="border-left: 1px solid black; padding-left: 10px;"> <u>[Signature]</u>            Signature of Person Submitting Report  <u>Candida Affa</u>            Printed Name  <u>18104</u>            Area Code  <u>610-392-8825</u>            Daytime Telephone Number         </div> </div>									
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, 1972 (P.L. 1333, No. 320) as amended.									
Sworn to and subscribed before me this									
<div style="display: flex; justify-content: space-between;"> <div>           _____ day of _____ 20____            _____            Signature            My commission expires _____            MO. DAY YR.         </div> <div style="border-left: 1px solid black; padding-left: 10px;">           _____            Signature of Candidate            _____            Printed Name            _____            Area Code            _____            Daytime Telephone Number         </div> </div>									

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

SCHEDULE I  
**CONTRIBUTIONS AND RECEIPTS**

PAGE 2 OF

2 of 4

Detailed Summary Page

Name of Filing Committee or Candidate <b>Candidate AffA</b>	Reporting Period From <b>1/1/2019</b> To <b>5/6/2019</b>
--	---

<b>1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR</b>		
<b>TOTAL for the Reporting Period</b>	<b>(1)</b>	<b>\$</b>

<b>2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)</b>		
Contributions Received from Political Committees (Part A)		\$
All Other Contributions (Part B)		\$
<b>TOTAL for the Reporting Period</b>	<b>(2)</b>	<b>\$</b>

<b>3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)</b>		
Contributions Received from Political Committees (Part C)		\$
All Other Contributions (Part D)		\$
<b>TOTAL for the Reporting Period</b>	<b>(3)</b>	<b>\$</b>

<b>4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)</b>		
<b>TOTAL for the Reporting Period</b>	<b>(4)</b>	<b>\$</b>

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	<b>\$</b> <b>0</b>
--	--------------------

**IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

**Detailed Summary Page**

Name of Filing Committee or Candidate <u>Candida ASHA</u>	Reporting Period From <u>1/1/19</u> To <u>5/6/19</u>
--	---

<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>		
TOTAL for the Reporting Period		(1) \$

<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>		
TOTAL for the Reporting Period		(2) \$

<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>		
TOTAL for the Reporting Period		(3) \$

<b>TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD</b> (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)	\$ <u>0</u>
---	-------------

**SCHEDULE III**  
**STATEMENT OF EXPENDITURES**

PAGE 4 OF 4

Name of Filing Committee or Candidate <u>Candida Arpa</u>	Reporting Period From <u>1/1/19</u> To <u>5/6/19</u>
--	---

To Whom Paid <u>Arpa for Allentown</u>	MO. <u>1</u>	DAY <u>1</u>	YEAR <u>2019</u>	Amount <u>\$2,000.00</u>
Mailing Address <u>3039 Hillcrest Ave</u>	Description of Expenditure <u>Loan to Campaign PAC</u>			
City <u>Allentown</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18103</u>		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City				
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City				
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City				
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City				
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City				
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City				
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City				
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City				

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

PAGE TOTAL  
\$2,000.00