

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

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

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

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

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.)	\$ 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.**

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

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

Full Name of Contributing Committee Friends of Steve Malagari			MO	DAY	YEAR	\$ 250.00
Mailing Address			11	22	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 19103				

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

PAGE TOTAL
\$ 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.

Name of Filing Committee or Candidate FRIENDS OF JOSHUA SIEGEL	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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				DATE			AMOUNT
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
Friends of Ben Sanchez				11	18	2024	
Mailing Address							
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							
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							
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							
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							
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							
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.)**

Name of Filing Committee or Candidate FRIENDS OF JOSHUA SIEGEL	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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				DATE	AMOUNT		
Full Name of Contributor Kathleen & Allen B Mason				MO	DAY	YEAR	\$ 500.00
Mailing Address City Lansdale State PA Zip Code (Plus 4) 19446				11	19	2024	
Employer Name Carroll Engineering				Occupation Vice president			
Employer Mailing Address/Principal Place of Business				City Warrington		State PA	Zip Code (Plus 4) 18976
Full Name of Contributor OBERMAYER REBMAN MAXWELL & HIPPEL LLP				MO	DAY	YEAR	\$ 1,000.00
Mailing Address City PHILADELPHIA State PA Zip Code (Plus 4) 19102				11	18	2024	
Employer Name Obermayer Rebman Maxwell & Hippel LLP				Occupation NA			
Employer Mailing Address/Principal Place of Business				City Philadelphia		State PA	Zip Code (Plus 4) 19102
Full Name of Contributor OBERMAYER REBMAN MAXWELL & HIPPEL LLP				MO	DAY	YEAR	\$ 1,000.00
Mailing Address City PHILADELPHIA State PA Zip Code (Plus 4) 19102				11	18	2024	
Employer Name Obermayer Rebman Maxwell & Hippel LLP				Occupation NA			
Employer Mailing Address/Principal Place of Business				City Philadelphia		State PA	Zip Code (Plus 4) 19102
Full Name of Contributor Elmer W Heinel				MO	DAY	YEAR	\$ 500.00
Mailing Address City Fort Meyers State FL Zip Code (Plus 4) 33908				11	20	2024	
Employer Name Retired				Occupation Retired			
Employer Mailing Address/Principal Place of Business				City Fort Meyers		State FL	Zip Code (Plus 4) 33908

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:
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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.

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 JOSHUA SIEGEL		From: <u>10/22/2024</u> To: <u>11/25/2024</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)		\$	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: 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
	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

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

DATE				AMOUNT
To Whom Paid				
8th Ward Neighborhood Group				
Mailing Address				
City Allentown	State PA	Zip Code (Plus 4) 18102	Description of Expenditure	
Donation for dinner				
To Whom Paid				
Toskr				
Mailing Address				
City Beaverton	State OR	Zip Code (Plus 4) 97008	Description of Expenditure	
text				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL
				\$ 230.85

