

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

<b>Filer Identification Number :</b>		20210187		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> FRIENDS OF JOSHUA SIEGEL												
<b>Street Address:</b> 528 N MUHLENBERG ST												
<b>City:</b> ALLENTOWN						<b>State:</b> PA			<b>Zip Code:</b> 18104			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/>	No	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6. X	TERMINATION REPORT?	Yes		No	
	ANNUAL REPORT	7.	Year 2024	<b>FILING METHOD ( ) CHECK ONE</b>				<b>PAPER</b>	<input checked="" type="checkbox"/>	<b>DISKETTE</b>		
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
REPRESENTATIVE IN THE GENERAL ASSEMBLY						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	22	STH	DEM	39
						11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		10	22	2024		11	25	2024				
<b>A. Amount Brought Forward From Last Report</b>						\$ 131,493.43						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 12,500.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 143,993.43						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 230.85						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 143,762.58						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF JOSHUA SIEGEL	From: <u>10/22/2024</u> To: <u>11/25/2024</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 500.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 500.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 9,000.00
<b>All Other Contributions (Part D)</b>	\$ 3,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 12,000.00

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

<b>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.)</b>	\$ 12,500.00
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**PART A**  
**CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**  
**\$50.01 TO \$250.00**

**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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF JOSHUA SIEGEL	<b>Reporting Period</b>  <b>From:</b> <u>10/22/2024</u> <b>To:</b> <u>11/25/2024</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"><b>DATE</b></td> <td style="width: 40%; border: none;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

<b>Full Name of Contributing Committee</b> Friends of Steve Malagari			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 2008 Chestnut St. Suite 1R			11	22	2024	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19103				

<b>Full Name of Contributing Committee</b> Friends of Joe Webster			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> PO Box 26264			11	19	2024	
<b>City</b> Collegeville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19426				

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

<b>PAGE TOTAL</b>
\$ 500.00



## 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF JOSHUA SIEGEL	<b>From:</b> <u>10/22/2024</u> <b>To:</b> <u>11/25/2024</u>

				DATE	AMOUNT		
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
Friends of Ben Sanchez				11	18	2024	
Mailing Address 356 Evergreen Rd							
City Jenkintown		State PA	Zip Code (Plus 4) 19046				
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
Friends of Sean Kilkenny				11	19	2024	
Mailing Address 715 Washington Lane							
City Jenkintown		State PA	Zip Code (Plus 4) 19046				
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
COMMITTEE FOR GOOD GOVERNMENT				11	18	2024	
Mailing Address PO BOX 212							
City CHALFONT		State PA	Zip Code (Plus 4) 18914				
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
Friends of Nancy Guerst				11	18	2024	
Mailing Address PO Box 523							
City Hatboro		State PA	Zip Code (Plus 4) 190401000				
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
FRIENDS OF JASON SALUS				11	19	2024	
Mailing Address PO BOX 1214							
City NORRISTOWN		State PA	Zip Code (Plus 4) 19404				
Full Name of Contributing Committee				MO	DAY	YEAR	\$5,000.00
Friends of Matt Bradford				11	19	2024	
Mailing Address PO Box 349							
City Norristown		State PA	Zip Code (Plus 4) 19404				

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

**PAGE TOTAL**

\$ 9,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF JOSHUA SIEGEL	<b>Reporting Period</b>  <b>From:</b> <u>10/22/2024</u> <b>To:</b> <u>11/25/2024</u>
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				DATE	AMOUNT
<b>Full Name of Contributor</b> Kathleen & Allen B Mason				<b>MO</b>	\$ 500.00
<b>Mailing Address</b> 127 Chatham Place				<b>DAY</b>	
<b>City</b> Lansdale	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19446		<b>YEAR</b> 2024	
<b>Employer Name</b> Carroll Engineering				<b>Occupation</b> Vice president	
<b>Employer Mailing Address/Principal Place of Business</b> 949 Easton Rd			<b>City</b> Warrington	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18976
<b>Full Name of Contributor</b> OBERMAYER REBMAN MAXWELL & HIPPEL LLP				<b>MO</b>	\$ 1,000.00
<b>Mailing Address</b> CENTRE SQ WEST 1500 MARKET ST FLOOR 34				<b>DAY</b>	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19102		<b>YEAR</b> 2024	
<b>Employer Name</b> Obermayer Rebman Maxwell & Hippel LLP				<b>Occupation</b> NA	
<b>Employer Mailing Address/Principal Place of Business</b> 15000 Market St			<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19102
<b>Full Name of Contributor</b> OBERMAYER REBMAN MAXWELL & HIPPEL LLP				<b>MO</b>	\$ 1,000.00
<b>Mailing Address</b> CENTRE SQ WEST 1500 MARKET ST FLOOR 34				<b>DAY</b>	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19102		<b>YEAR</b> 2024	
<b>Employer Name</b> Obermayer Rebman Maxwell & Hippel LLP				<b>Occupation</b> NA	
<b>Employer Mailing Address/Principal Place of Business</b> 15000 Market St			<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19102
<b>Full Name of Contributor</b> Elmer W Heinel				<b>MO</b>	\$ 500.00
<b>Mailing Address</b> 14900 Laguna Dr				<b>DAY</b>	
<b>City</b> Fort Meyers	<b>State</b> FL	<b>Zip Code (Plus 4)</b> 33908		<b>YEAR</b> 2024	
<b>Employer Name</b> Retired				<b>Occupation</b> Retired	
<b>Employer Mailing Address/Principal Place of Business</b> 14900 Laguna Dr			<b>City</b> Fort Meyers	<b>State</b> FL	<b>Zip Code (Plus 4)</b> 33908

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

<b>PAGE TOTAL</b>
\$ 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>  <b>From:</b> <b>To:</b>
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			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.**

<b>PAGE TOTAL</b>	
\$	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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF JOSHUA SIEGEL		From: <u>10/22/2024</u> To: <u>11/25/2024</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
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.)		\$	0.00

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

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 0.00

**SCHEDULE II**  
**PART G**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OVER \$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)					
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 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF JOSHUA SIEGEL	From <u>10/22/2024</u> To: <u>11/25/2024</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
8th Ward Neighborhood Group				
<b>Mailing Address</b> 417 N 7th st	11	22	2024	\$ 50.00
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18102	<b>Description of Expenditure</b> Donation for dinner	
To Whom Paid	MO	DAY	YEAR	
Toskr				
<b>Mailing Address</b> 9450 SW Gemini Dr. PMB 79340	11	5	2024	\$ 180.85
<b>City</b> Beaverton	<b>State</b> OR	<b>Zip Code (Plus 4)</b> 97008	<b>Description of Expenditure</b> text	
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>				<b>PAGE TOTAL</b> \$ 230.85

