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:	
Report Filed By:	CANDIDATE 1. [ ] COMMITTEE 2. ✓ LOBBYIST 3. [ ]
Name of Filing Committee, Candidate, or Lobbyist:	Friends of Cynthia Mota
Street Address:	2604 Appel Street
City:	Allentown
State:	PA
Zip Code:	18103

TYPE OF REPORT (place X to the right of report type)

6TH TUESDAY PRE-PRIMARY	1.	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.	YEAR		FILING METHOD ( ) CHECK ONE	PAPER / DISKETTE

AMENDMENT REPORT? YES / NO
TERMINATION REPORT? YES / NO

Name of Office Sought by Candidate:	DATE OF ELECTION (MO. / DAY / YEAR)	District Number	Office Code	Party Code	County Code
Allentown City Council	5 / 16 / 2017			Dem	39

(SEE INSTRUCTIONS FOR CODES)

Summary of Receipts and Expenditures from: 1 / 1 / 2017 **To** 5 / 1 / 2017

A. Amount Brought Forward From Last Report	$ -0-
B. Total Monetary Contributions and Receipts (From Schedule I)	$ 3430.00
C. Total Funds Available (Sum of Lines A and B)	$ 3430.00
D. Total Expenditures (From Schedule III)	$ 2498.08
E. Ending Cash Balance (Subtract Line D from Line C)	$ 931.92
F. Value of In-Kind Contributions Received (From Schedule II)	$ 650.00
G. Unpaid Debts and Obligations (From Schedule IV)	$ (-1200.00)

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17 MAY -5 PM 1:22

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 5 day of May 2017

Signature [signed]

My commission expires: 07 2018 (MO. DAY YR.)

NOTARIAL SEAL
Amanda P. Hernandez, Notary Public
City of Allentown, Lehigh County
My Commission Expires May 7, 2018
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Signature of Person Submitting Report: [signed]
Printed Name: Jeffrey Dziwoski
Area Code: 610 Daytime Telephone Number: 5045136

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 5 day of May 2017

Signature [signed]

My commission expires: 07 2018 (MO. DAY YR.)

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
Amanda P. Hernandez, Notary Public
City of Allentown, Lehigh County
My Commission Expires May 7, 2018
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Signature of Candidate: [signed]
Printed Name: Cynthia Mota
Area Code: (484) Daytime Telephone Number: 5535830

Board of Elections of Lehigh County
Lehigh County Government Center
17 S. 7th St.
Allentown, PA 18101-2400

DSEB-502 (7-99)

SCHEDULE I

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
Friends OF Cyntnia Mota	From 01/01/17 To 05/01/17

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - $50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the Reporting Period	(1)	$ 230,00

2. CONTRIBUTIONS $50.01 TO $250.00 (FROM PART A AND PART B)		
Contributions Received from Political Committees (Part A)		$ 400,00
All Other Contributions (Part B)		$ 250,00
TOTAL for the Reporting Period	(2)	$ 650,00

3. CONTRIBUTIONS OVER $250.00 (FROM PART C AND PART D)		
Contributions Received from Political Committees (Part C)		$ 500,00
All Other Contributions (Part D)		$ 2050,00
TOTAL for the Reporting Period	(3)	$ 2550,00

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.)*	$ 3430,00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

$50.01 TO $250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from $50.01 to $250.00 in the reporting period.

Name of Filing Committee or Candidate	Reporting Period
Friends of Cynthia Mota	From 1/1/17 To 5/1/17

