

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 <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF TALBA SULTANA												
Street Address: 227 VISA DRIVE												
City: EASTON						State: PA			Zip Code: 18042			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2024	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR				
						11	5	2024				
									(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		4	9	2024		5	13	2024				
A. Amount Brought Forward From Last Report						\$			3,805.50			
B. Total Monetary Contributions And Receipts (From Schedule I)						\$			2,817.00			
C. Total Funds Available (Sum Of Lines A and B)						\$			6,622.50			
D. Total Expenditures (From Schedule III)						\$			5,822.17			
E. Ending Cash Balance (Subtract Line D From Line C)						\$			800.33			
F. Value Of In-Kind Contributions Received (From Schedule II)						\$			17,500.00			
G. Unpaid Debts And Obligations (From Schedule IV)						\$			6,350.97			

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
FRIENDS OF TALBA SULTANA	From: <u>4/9/2024</u> To: <u>5/13/2024</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 67.00

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)	\$ 1,150.00
TOTAL for the Reporting Period (2)	\$ 1,150.00

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)	\$ 1,600.00
TOTAL for the Reporting Period (3)	\$ 1,600.00

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.)	\$ 2,817.00
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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	Reporting Period
FRIENDS OF TALBA SULTANA	From: <u>4/9/2024</u> To: <u>5/13/2024</u>

				DATE		AMOUNT	
Full Name of Contributor ALEXANDER DEVILA MARTINEZ				MO	DAY	YEAR	\$ 250.00
Mailing Address 1441 BLAIR STREET							
City EASTON		State PA	Zip Code (Plus 4) 18045	4	16	2024	
Full Name of Contributor ALEXANDER DEVILA MARTINEZ				MO	DAY	YEAR	\$ 100.00
Mailing Address 1441 BLAIR STREET							
City EASTON		State PA	Zip Code (Plus 4) 18045	4	16	2024	
Full Name of Contributor KAMRAN SIDDIQUI				MO	DAY	YEAR	\$ 100.00
Mailing Address 4042 PAGE STREET							
City EASTON		State PA	Zip Code (Plus 4) 18042	4	16	2024	
Full Name of Contributor RUK CHISTY				MO	DAY	YEAR	\$ 100.00
Mailing Address 5221 BUSS DRIVE							
City EMMAUS		State PA	Zip Code (Plus 4) 18049				
Full Name of Contributor SHAHZAD KHAN				MO	DAY	YEAR	\$ 100.00
Mailing Address 1783 APPLEWOOD DRIVE							
City OREFIELD		State PA	Zip Code (Plus 4) 18069	4	16	2024	
Full Name of Contributor MIRZA AHMED				MO	DAY	YEAR	\$ 250.00
Mailing Address 821 REBECCA LANE							
City OREFIELD		State PA	Zip Code (Plus 4) 18069	4	16	2024	

Full Name of Contributor			MO	DAY	YEAR	\$250.00
MUAZZAM MALIK						
Mailing Address 4835 BRITTANY HILL						
City WHITEHALL	State PA	Zip Code (Plus 4) 18034	4	16	2024	

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

PAGE TOTAL
\$1,150.00

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 FRIENDS OF TALBA SULTANA	Reporting Period From: <u>4/9/2024</u> To: <u>5/13/2024</u>
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				DATE	AMOUNT		
Full Name of Contributor AHMED HASAN				MO	DAY	YEAR	\$ 300.00
Mailing Address 1630 PENNS CROSSING				4	15	2024	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18104					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

Full Name of Contributor IGBA SORATHIA				MO	DAY	YEAR	\$ 300.00
Mailing Address 1610 KNOLLWOOD ROAD				4	15	2024	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18014					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

Full Name of Contributor MURAT GAZAL				MO	DAY	YEAR	\$ 500.00
Mailing Address 1139 LEHIGH AV				4	18	2024	
City WHITEHALL	State PA	Zip Code (Plus 4) 18052					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

