

COMMONWEALTH OF PENNSYLVANIA  
**CAMPAIGN FINANCE STATEMENT**

File this in lieu of a full report *only* if aggregate receipts, expenditures, or liabilities do 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 <b>HILLARY G. KWIA TEK</b>							
STREET ADDRESS <b>638 Spring St.</b>							
CITY <b>Bethlehem</b>				STATE <b>PA</b>	ZIP CODE <b>18018</b>		
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION	
6TH TUESDAY PRE-PRIMARY		CITY COUNCIL, CITY OF BETHLEHEM			D	MO.	DAY
2ND FRIDAY PRE-PRIMARY							YEAR
30 DAY POST-PRIMARY							
6TH TUESDAY PRE-ELECTION							
2ND FRIDAY PRE-ELECTION							
30 DAY POST-ELECTION							
ANNUAL REPORT							
		DATES OF REPORTING PERIOD		MO. DAY YEAR		MO. DAY YEAR	
				1 1 24		12 31 24	
		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 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.

MO.	DAY	YR.	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	SIGNATURE OF CANDIDATE
DAY OF 20	PRINTED NAME
SIGNATURE	AREA CODE
MY COMMISSION EXPIRES	DAYTIME TELEPHONE NUMBER
MO. DAY YR.	

Commonwealth of Pennsylvania - Notary Seal  
 DSEB 503 (12) **Kelbrun O Riggs, Notary Public**  
 Northampton County  
 My Commission Expires Sept 18, 2027  
 Commission Number **1352095**

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 If:

Commonwealth of Pennsylvania - Notary Seal  
 DSEB-503 (12) **Kolbrun O Riggs, Notary Public**  
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