Full Name of Contributing Committee / Mailing Address / City, State, Zip Code (Plus 4)	MO.	DAY	YEAR	AMOUNT
Full Name of Contributing Committee: Insulators and Allied Workers Local union 23	3	30	2017	$ 250
Mailing Address: 3263 SchoolHouse Rd				$
City: middleTown State: PA Zip Code (Plus 4): 17057 -				$
Full Name of Contributing Committee:				$
Mailing Address:				$
City: State: Zip Code (Plus 4): -				$
Full Name of Contributing Committee:				$
Mailing Address:				$
City: State: Zip Code (Plus 4): -				$
Full Name of Contributing Committee:				$
Mailing Address:				$
City: State: Zip Code (Plus 4): -				$
Full Name of Contributing Committee:				$
Mailing Address:				$
City: State: Zip Code (Plus 4): -				$
Full Name of Contributing Committee:				$
Mailing Address:				$
City: State: Zip Code (Plus 4): -				$
Full Name of Contributing Committee:				$
Mailing Address:				$
City: State: Zip Code (Plus 4): -				$
Full Name of Contributing Committee:				$
Mailing Address:				$
City: State: Zip Code (Plus 4): -				$

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL $ 250.00

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PART B

PAGE _____ OF _____

ALL OTHER CONTRIBUTIONS

$50.01 TO $250.00

Use this Part to itemize all other contributions with an aggregate value from $50.01 to $250.00 in the reporting period. (Exclude contributions from political committees reported in Part A.)

Name of Filing Committee or Candidate	Reporting Period
Friends OF CYNTHIA MOTA	From 111117 To 511117

Full Name of Contributor / Mailing Address / City / State / Zip Code (Plus 4)	DATE (MO. DAY YEAR)	AMOUNT
Martin A. Estrada 25 South 15th ST Allentown PA 18102 -	3 28 2017	$ 100.00
Mario R Peralta 27 N 12th ST Allentown PA 18101 -	3 28 2017	$ 100.00
Joseph P Lias 6476 Overlook RD Orefield PA 18069 -	4 10 2017	$ 200.00
		$
		$
		$
		$
		$
		$
		$
		$
		$

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL $ 400

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PART C

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

OVER $250.00

Use this Part to itemize only contributions received from political committees with an aggregate value over $250.00 in the reporting period.

Name of Filing Committee or Candidate	Reporting Period
Friends of Cynthia Mota	From 1/1/17 To 5/1/17

Contributing Committee	DATE (MO. / DAY / YEAR)	AMOUNT
Full Name of Contributing Committee: IBEW Local Union 375	3 / 28 / 2017	$ 500.00
Mailing Address: 1201 West Liberty St		$
City: Allentown State: PA Zip Code (Plus 4): 18102 –		$
Full Name of Contributing Committee		$
Mailing Address		$
City State Zip Code (Plus 4) –		$
Full Name of Contributing Committee		$
Mailing Address		$
City State Zip Code (Plus 4) –		$
Full Name of Contributing Committee		$
Mailing Address		$
City State Zip Code (Plus 4) –		$
Full Name of Contributing Committee		$
Mailing Address		$
City State Zip Code (Plus 4) –		$
Full Name of Contributing Committee		$
Mailing Address		$
City State Zip Code (Plus 4) –		$
Full Name of Contributing Committee		$
Mailing Address		$
City State Zip Code (Plus 4) –		$
Full Name of Contributing Committee		$
Mailing Address		$
City State Zip Code (Plus 4) –		$

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

PAGE TOTAL $ 500

PART D

ALL OTHER CONTRIBUTIONS

PAGE _____ OF _____

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	Reporting Period
Friend's of Cynthia Mota	From 1/1/17 To 5/1/17

Full Name of Contributor	Mailing Address	City	State	Zip Code (Plus 4)	Employer Name	Occupation	Employer Mailing Address/Principal Place of Business	DATE (MO. / DAY / YEAR)	AMOUNT
Juan Veloz - Portorreal	1924 Hamilton St	Allentown	PA	18104 -	Los Primasos Tire Shop	Owner	105 Walnut St Allentown PA	3 / 28 / 2017	$ 300.00
George Gautreaux	1474 N High Land St	Allentown	PA	18104 -	Our Little Einsteins	Owner	406 W 13th St Allentown 18102	3 / 20 / 2017	$ 500.00
Cynthia Mota	2604 Appel St	Allentown	PA	18103 -				3 / 1 / 2017	$ 750.00
Cynthia Mota	2604 Appel St	Allentown	PA	18103 -				3 / 22 / 2017	$ 500.00
				-					$

