

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																		
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST J. F. GLAZIER																							
STREET ADDRESS 2915 Parkers Blvd																							
CITY Allentown		STATE PA	ZIP CODE 18004 - 9325																				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY																		
1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION <input checked="" type="checkbox"/> 7. ANNUAL REPORT		Allentown City Controller			D																		
		DATES OF REPORTING PERIOD		DATE OF ELECTION																			
		<table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>10</td><td>24</td><td>23</td></tr> </table> TO <table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>12</td><td>7</td><td>23</td></tr> </table>		MO.	DAY	YEAR	10	24	23	MO.	DAY	YEAR	12	7	23	<table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>11</td><td>7</td><td>23</td></tr> </table>		MO.	DAY	YEAR	11	7	23
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10	24	23																					
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12	7	23																					
MO.	DAY	YEAR																					
11	7	23																					
		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>																					
		<table border="1"> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> </table>				AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>	TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>										
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TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>																				
AFFIDAVIT SECTION																							

Commonwealth of Pennsylvania - Notary Seal
 Barbara J. Azar-Noble, Notary Public
 Lehigh County
 My Commission expires September 14, 2026
 Commission number 1004889

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
7 DAY OF Dec 2023

SIGNATURE OF PERSON SUBMITTING REPORT
J. F. GLAZIER
 PRINTED NAME
J. F. GLAZIER
 AREA CODE 610 DAYTIME TELEPHONE NUMBER 657-8507

MY COMMISSION EXPIRES 9 MO. 14 DAY 26 YR.

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 OF CANDIDATE

 PRINTED NAME

 AREA CODE _____ DAYTIME TELEPHONE NUMBER _____

MY COMMISSION EXPIRES _____ MO. _____ DAY _____ YR.