

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 Jeremy Binder						
STREET ADDRESS 1553 W Turner Street						
CITY Allentown			STATE PA		ZIP CODE 18102	
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE Allentown City Council		DISTRICT NO.	PARTY DEM	DATE OF ELECTION MO. DAY YEAR 11 04 2025
6TH TUESDAY PRE-PRIMARY		2ND FRIDAY PRE-PRIMARY		30 DAY POST-PRIMARY		6TH TUESDAY PRE-ELECTION
2ND FRIDAY PRE-ELECTION		30 DAY POST-ELECTION <input checked="" type="checkbox"/>		ANNUAL REPORT		
DATES OF REPORTING PERIOD		MO. DAY YEAR 10 24 25		TO MO. DAY YEAR 12 4 25		
CASH BALANCE AT END OF REPORTING PERIOD: \$ 0.00						
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 1000.00						
AMENDMENT REPORT?		YES		NO		
TERMINATION REPORT?		YES		NO		
FOR OFFICE USE ONLY						

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's 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.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR 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
4th DAY OF December
YOLANDA PINTO - Notary Public
Lehigh County
My Commission Expires November 24, 2028
Commission Number 1199621

SIGNATURE OF PERSON SUBMITTING REPORT
Jeremy Binder
PRINTED NAME
225-7503
DAYTIME TELEPHONE NUMBER

PART II -

If 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
DAY OF 20
SIGNATURE
MY COMMISSION EXPIRES MO. DAY YR.
SIGNATURE OF CANDIDATE
PRINTED NAME
AREA CODE
DAYTIME TELEPHONE NUMBER