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

PAGE TOTAL $ 2050.00

SCHEDULE II PAGE _____ OF _____

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	Reporting Period
Friends OF Cynthia Mota	From 1/1/17 To 5/1/17

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

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

3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER $250.00 (FROM PART G)		
TOTAL for the Reporting Period	(3)	$ 650.00

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD *(Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)*	$ 650.00

PAGE ______ OF ______

SCHEDULE II
PART G

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER $250.00

Name of Filing Committee or Candidate	Reporting Period
Friends of cyntnia mota	From 1/1/17 To 5/1/17

Contributor	Date (MO / DAY / YEAR)	Amount
Full Name of Contributor: The Logos graPhics signs and Printing	05 / 01 / 2017	$ 350.00
Mailing Address: 444 alBert Frost CT		$
City: Kissimmee · State: FL · Zip Code (Plus 4): 34759 –		$
Employer of Contributor: enny cruz	Occupation: owner	
Employer Mailing Address/Principal Place of Business: 444 Albert Frost RD Kissimmee FL 34759	Description of Contribution: WeB design / Logo Design	
Full Name of Contributor: Betina Morelos	3 / 28 / 2017	$ 300
Mailing Address: 1836 Belleview cir		$
City: White Hall · State: PA · Zip Code (Plus 4): 18052 –		$
Employer of Contributor: Reaction Associates	Occupation: owner	
Employer Mailing Address/Principal Place of Business: 233 Hamilton ST Allentown PA	Description of Contribution: Venue and Food	
Full Name of Contributor:		$
Mailing Address:		$
City: · State: · Zip Code (Plus 4): –		$
Employer of Contributor:	Occupation:	
Employer Mailing Address/Principal Place of Business:	Description of Contribution:	
Full Name of Contributor:		$
Mailing Address:		$
City: · State: · Zip Code (Plus 4): –		$
Employer of Contributor:	Occupation:	
Employer Mailing Address/Principal Place of Business:	Description of Contribution:	
Full Name of Contributor:		$
Mailing Address:		$
City: · State: · Zip Code (Plus 4): –		$
Employer of Contributor:	Occupation:	
Employer Mailing Address/Principal Place of Business:	Description of Contribution:	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

PAGE TOTAL
$ 650.00

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SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Friends of cyntuia mora	From 1/1/17 To 5/1/17

To Whom Paid	Mailing Address	City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount	Description of Expenditure
Advantage Pep	2285 Schoenersville rd	Bethlehem	PA	18017 –	03	28	2017	$ 750.00	Political payment, Field Steffer,
LV Print center/Herrin's Signs	1701 union Blvd Ste 114	Allentown	PA	18109 –	3	28	2017	$ 1048.68	Yard signs, Palm cards
Lehigh county Democratic Committee	PO Box 3142	Wescoville	PA	18106 –	3	1	2017	$ 200.00	Vote builder
Advantage Pep	2285 Schoenersville Rd	Bethlehem	PA	18017 –	2	1		$ 500.00	Initial Political Planning
				–				$	
				–				$	
				–				$	
				–				$	

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

PAGE TOTAL $ 2498.68

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	Reporting Period
Friends of Cynthia Mota	From 1/1/2017 To 5/1/2017

Field	Entry 1	Entry 2	Entry 3	Entry 4	Entry 5	Entry 6
Name of Creditor	Cynthia Mota					
Mailing Address	2604 Appel St					
City	Allentown					
State	Pa					
Zip Code (Plus 4)	18103	–	–	–	–	–
Date Debt Incurred (Mo./Day/Year)	3 / 22 / 2017					
Description of Debt	Loan to Committee Bills pd.					
Outstanding Balance of Debt	$ 1200.00	$	$	$	$	$

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

PAGE TOTAL $ 1200.00

DSEB-502 (7-99)