Reset Form	R	eset	F	orm
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Print Form



Commonwealth of Pennsylvania - Campaign Finance Report

		(Note: T			ist be clear a		e. It sho	uld be type	d)			
Filer Identification Number	F			port Filed Mark X)	By Candi	date	X	Committee			Lobbyist	
Name of Filing Com Lobbyist	ımittee, Ca		Olg	ga Negron								
Street Address			130	06 E 5th St	reet							
City		State	PA		Zip Code	18015						
Type of Report (Plac	e x under	report type)								Au		
1-6 th Tuesday 2-2 nd Friday 3-30 Day Post Pre-Primary Primary				th Tuesday - Election	5- 2 nd Friday Pre- Electio	£ 100 %	Day Post on	7- Annual	Special 2 nd Pre-Election		Special 30 Day Post-Election	
Date Of Election (MM/DD/YYYY)		05/19/2015	Ye	ar	2015	Amen Repor	dment t		Termination Report			
Summary of Receip	ts and	From Date		To Dat	e dant Cal			For	Office Use On	ly	:/ */ 5:1.	
		10/19/2015										
A. Amount Brought	Forward F	rom Last Report	1	\$	0							
B. Total Monetary ((From Schedule I)		+	\$ 0					Jul.	E 01-3			
C. Total Funds Avail (Sum of Lines A and	B)			\$	-0-							
D. Total Expenditure (From Schedule III) E. Ending Cash Balar			\$	-0-) 3	1		
(Subtract Line D from F. Value of In-Kind C	n Line C)		\$	-0-					ات. است	(°')		
(From Schedule II)		va maraka		\$	-0-	· 👊						
G. Unpaid Debts and (From Schedule IV).	-0-											
Part 1- If this is a Comn	ittee report	trazeurar elan ha	ro If	this is a Car	Affidavit S		lee base					
swear (or affirm) that Sworn to and subscribe	this report, i	including the attace this	hed :	schedules or	n paper, is to the	best of m	y knowledg	ge and belief tr	ue, correct and	complete	e.	
			_		-	Signature of Person Submitting report					-	
Signa	iture		-	.1	_			Printed Name	•			
My Commission expires	MO.	DAY YR.	-			Area Code		Day	time Telephone	Number	-	
Part II- If this is a report	of a Candid	ate's Authorized C	omn	nittee, candi	idate shall sign h	ere.						nes
swear (or affirm) that i mended	to the best o	i my knowledge a	na be	eller this poli	rucai committee	nas not vid	plated any	provisions of th	ne Act of June 3.	1937 (P	.L. 1333. NO.3	20) as
												The same
			34							Dank		

COMMONWEALTH OF PENNSYLVANIA

NOTARIAL SEAL
ARIEL REYES
Notary Public
CITY CF BETHLEHEM, NORTHAMPTON COUNTY
My Commission Expires Dec 9, 2018

Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification	ntification 47,2914676				Rep (M	oort Filed ark X)	Вγ	Candid			Comn		-		X	Lobbyist
Name of Filing Committee, Candidate or Lobbyist			Friends of Olga Negron													
Street Address				G.	1300	6 E 5th St	reet							2 22		
City Bethlehem								State	PA		Zip Co	de .	18015			
Type of Report (Place x u	nder r	eport typ	e)									Interest of the			
1- 6 th Tuesday 2- 2 nd Friday 3- 30 Day Post Pre-Primary Pre-Primary Primary			4- 6th Tuesday			5- 2 nd Friday Pre- Election		Day Post on	7- Annua	nual		Special 2 nd Friday Pre-Election		Special 30 Day Post-Election		
		1		1					X	(Г	7		$\overline{}$		<u> </u>
Date Of Election (MM/DD/YYYY)		,	05/19/2	2015	Yea			2015	Amen	dment t	Ē]	Term	ination rt		
Summary of Rec	eipts an	d	From Da	ate	T	To Dat	e		T	0 8	D	For	Office (Use Only	ν.	
Expenditures		1 4	10/19	9/2015	12/01/2015			100						3		
A. Amount Brou	ght Forw	ard F	rom Last	Repor		\$	18.6	55					r ·		טנט	= 1000 ×
B. Total Moneta (From Schedule	1)		ns and Re	eceipts		\$	0								ارا ب	
C. Total Funds Available (Sum of Lines A and B)					3	\$	18.6	5	1) 3	ר ז יד
D. Total Expenditures (From Schedule III)						15.00			1						3	<u></u>
E. Ending Cash Balance (Subtract Line D from Line C)					10	\$	3.65	5	1						r-0	
F. Value of In-Kind Contributions Received (From Schedule II)						-0-									15	
G. Unpaid Debts and Obligations (From Schedule IV)						\$	-0-			2 30 40						
Part 1- If this is a Co				e elee b	ara lé	this is a Ca		Affidavit S		igo boso			- 2			
I swear (or affirm)			including t	he atta	ched s	schedules o	n pape	er, is to the	e best of M	ly knowled	ge and b	eller tr	ue, com	ect and c	omplet	
P 							nersit.	enoridus	a sectiv	Maren and	SANORIA SANORIA	his of t	he Act o	f June 3.	1937 (P	.L. 1333, NO.320) as
Sw																
Му			MEX													434 671

**/ TALTH OF PENNSYLVANIA

NOTARIAL SEAL ARIEL REYES

Statement of Expenditures

Filer Identification Number:	
	47-2914676

Buo					Date [MM/DD/YYYY]	\$	
					11-1-2015	1	15.00
Street Address	Evans St		Description of Expenditure				
em	State	PA	Zip Code	18015	Service Fee	11 (H. G.)	escription of the contract
1		·			Date [MM/DD/YYYY]	\$	
Street Address	,_,_,				Description of Expend	iture	
	State		Zip Code	1	10 10 12 14 12 Pro 10 12 15 To 10 12		And the second second second
	\				Date [MM/DD/YYYY]	\$	
Street Address					Description of Expendi	ture	
	State		Zip Code			2-14-97	Control Valve and Pro-
	<u> </u>	'			Date [MM/DD/YYYY]	\$	
Street Address					Description of Expendit	ure	
	State	<u> </u>	Zip Code	Ĉ		41-7-E	
	<u>'</u>	· · · · · · · · · · · · · · · · · · ·			Date [MM/DD/YYYY]	\$	
Street Address		7			Description of Expendit	ure	
	State		Zip Code				
47 27 28 34 34				*	Date [MM/DD/YYYY]	\$	
Street Address	··				Description of Expenditu	ıre	
	State		Zip Code			- Sec. 152 - 1	System is superioral
					Date [MM/DD/YYYY]	\$	
Street Address			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Description of Expenditu	re	
	State		Zip Code			09200	HIII. NEO 190
					Date [MM/DD/YYYY]	\$	
Street Address					Description of Expenditu	re	
<u></u>	State		Zip Code			i.i	X Z = 1
	Street Address Street Address Street Address Street Address Street Address Street Address	Street Address Street Address	Street Address Street Address	Street Address Evans St	Street Address Evans St	Street Address Evans St Description of Expending	Street Address Evans St Description of Expenditure