

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	1. <input checked="" type="checkbox"/>	COMMITTEE	2.	LOBBYIST	3.		
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Joe Davis										
STREET ADDRESS 1035 N. Tacoma St.										
CITY Allentown, Pa			STATE Pa	ZIP CODE 18109-1654						
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION				
6TH TUESDAY PRE-PRIMARY	1.					MO.	DAY	YEAR		
2ND FRIDAY PRE-PRIMARY	2.									
30 DAY POST-PRIMARY	3.									
6TH TUESDAY PRE-ELECTION	4.									
2ND FRIDAY PRE-ELECTION	5.									
30 DAY POST-ELECTION	6.									
ANNUAL REPORT	7. <input checked="" type="checkbox"/>									
		DATES OF REPORTING PERIOD		MO.	DAY	YEAR	TO	MO.	DAY	YEAR
				01	01	15		12	31	15
		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		NO	<input checked="" type="checkbox"/>			
		TERMINATION REPORT?		YES		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
 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 DO 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					
27th DAY OF January 2016					
<i>[Signature]</i>	SIGNATURE	<i>Joseph J. Davis</i>	SIGNATURE OF PERSON SUBMITTING REPORT		
		Joseph J. Davis	PRINTED NAME		
MY COMMISSION EXPIRES 06/01/2016	MO.	DAY	YR.	610	434-1297
				AREA CODE	DAYTIME TELEPHONE NUMBER

COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL
 Wendy J. Repper, Notary Public
 City of Bethlehem, Lehigh County
 My Commission Expires June 1, 2016
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

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	_____	SIGNATURE OF CANDIDATE		
_____		_____	PRINTED NAME		
MY COMMISSION EXPIRES _____	MO.	DAY	YR.	_____	_____
				AREA CODE	DAYTIME TELEPHONE NUMBER