

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 Friends of Joshua Siegel					
STREET ADDRESS 1314 E Woodlawn St, Apt 204					
CITY Allentown		STATE PA	ZIP CODE 18109 - 3475		
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 City Council		DISTRICT NO. At large	PARTY Dem	
	DATE OF ELECTION				
	MO. DAY YEAR		MO. DAY YEAR		
	1 1 18		12 31 18		
	DATES OF REPORTING PERIOD				
	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 <input type="checkbox"/> NO <input checked="" type="checkbox"/>					
TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>					
FOR OFFICE USE ONLY					

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		SIGNATURE OF PERSON SUBMITTING REPORT	
30th DAY OF January 2019		Emily E Carter	
SIGNATURE		PRINTED NAME	
Emily Carter			
MY COMMISSION EXPIRES		AREA CODE DAYTIME TELEPHONE NUMBER	
207 807-2015			

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		SIGNATURE OF CANDIDATE	
30th DAY OF January 2019		Joshua Siegel	
SIGNATURE		PRINTED NAME	
Joshua Siegel			
MY COMMISSION EXPIRES		AREA CODE DAYTIME TELEPHONE NUMBER	
18109-3475 484-892-1463			