

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 Cynthia Mota					
STREET ADDRESS 2604 Apple St					
CITY Allentown		STATE PA	ZIP CODE 18103		
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY	DATE OF ELECTION	
	Allentown City Council		Dem	MO. 11	DAY 07 YEAR 2017
6TH TUESDAY PRE-PRIMARY	DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY		
2ND FRIDAY PRE-PRIMARY	MO. DAY YEAR 1 1 2018 TO 12 31 2018		<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> RECEIVED 2019 JAN 30 PM 12:57 ELECTION BOARD OF LEHIGH COUNTY </div>		
30 DAY POST-PRIMARY					
6TH TUESDAY PRE-ELECTION					
2ND FRIDAY PRE-ELECTION					
30 DAY POST-ELECTION					
ANNUAL REPORT <input checked="" type="checkbox"/>	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 <input type="checkbox"/> NO <input type="checkbox"/> TERMINATION REPORT? YES <input type="checkbox"/> NO <input 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

28th DAY OF **January** **2019**
Yamela J. Taveras
SIGNATURE
MY COMMISSION EXPIRES **4/21/2020**
MO. DAY YR.

Jeffrey Dzikoski
SIGNATURE OF PERSON SUBMITTING REPORT
Jeffrey Dzikoski
PRINTED NAME
610 **5045136**
AREA CODE DAYTIME TELEPHONE NUMBER

COMMONWEALTH OF PENNSYLVANIA

NOTARIAL SEAL
YAMELISA J TAVERAS

Notary Public
CITY OF ALLENTOWN, LEHIGH COUNTY
My Commission Expires Apr 21, 2020

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

28th DAY OF **January** **2019**
Yamela J. Taveras
SIGNATURE
MY COMMISSION EXPIRES **4/21/2020**
MO. DAY YR.

Cynthia Mota
SIGNATURE OF CANDIDATE
Cynthia Mota
PRINTED NAME
484 **553-5830**
AREA CODE DAYTIME TELEPHONE NUMBER

COMMONWEALTH OF PENNSYLVANIA

NOTARIAL SEAL
YAMELISA J TAVERAS

Notary Public
CITY OF ALLENTOWN, LEHIGH COUNTY
My Commission Expires Apr 21, 2020