

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 :		20240073		Report Filed By :		CANDIDATE		COMMITTEE		✓		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: TAIBA SULTANA													
Street Address: 227 VISTA DRIVE													
City: EASTON						State: PA				Zip Code: 18042			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?		Yes	No	✓		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?		Yes	No	✓		
	ANNUAL REPORT	7.	Year 2024	FILING METHOD () CHECK ONE			PAPER		✓	DISKETTE			
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
						MO	DAY	YEAR					
						11	5	2024					
Summary of Receipts and Expenditures from:						MO	DAY	YEAR	FOR OFFICE USE ONLY				
						1	1	2024					
						3	4	2024					
A. Amount Brought Forward From Last Report						\$ 1,100.00							
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 5,902.00							
C. Total Funds Available (Sum Of Lines A and B)						\$ 7,002.00							
D. Total Expenditures (From Schedule III)						\$ 1,358.50							
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 5,551.50							
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 19,324.00							
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 0.00							

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 filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
TAIBA SULTANA	From: <u>1/1/2024</u> To: <u>3/4/2024</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 252.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 0.00
All Other Contributions (Part B)	\$ 2,900.00
TOTAL for the Reporting Period (2)	\$ 2,900.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 0.00
All Other Contributions (Part D)	\$ 3,000.00
TOTAL for the Reporting Period (3)	\$ 3,000.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.00

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 6,152.00
---	-------------

<div> <div> PART A</div> <div> CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES</div> <div> \$50.01 TO \$250.00</div> <div> Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.</div> </div>							
Name of Filing Committee or Candidate				Reporting Period			
				From:	To:		
				DATE	AMOUNT		
Full Name of Contributing Committee				MO	DAY	YEAR	<div>\$</div> <div>0.00</div>
Mailing Address							
City	State	Zip Code (Plus 4)					

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL	
\$	0.00

PART B

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

**Use this Part to itemize all other contributions with an aggregate value from
\$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A)**

Name of Filing Committee or Candidate TAIBA SULTANA				Reporting Period From: <u>1/1/2024</u> To: <u>3/4/2024</u>			
				DATE		AMOUNT	

Full Name of Contributor MUAZZAM MALIK				MO	DAY	YEAR	\$ 250.00
Mailing Address 4835 BRITTANY HILL				2	13	2024	
City CENTER VALLEY	State PA	Zip Code (Plus 4) 18034					

Full Name of Contributor MATTHEW FORD				MO	DAY	YEAR	\$ 100.00
Mailing Address 3440 HARVARD PL				2	21	2024	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18020					

Full Name of Contributor KAMRAN SIDDIQUI				MO	DAY	YEAR	\$ 100.00
Mailing Address 4012 PAGE STREET				2	23	2024	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18104					

Full Name of Contributor AHMED HASSAN				MO	DAY	YEAR	\$ 200.00
Mailing Address 1630 PENNS CROSSING				2	23	2024	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18104					

Full Name of Contributor MIRZA AHMED				MO	DAY	YEAR	\$ 250.00
Mailing Address 424 GRAY FEATHER WAY				2	23	2024	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18104					

Full Name of Contributor TAIBA SULTANA				MO	DAY	YEAR	\$ 100.00
Mailing Address 227 VISTA DRIVE				2	3	2024	
City EASTON	State PA	Zip Code (Plus 4) 18042					

