

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

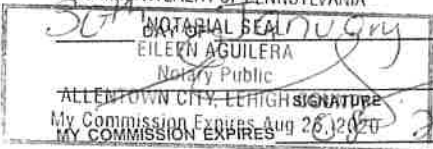
File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

| | | | | | | |
|--|---|--|--------------|---|------------------------------------|-----------------------------------|
| 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 <i>Courtney A. Robinson</i> | | | | | | |
| STREET ADDRESS <i>1507 West Turner St.</i> | | | | | | |
| CITY <i>Allentown</i> | | STATE <i>PA</i> | | ZIP CODE <i>18102</i> | | |
| TYPE OF REPORT (CHECK ONE) 6TH TUESDAY PRE-PRIMARY <input type="checkbox"/> 2ND FRIDAY PRE-PRIMARY <input type="checkbox"/> 30 DAY POST-PRIMARY <input type="checkbox"/> 6TH TUESDAY PRE-ELECTION <input type="checkbox"/> 2ND FRIDAY PRE-ELECTION <input type="checkbox"/> 30 DAY POST-ELECTION <input type="checkbox"/> ANNUAL REPORT <input checked="" type="checkbox"/> | NAME OF OFFICE SOUGHT BY CANDIDATE <i>Allentown City Council - 2 year term</i> | | DISTRICT NO. | PARTY <i>DEM</i> | DATE OF ELECTION | |
| | | | | | MO. | DAY |
| | | | | | 11 | 7 |
| | | | | | YEAR <i>2017</i> | |
| | FOR OFFICE USE ONLY | | | | | |
| | <div style="writing-mode: vertical-rl; transform: rotate(180deg);"> RECEIVED 2018 JAN 31 PM 2:25 ELECTION BOARD OF LEHIGH COUNTY </div> | | | | | |
| | | | | | | |
| DATES OF REPORTING PERIOD MO. DAY YEAR TO MO. DAY YEAR <i>11 28 2017 TO 12 31 2017</i> | | CASH BALANCE AT END OF REPORTING PERIOD: \$ <i>0</i> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <i>0</i> | | | | |
| | | AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> | | | | |
| | | TERMINATION REPORT? YES <input type="checkbox"/> 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.

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|--|--|
| 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  DAY OF <i>Jan</i> 20 <i>18</i> SIGNATURE MY COMMISSION EXPIRES <i>Aug 26</i> 20 <i>20</i> MO. DAY YR. | SIGNATURE OF PERSON SUBMITTING REPORT <i>Courtney A. Robinson</i> PRINTED NAME <i>Courtney A. Robinson</i> AREA CODE <i>484</i> DAYTIME TELEPHONE NUMBER <i>951-7066</i> |

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

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|--|--|
| 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 _____ |