

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.	COMMITTEE	2. X	LOBBYIST	3.	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Friends of Kiera Wilhelm									
STREET ADDRESS 126 E. Market Street #6									
CITY Bethlehem			STATE PA	ZIP CODE 18018					
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY	DATE OF ELECTION			
	Bethlehem City Council			-	D	MO.	DAY	YEAR	
6TH TUESDAY PRE-PRIMARY	1.	DATES OF REPORTING PERIOD			MO.	DAY	YEAR	FOR OFFICE USE ONLY	
2ND FRIDAY PRE-PRIMARY	2.	11	27	23	TO	12	31		23
30 DAY POST-PRIMARY	3.								
6TH TUESDAY PRE-ELECTION	4.	CASH BALANCE AT END OF REPORTING PERIOD: \$ 855.05							
2ND FRIDAY PRE-ELECTION	5.	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 0							
30 DAY POST-ELECTION	6. X	AMENDMENT REPORT? YES NO X							
ANNUAL REPORT	7.	TERMINATION REPORT? YES NO X							

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 AND CORRECT.

SWORN TO AND SUBSCRIBED BEFORE ME THIS

29th DAY OF January 2024

Patricia M. Gerander
SIGNATURE

MY COMMISSION EXPIRES 12/30/27
MO. DAY YR.

Commonwealth of Pennsylvania - Notary Public
 Patricia M. Gerander, Notary Public
 Northampton County
 My commission expires December 31, 2027
 Commission number 1054566

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, the 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

MY COMMISSION EXPIRES _____
MO. DAY YR.

SIGNATURE OF CANDIDATE

PRINTED NAME

AREA CODE DAYTIME TELEPHONE NUMBER