

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 <u>Joshua Siegel</u>								
STREET ADDRESS <u>1314 E Woodlawn St, Apt 204</u>								
CITY <u>Allentown</u>			STATE <u>PA</u>		ZIP CODE <u>18109 - 3475</u>			
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE <u>City Council</u>		DISTRICT NO. <u>At large</u>	PARTY <u>Dem</u>	DATE OF ELECTION		
						MO.	DAY	YEAR
6TH TUESDAY PRE-PRIMARY		1.				5		
2ND FRIDAY PRE-PRIMARY		2.				19		
30 DAY POST-PRIMARY		3.				2019		
6TH TUESDAY PRE-ELECTION		4.						
2ND FRIDAY PRE-ELECTION		5.						
30 DAY POST-ELECTION		6.						
ANNUAL REPORT		7.						

DATES OF REPORTING PERIOD		MO.		DAY		YEAR		TO		MO.		DAY		YEAR	
		1		1		18				12		31		18	

CASH BALANCE AT END OF REPORTING PERIOD:		\$	<u>0</u>
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$	<u>0</u>

AMENDMENT REPORT?	YES		NO	<input checked="" type="checkbox"/>
TERMINATION REPORT?	YES		NO	<input checked="" type="checkbox"/>

FOR OFFICE USE ONLY	
RECEIVED 2019 JAN 30 PM 2:34 ELECTION BOARD OF LEHIGH COUNTY	

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 <u>30th</u> DAY OF <u>January</u> 20 <u>19</u> <u>Jill Orlosky</u> SIGNATURE MY COMMISSION EXPIRES <u>December 9, 2021</u> Notary Seal Jill Orlosky, Notary Public Day Lehigh County	<u>Joshua Siegel</u> SIGNATURE OF PERSON SUBMITTING REPORT <u>Joshua Siegel</u> PRINTED NAME <u>18109-3475</u> <u>484-882-1463</u> AREA CODE 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 _____