

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		093-52-8484		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											
Cheryl Johnson Watts											
STREET ADDRESS											
1835 W Tremont Street											
CITY				STATE		ZIP CODE					
Allentown				PA		18104-					
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE				DISTRICT NO.		PARTY		DATE OF ELECTION	
6TH TUESDAY PRE-PRIMARY		Mayor Allentown City								MO. DAY YEAR	
2ND FRIDAY PRE-PRIMARY										05 21 2019	
30 DAY POST-PRIMARY										FOR OFFICE USE ONLY	
6TH TUESDAY PRE-ELECTION										ELECTION BOARD	
2ND FRIDAY PRE-ELECTION										LEHIGH COUNTY	
30 DAY POST-ELECTION										JUN 20 AM 11:07	
ANNUAL REPORT										RECEIVED	
		DATES OF REPORTING PERIOD				MO. DAY YEAR		TO		MO. DAY YEAR	
						05 07 2019		TO		06 10 2019	
		CASH BALANCE AT END OF REPORTING PERIOD:				\$		0			
		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 -

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

20 DAY OF June 2019

Signature of Cheryl L. Johnson

Commonwealth of Pennsylvania

NOTARIAL SEAL

Mona M Saff, Notary Public

Allentown City, Lehigh County

My Commission Expires January 12, 2020

Signature of Cheryl Johnson Watts

PRINTED NAME

433-2307

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

20 DAY OF June 2019

Signature of Candidate

PRINTED NAME

MY COMMISSION EXPIRES

MO. DAY YR.

AREA CODE

DAYTIME TELEPHONE NUMBER