Full Name of Contributor MURAT GAZAL				MO	DAY	YEAR	\$ 500.00
Mailing Address 1139 LEHIGH AV				4	18	2024	
City WHITEHALL	State PA	Zip Code (Plus 4) 18052					
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
\$ 1,600.00

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	
FRIENDS OF TALBA SULTANA		From: <u>4/9/2024</u> To: <u>5/13/2024</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)		\$	17,500.00
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.)		\$	17,500.00

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:
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			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
FRIENDS OF TALBA SULTANA	From: <u>4/9/2024</u> To: <u>5/13/2024</u>

				DATE		AMOUNT	
Full Name of Contributor STEEL PIXEL				MO	DAY	YEAR	\$ 10,000.00
Mailing Address 701 N NEW STREET				4	16	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	\$ 7,500.00
Mailing Address				4	16	2024	
City ALLENTOWN	State PA	Zip Code(Plus 4) 18101					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution MEDIA		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.							PAGE TOTAL 17,500.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF TALBA SULTANA	From <u>4/9/2024</u> To: <u>5/13/2024</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
FACEBOOK				
Mailing Address	4	12	2024	\$ 400.00
City	State	Zip Code (Plus 4)	Description of Expenditure	
	CA		MEDIA	
To Whom Paid	MO	DAY	YEAR	
FACEBOOK				
Mailing Address	4	15	2024	\$ 600.00
City	State	Zip Code (Plus 4)	Description of Expenditure	
			MEDIA	
To Whom Paid	MO	DAY	YEAR	
SCALE TO WIN				
Mailing Address	4	16	2024	\$ 926.97
City	State	Zip Code (Plus 4)	Description of Expenditure	
	CA		TEXTING MEDIA	
To Whom Paid	MO	DAY	YEAR	
FACEBOOK				
Mailing Address	4	22	2024	\$ 900.00
City	State	Zip Code (Plus 4)	Description of Expenditure	
	CA		MEDIA	
To Whom Paid	MO	DAY	YEAR	
NGP VAN INC				
Mailing Address	4	23	2024	\$ 89.00
City	State	Zip Code (Plus 4)	Description of Expenditure	
	DC			
To Whom Paid	MO	DAY	YEAR	
FACEBOOK				
Mailing Address	4	23	2024	\$ 900.00
City	State	Zip Code (Plus 4)	Description of Expenditure	
	CA			

To Whom Paid STAPLE			MO	DAY	YEAR	\$ 54.00
Mailing Address			4	22	2024	
City	State	Zip Code (Plus 4)	Description of Expenditure PRINTING			
To Whom Paid FACEBOOK			MO	DAY	YEAR	\$ 900.00
Mailing Address			4	19	2024	
City	State	Zip Code (Plus 4)	Description of Expenditure MEDIA			
To Whom Paid FACEBOOK			MO	DAY	YEAR	\$ 900.00
Mailing Address			4	22	2024	
City	State CA	Zip Code (Plus 4)	Description of Expenditure MEDIA 5113			
To Whom Paid FRIENDS OF TAIBA			MO	DAY	YEAR	\$ 152.20
Mailing Address 227 VISTA DRIVE			5	2	2024	
City EASTON	State PA	Zip Code (Plus 4) 18042	Description of Expenditure MISI			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 5,822.17

SCHEDULE IV
STATEMENT OF UNPAID DEBTS
Use this Section to itemize all unpaid debts and obligations
which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate FRIENDS OF TALBA SULTANA	Reporting Period From: <u>4/9/2024</u> To: <u>5/13/2024</u>
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				DATE		Outstanding Balance of Debt	
Name of Creditor				MO	DAY	YEAR	
TALBA SULTANA							
Mailing Address							
227 VISTA DRIVE				4	18	2024	\$ 6,350.97
City		State	Zip Code (Plus 4)	Description of Debt			
EASTON		PA	18042	LV PRINTING CENTER-AlLENTOWN PA 18109 - MAILING			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL
							\$ 6,350.97