Full Name of Contributor ARCHANA VERMA			MO	DAY	YEAR	\$ 100.00
Mailing Address 4541 SOMERSET PL SE			1	5	2024	
City BELLEVUE	State WA	Zip Code (Plus 4) 98096				
Full Name of Contributor BIBI YAR			MO	DAY	YEAR	\$ 200.00
Mailing Address 522 IRON STREET			1	6	2024	
City EASTON	State PA	Zip Code (Plus 4) 18042				
Full Name of Contributor IRM BARI			MO	DAY	YEAR	\$ 100.00
Mailing Address 1571 JAKES PL			1	15	2024	
City HELLERTOWN	State PA	Zip Code (Plus 4) 18055				
Full Name of Contributor HELJIT DEOGUN			MO	DAY	YEAR	\$ 250.00
Mailing Address 2775 LOWERWAY			1	12	2024	
City EASTON	State PA	Zip Code (Plus 4) 18040				
Full Name of Contributor JOEL ATKINSON			MO	DAY	YEAR	\$ 100.00
Mailing Address 1116 RUSSELL AVE			1	11	2024	
City FOUNTAIN HILL	State PA	Zip Code (Plus 4) 18015				
Full Name of Contributor MANIJA MOSSSA			MO	DAY	YEAR	\$ 100.00
Mailing Address 5562 SUNFLOWER COURT			1	17	2024	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18040				
Full Name of Contributor JON IRONS			MO	DAY	YEAR	\$ 100.00
Mailing Address 1204 WEST MARKET STREET			1	18	2024	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18018				
Full Name of Contributor SABA AHMED			MO	DAY	YEAR	\$ 100.00
Mailing Address 9688 CRESCENT LANE			1	20	2024	
City BREINIGSVILLE	State PA	Zip Code (Plus 4) 18031				
Full Name of Contributor AMBREEN MUMTAZ			MO	DAY	YEAR	\$ 200.00
Mailing Address 4703 TEN SLEEP LN			1	21	2024	
City FRIENDSWOOD	State TX	Zip Code (Plus 4) 77546				

Full Name of Contributor MOHAMMAD RIAZ			MO	DAY	YEAR	\$ 100.00
Mailing Address 4810 LEXINGTON CT			1	22	2024	
City CENTER VALLEY	State PA	Zip Code (Plus 4) 18034				

Full Name of Contributor JAMAI AHMED			MO	DAY	YEAR	\$ 100.00
Mailing Address 1769 PENNS CROSSING			1	22	2024	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18104				

Full Name of Contributor RAWAN KATZ			MO	DAY	YEAR	\$ 250.00
Mailing Address 1479 SAUCON MEADOW CT			2	4	2024	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18015				

Full Name of Contributor KASI BHASKER			MO	DAY	YEAR	\$ 100.00
Mailing Address 925 S WISTERIA DRIVE			1	25	2024	
City MALVERN	State PA	Zip Code (Plus 4) 19355				

Full Name of Contributor SAMEER Y SETHI			MO	DAY	YEAR	\$ 100.00
Mailing Address 4311 SHADOWSTONE DRIVE			1	23	2024	
City EASTON	State PA	Zip Code (Plus 4) 18040				

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL

\$ 2,900.00

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate	Reporting Period
	From: To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$	0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL	
\$	0.00

PART D
ALL OTHER CONTRIBUTIONS
OVER \$250.00

**Use this Part to itemize all other contributions with an aggregate value of
over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C.)**

Name of Filing Committee or Candidate TAIBA SULTANA	Reporting Period From: <u>1/1/2024</u> To: <u>3/4/2024</u>
---	--

			DATE	AMOUNT
Full Name of Contributor NAGI LATEFA			MO	DAY
Mailing Address 149 WINDERMERE AVE City ALLENTOWN State PA Zip Code (Plus 4) 18104			3	2
			YEAR	2024
			\$ 500.00	
Employer Name			Occupation	
Employer Mailing Address/Principal Place of Business			City	State
			Zip Code (Plus 4)	

Full Name of Contributor RUBINA ALI			MO	DAY
Mailing Address 1060 BAYTOWNE DRIVE City CHAMPAIGN State NJ Zip Code (Plus 4) 61822			2	1
			YEAR	2024
			\$ 500.00	
Employer Name			Occupation	
Employer Mailing Address/Principal Place of Business			City	State
			Zip Code (Plus 4)	

