Campaign Finance Report

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

Filer Identificati Number :			port ed B		CANDI	DATE		СОМ	4ITTEE	✓	LOBE	SYIST				
Name of Filing C	Committee, Candi	date or L	obbyist:		FRI	END	S OF	JOSHUA	SIEGE	L						
Street Address:																
City:	ALLENTOWN							State:	PA			Zip Cod	ie: 18	18104		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	AY PRE- 2. 30 DAY POST- 3 PRIMARY					3.		AMENDM REPORT		Yes	No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	RE- 5. 30 DAY POST- 6. ELECTION						TERMINA REPORT		Yes	No	~	
report type)	ANNUAL REPOR	г 7. х	Year 2024					IG METHO				PAPER		\	DISKE	TTE
Name of Office S	- Sought by Candid	ate:			-			DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY								МО	DAY	YE	AR	22	STH	DEM	1	39
								11		5	2024		(SEE IN	STRUCTIO	ONS FOR C	ODES)
Summary of Expenditures	Receipts and from:	МО	11 26	YEAR	024	T	0	MO 12	DAY	31	2024	FO	R OFFI	CE USE	ONLY	
A. Amount Bro	ught Forward Fro						\$	12			762.58					
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$				785.00					
C. Total Funds	Available (Sum ()f Lines A	and B)				\$			151,5	547.58					
D. Total Expend	ditures (From Sc	hedule II	I)				\$			5	05.39					
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)			\$			151,0	42.19					
F. Value Of In-	Kind Contribution	ıs Receiv	ed (From Sc	hedu	le II	I)	\$				0.00					
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV))			\$			4,0	00.00			•		
				AFF	IDA	AVI	T SE	CTION								
PART I - If this is		•	_						•							
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached sch	edules	s file	ed on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge a	and belie	ef , true
Sworn to and subs	cribed before me th day of	is	20							s	ignature	of Perso	n Submit	ting Rep	ort	
	Signat	ure					-					Prin	ted Name	9		
My Commission Ex	cpires											Ema	il			
	мо	D	AY	YR					Are	ea Cod	le	Daytim	e Teleph	one Nu	mber	_
Part II- If this is	a report of a ca	ndidate's	authorized (Comn	nitte	ee, C	andida	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende		my knowl	edge and belie	f this	poli	itical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc		5	20						Signature of Candidate							
	day of 20															
My Commission Exp	Signature	1					-					Ema	il			
, сеолоп Ехр							_									
	МО	D	AY	YR					Area	Code		Da	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF JOSHUA SIEGEL	From:	11/26/202	<u>4</u> То:	12/31/2024
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)			\$	250.00
All Other Contributions (Part B)			\$	35.00
TOTAL for the Reporting) Period	(2)	\$	285.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	7,500.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	7,500.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	7,785.00

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	Reporting	Period		
FRIENDS OF JOSHUA SIEGEL	From:	11/26/2024	To:	12/31/2024
		DATE		AMOUNT

Full Name of Contributing	Committee		MO	DAY	VEAD	
Friends of Liz Hanbridge			МО	DAY	YEAR	
Mailing Address				6	2024	\$ 250.00
City Ambler	State	Zip Code (Plus 4)	12		2024	
	PA	19002				

PAGE TOTAL 250.00

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

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 JOSHUA SIEGEL

From: <u>11/26/2024</u> To:

DATE

12/31/2024

AMOUNT

Full Name of Contributor Edward Delviscio					DAY	YEAR	
Mailin	Mailing Address						\$ 35.00
City	Bethlehem	State	Zip Code (Plus 4)	12	17	2024	
		PA	18015				

PAGE TOTAL

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

35.00

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.

me of Filing Committee or Candidate							
FRIENDS OF JOSHUA SIEGEL			11/2	<u>6/2024</u>	То:	12/31/2024	
			DA	TE		AMOUNT	i
			МО	DAY	YEAR		
						\$	2,500.00
			12	10	2024		•
State	Zip Code	e (Plus 4)	12	13	2024		
PA	18015						
			мо	DAY	VEAD		
			1-10	DAI	ILAK	\$	5,000.00
			12	12	2024	,	,
State	Zip Code	e (Plus 4)	12	13	2024		
DC	20001						
	PA State	PA 18015 State Zip Code	State Zip Code (Plus 4) PA 18015 State Zip Code (Plus 4)	NO NO NO NO NO NO NO NO	From: 11/26/2024 DATE MO DAY	From: 11/26/2024 To:	From: 11/26/2024 To: 12/31/20

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

PAGE TOTAL \$ 7,500.00

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			Rep	orting Pe	riod			
			Fron	n:		То	:	
				D	ATE		A	MOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion	-	-	
Employer Mailing Address/Principal Place	e of Business	City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Sเ	ummary Page,	Section	on 3.				PAGE TOTAL
							•	0.00

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			Report	ing Perio	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address		_					
City	State	Zip Code (Plus 4)				
Receipt Description	•	•			•	•	
		_		_			PAGE TOTAL
Enter Grand Total of Part E on Schedu	lie 1, Detailed Sumn	nary Page,	Section	4.			\$ 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 Per	iod	
FRIENDS OF JOSHUA SIEGEL	From:	<u>11/26/2024</u> To:	12/31/2024
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Car	Reporting Period							
	From:		To	То:				
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detail			led Sun	mary Pa	ge,		PAGE TOTAL	•
Section 2.						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate					Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	Stat	e Zip	Code(Plus 4)	Desci	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.										0.00

PAGE TOTAL

505.39

\$

STATEMENT OF EXPENDITURES

Name of Filing Committee or	Name of Filing Committee or Candidate					Reporting Period					
FRIENDS OF JOSHUA SIEGE	From	12/31/2024									
		AMOUNT									
To Whom Paid			МО	DAY	YEAR						
Flaming Hot Halal			1-10								
Mailing Address			12	17	2024	\$	439.30				
City Allentown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
	PA	18109	Food fo	r event							
To Whom Paid			МО	DAY	YEAR						
Giant			MO		ILAK						
Mailing Address			12	17	2024	\$	66.09				
City Bethlehem State Zip Code (Plus 4)			Description of Expenditure								
	PA	18018	event s	upplies							

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

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			Reporting Period					
FRIENDS OF JOSHUA SIEGEL			From:	11/26/2024 To :		12/31/2024		
				DATE			Outstanding Balance of Debt	
Name of Creditor Joshua Siegel			мо	DAY	YEAR			
Mailing Address				1	31	2025	\$	4,000.00
City Allentown State Zip Code (Plus 4) De					Description of Debt			
PA 18012 I				Loan to campaign				
								PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	4,000.00