## 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.

PLEN IDENTIFICATION NUMBER		PRIPORT PILID	CUIDENTE IL	COMMITTEE 1 LEMENTS 1
NAME OF PILING COMMETTER, I		OH RIGHALF OF		COMMETTEE LONGYMET
STREET ADDRESS	Imberry 1). Vekz	•		
1030	N. Lenst.			
Muntou	n	BTATE PA	b	8704 —
TYPE OF REPORT	NAME OF OFFICE BOUGHT BY CANDIDATE	DESTRUCT NO.	PARTY	DATE OF ELECTION
(CHECK ONE)	Alensoun city Counci	1	DEM	30. DAY YEAR 5 21 2013
250 PREDAY 2	DATES OF MO. DAY YEAR REPORTING 5 7 2013 TO	Ma DAY TEAR V 10 2013		FOR OFFICE USE ONLY
30 DAY POST-PREMARY  6TH TUESDAY PRE-ELECTION  4.	CASH BALANCE AT END OF REPORTING PERIOD:	s - 376.	82	DI3 JUN 20 ELECTION OF LEHIGH
200 FROAY PRE-ELECTION	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIE AT THE END OF REPORTING PERIOD	es s		20 PH I:
30 DAY POST-PLECTION 7.	AMENDMENT YES	NO		7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
REPORT	TERMINATION REPORT? YES	NO		
ART I - statement is filed on statement is filed on	behalf of a Political Committee or Car	WIT SECTION  ididates's Committe must sign here.	ee, the Trea	surer must sign here.
SWEAR (OR AFFIRM) THAT TH	behalf of a Contributing Lobbyist, the  E AGGREGATE RECEIPTS OR DISSURSEMENTS OR LUBB  FTY DOLLARS (\$250,00) AND THIS REPORT IS TO DE	Proposition of the control of the co		5900 INDICATED ABOVE DID NOT
DAY OF	REBED BEFORE ME THIS	E BEST OF MY KNOWLEDGE	AND BEZIEF, TRU	E, CORRECT AND COMPLETE.
COMMONWEALTH OF NOTARIAL S TIMOTHY ANDREW BEN City of Allentown, Le	EAL Public Z2 (4	010 AREA CODE	MLEIM PRINTED HA	4608
My Commission Expires Se	ptember 27, 2014	· · · · · · · · · · · · · · · · · · ·	3	TELEPHONE NUMBER
I SWEAR (OR AFFIRM) THA	chalf of a Candidate's Authorized Con			
JUNE 3, 1937 (P.L. 133 SWORN TO AND SUBSCRI	T TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS P 3, No. 320) AS AMENDED.	OUTICAL COMMITTEE HAS I	NOT VIOLATED AN	Y PROVISIONS OF THE ACT OF
DAY OF	BED BEFORE ME THIS  20	SIG	NATURE OF CAN	IDIDATE
	SIGNATURE		PRINTED NAME	E
MY COMMISSION EXPIRES	MO. DAY YE.	AREA CODE	DAYTIME TI	ELEPHONE NUMBER

Department of State Bureau of Commissions, Elections and Legislation 303 North Office Building Harrisburg, PA 17120-0029 (717) 787-5280