Full Name of Contributor SHABANA PATHAN			MO	DAY
Mailing Address 2 ASHER ROAD PITTSTOWN NJ 8867 City State Zip Code (Plus 4)				
			YEAR	2024
			\$ 1,000.00	
Employer Name			Occupation	
Employer Mailing Address/Principal Place of Business			City	State
			Zip Code (Plus 4)	

Full Name of Contributor MUHAMMAD NADEEM QAYYUM			MO	DAY
Mailing Address 227 VISTA DRIVE City EASTON State PA Zip Code (Plus 4) 18042			1	6
			YEAR	2024
			\$ 1,000.00	
Employer Name			Occupation	
Employer Mailing Address/Principal Place of Business			City	State
			Zip Code (Plus 4)	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 3,000.00

PART E OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Reporting Period From: To:
---------------------------------------	--

			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS
DURING THE REPORTING PERIOD.**

Detailed Summary Page

Name of Filing Committee or Candidate		Reporting Period	
TAIBA SULTANA		From: <u>1/1/2024</u> To: <u>3/4/2024</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 19,324.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 19,324.00

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period From: To:
---------------------------------------	--

			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

**SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00**

Name of Filing Committee or Candidate	Reporting Period
TAIBA SULTANA	From: <u>1/1/2024</u> To: <u>3/4/2024</u>

				DATE	AMOUNT		
Full Name of Contributor LEHIGH PRINT AND DATA				MO	DAY	YEAR	\$ 5,500.00
Mailing Address 16 LEHIGH STREET				2	26	2024	
City MACUNGIE	State PA	Zip Code(Plus 4) 18062					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution PRINT	
Full Name of Contributor STEEL PIXEL STUDIOS				MO	DAY	YEAR	\$ 5,000.00
Mailing Address N NEW STREET				3	1	2024	
City BETHLEHEM	State PA	Zip Code(Plus 4) 18018					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution MEDIA	
Full Name of Contributor MUB MEDIA				MO	DAY	YEAR	\$ 3,400.00
Mailing Address				2	26	2024	
City ALLENTOWN	State PA	Zip Code(Plus 4) 18103					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution MEDIA	
Full Name of Contributor MUHAMMAD NADEEM QAYYUM				MO	DAY	YEAR	\$ 212.00
Mailing Address 227 VISTA DRIVE				2	16	2024	
City EASTON	State PA	Zip Code(Plus 4) 18042					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution PRINTING	

Full Name of Contributor MUHAMMAD NADEEM QAYYUM			MO	DAY	YEAR	\$ 212.00
Mailing Address 227 VISTA DRIVE			2	27	2024	
City EASTON	State PA	Zip Code(Plus 4) 18042				
Employer of Contributor			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution PRINTING	
Full Name of Contributor STEEL PIXEL STUDIOS			MO	DAY	YEAR	\$ 5,000.00
Mailing Address N NEW STREET			2	22	2024	
City BETHLEHEM	State PA	Zip Code(Plus 4) 18018				
Employer of Contributor			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 19,324.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
TAIBA SULTANA	From <u>1/1/2024</u> To: <u>3/4/2024</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
NGP VAN INC				
Mailing Address	3	1	2024	\$ 636.00
City WASHINGTON	State DC	Zip Code (Plus 4)	Description of Expenditure	
To Whom Paid	MO	DAY	YEAR	
NGP VAN INC				
Mailing Address	3	1	2024	\$ 198.00
City EASHINGTON	State DC	Zip Code (Plus 4)	Description of Expenditure	
To Whom Paid	MO	DAY	YEAR	
NGP VAN INC				
Mailing Address	3	4	2024	\$ 198.00
City WASHINGTON	State DC	Zip Code (Plus 4)	Description of Expenditure	
To Whom Paid	MO	DAY	YEAR	
FRIENDS OF TALBA SULTANA				
Mailing Address 227 VISTA DRIVE	3	2	2024	\$ 326.50
City EASTON	State PA	Zip Code (Plus 4) 18102	Description of Expenditure	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL
				\$ 1,358.50

