Commonwealth of Pennsylvania

CAMPAIGN FINANCE REPORT

PAGE 1 OF (COVER PAGE)

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

	mittee, Candidate or	Lohbula	1:	Report Filed By:	CANDIDATE	' ×	COMM	NITTEE	2.	LOE	BYIST
Street Address:	Samutate Of	LODDYIS	NAT	L. H	IMANI	L	11144			1	9,13,
GUNUT Address:											
City:					I FADOW S	TRE	ET				
				ENTOW			Zip Co	de:			
TYPE OF REPORT	PRE-PRIMARY	1.	2ND FRIDA	1Y 2.	30 DAY	3.	18102 -				
	6TH TUESDAY	4.	PRE-PRIMA 2ND FRIDA	1212	POST PRIMARY		REPORT?		YES		NO
(place X to the right of	ANNUAL	7.	PRE-ELECT		POST ELECTION	6.	TERMINA REPORT?		YES	X	NO
report type)	REPORT	'X	FEAR	2018	FILING METHOD		PAPE	R	×	DISK	ETTE
Name of Office Soug					DATE OF ELECT	ION	District	Jan Sand	or transmit	100	100
MAYOR -	CITY of A	ALLE	NOWA	4	MO. DAY YEA	4177	Number	Office		Party Code	Cour
							- 1				
Stamp management		1372	l sal	THE STATE OF THE S		_	AL				FOR CO
Summary of Re and Expenditure	eceipts es from:	Mo	I 20	AR	MO. DAY YEA		F	OR OFF	ICE L	JSE O	NLY
	Forward From La	et Par		-10	15 31 5016	8					
. Total Monetary (Contributions and f	Section	ort O :	\$	0,00						
. Total Funds Avai	lable (Sum of Line	racalh(od B)		0,00						
	es (From Schedule			\$	0,00						
Ending Cash Balance (Subtract Line D from Line C)					596.32						
Value of In-Ki-s	Contail :	D troi	n Line C)	\$	594.32	>					
Or III-KING	Contributions Red	ceived	(From Schedu	le II) \$	0,00						
Unpaid Dahte and	. Unpaid Debts and Obligations (From Schedule IV)										
Unpaid Debts and		-									
	CUPSE TO SEE		AF	FIDAVIT SEC	CTION	3.000	eyan.	To be seen	No.	-11-12	Contraction of the last
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Department of State Bureau of Commissions, Elections and Legislation 210 North Office Bullding Harrisburg, PA 17120-0029 (717) 787-5280

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SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing C	Committee or Candidate			Tr		Desired		
	NAT L. HYM	۵ م			rom	Period	81116/31 ot	
						-		
To Whom Paid	HYMAN FOR MA	YOR		MO.	DAY 30	YEAR	Amount \$ 596.32	
Mailing Address	727 N. MEADO	POSET	Description of Expenditure					
City		Zip Code (Plus 4)	C	A MT	AILA	1 Contribution		
	ALLEHTOWN	M	18105-					
To Whom Peid				MO.	DAY	YEAR	Amount \$	
Mailing Address				Descript	ion of Exp	enditure		
City		State	Zip Code (Plus 4)					
To Whom Paid				MO.	DAY	YEAR	Amount	
Mailing Address				Dascrinti	ion of Exp		\$	
Class				Descripti	1011 UI EAP	enaiture		
City		State	Zip Code (Plus 4)					
To Whom Paid		-		MO.	DAY	YEAR	Amount	
Mailing Address							\$	
- 100,000				Descripti	on of Exp	enditure		
City		State	Zip Code (Plus 4)			=====		
To Whom Paid				MO.	DAY	YEAR	Amount	
Mailing Address				Descripti	on of Exp	enditure	\$	
City		State	Zip Code (Plus 4)					
			-					
To Whom Paid		28.00		MO.	DAY	YEAR .	Amount	
Mailing Address				Descripti	on of Exp	enditure	\$	
City		Letate	Zip Code (Plus 4)	177		517-70°		
		State	Zip Code (Plus 4)					
To Whom Paid				MO.	DAY	YEAR	Amount	
Mailing Address				Descripti	on of Expe	and time	\$	
City					Oli Oli Boy	enartura		
XXXXX		State	Zip Code (Plus 4)					
To Whom Paid				MO.	DAY	YEAR	Amount	
Mailing Address		==					\$	
City				Description	on of Expe	anditura		
5,1,		State	Zip Code (Plus 4)					
						_		
Enter Grand T	otal of Expenditures on Pa	1ge 1, [Report Cover Pa	age, Ite	m D.		PAGE TOTAL \$ 596.31	
							14 0.0.24	