

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 <sup>2</sup> <input type="checkbox"/>	LOBBYIST <sup>3</sup> <input type="checkbox"/>					
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Tino Babayan										
STREET ADDRESS 26 S. Filbert St.										
CITY Allentown		STATE PA	ZIP CODE 18109 -							
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY	DATE OF ELECTION						
6TH TUESDAY PRE-PRIMARY 1.	Allentown City Council	4	Dem	MO.	DAY	YEAR				
2ND FRIDAY PRE-PRIMARY 2. <input checked="" type="checkbox"/>				DATES OF REPORTING PERIOD		MO.	DAY	YEAR		
30 DAY POST-PRIMARY 3.				11	1	23	TO	05	01	23
6TH TUESDAY PRE-ELECTION 4.				CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u>		FOR OFFICE USE ONLY ELECTION BOARD OF LEHIGH COUNTY 2023 MAY -4 PM 2:41				
2ND FRIDAY PRE-ELECTION 5.				TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>						
30 DAY POST-ELECTION 6.				AMENDMENT REPORT?	YES	NO				
ANNUAL REPORT 7.				TERMINATION REPORT?	YES	NO				

**AFFIDAVIT SECTION**

**PART I -**

If statement is filed on behalf of a Political Committee or Candidates' 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 Commonwealth of Pennsylvania - Notary Seal Rosangel Bianco, Notary Public Lehigh County My commission expires June 22, 2024 MY COMMISSION NUMBER 1367826 R Bianco 5/4/23	SIGNATURE OF PERSON SUBMITTING REPORT Tino Babayan PRINTED NAME 484 347-6504 AREA CODE DAYTIME TELEPHONE NUMBER
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**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 _____
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RECEIVED