

CAMPAIGN FINANCE REPORT

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number:		Report Filed By:		CANDIDATE <input checked="" type="checkbox"/>		COMMITTEE <input type="checkbox"/>		LOBBYIST <input type="checkbox"/>		
Name of Filing Committee, Candidate or Lobbyist: <i>Cynthia X Motz</i>										
Street Address: <i>2604 Appel St</i>										
City: <i>Allentown</i>					State: <i>PA</i>		Zip Code: <i>18103 -</i>			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY		2ND FRIDAY PRE-PRIMARY		30 DAY POST-PRIMARY		AMENDMENT REPORT		YES	NO
	8TH TUESDAY PRE-ELECTION		2ND FRIDAY PRE-ELECTION		30 DAY POST-ELECTION		TERMINATION REPORT		YES	NO
	ANNUAL REPORT		YEAR		FILING METHOD CHECK ONE		PAPER		DISKETTE	
Name of Office Sought by Candidate: <i>Allentown City Council</i>					DATE OF ELECTION		District Number	Office Code	Party Code	County Code
					MO.	DAY	YEAR			
					<i>11</i>	<i>25</i>	<i>2025</i>	(SEE INSTRUCTIONS FOR CODES)		
Summary of Receipts and Expenditures from:										
			MO.	DAY	YEAR	To	MO.	DAY	YEAR	
						<i>12</i>	<i>31</i>	<i>25</i>		
A. Amount Brought Forward From Last Report		\$		<i>0</i>						
B. Total Monetary Contributions and Receipts (From Schedule I)		\$		<i>0</i>						
C. Total Funds Available (Sum of Lines A and B)		\$		<i>0</i>						
D. Total Expenditures (From Schedule III)		\$		<i>0</i>						
E. Ending Cash Balance (Subtract Line D from Line C)		\$		<i>0</i>						
F. Value of In-Kind Contributions Received (From Schedule II)		\$		<i>0</i>						
G. Unpaid Debts and Obligations (From Schedule IV)		\$		<i>0</i>						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules, or paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this *28th* day of *JANUARY* 20 *24*

Signature: *[Signature]*
My commission expires *9* MO. *27* DAY *26* YR.

Signature of Person Submitting Report: *[Signature]*
Printed Name: *Cynthia X Motz*
Area Code: *610* Daytime Telephone Number: *553-5830*

PART II - If this is a report of a Candidate's Authorized Committee, candidate shall 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: _____