

COMMONWEALTH OF PENNSYLVANIA  
**CAMPAIGN FINANCE STATEMENT**

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred *each* did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF	CANDIDATE <input type="checkbox"/>	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST <input type="checkbox"/>																						
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <u>MEMBERS OF SIOBHAN "SAM" BENNETT</u>																											
STREET ADDRESS																											
CITY		STATE	ZIP CODE																								
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY	DATE OF ELECTION																							
				MO.	DAY	YEAR																					
1. 6TH TUESDAY PRE-PRIMARY	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>DATES OF REPORTING PERIOD</td> <td>NO.</td> <td>DAY</td> <td>YEAR</td> <td>TO</td> <td>MO.</td> <td>DAY</td> <td>YEAR</td> </tr> <tr> <td></td> <td>01</td> <td>01</td> <td>2014</td> <td></td> <td>12</td> <td>31</td> <td>2014</td> </tr> </table> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u></p> <p>TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>86,803.92</u></p> </div> <table border="1" style="width:100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> </table>	DATES OF REPORTING PERIOD	NO.	DAY	YEAR	TO	MO.	DAY	YEAR		01	01	2014		12	31	2014	AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>	TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>	FOR OFFICE USE ONLY	
DATES OF REPORTING PERIOD		NO.	DAY	YEAR	TO	MO.	DAY	YEAR																			
		01	01	2014		12	31	2014																			
AMENDMENT REPORT?		YES	NO	<input checked="" type="checkbox"/>																							
TERMINATION REPORT?		YES	NO	<input checked="" type="checkbox"/>																							
2. 2ND FRIDAY PRE-PRIMARY		RECEIVED FEB 27 AM 11:26 ELECTION BOARD OF LEHIGH COUNTY																									
3. 30 DAY POST-PRIMARY																											
4. 6TH TUESDAY PRE-ELECTION																											
5. 2ND FRIDAY PRE-ELECTION																											
6. 30 DAY POST-ELECTION																											
7. ANNUAL REPORT <input checked="" type="checkbox"/>																											

**AFFIDAVIT SECTION**

**PART I -**

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.  
 If statement is filed on behalf of a Candidate, the Candidate must sign here.  
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS

\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
SIGNATURE

MY COMMISSION EXPIRES \_\_\_\_\_  
MO. DAY YR.

\_\_\_\_\_  
SIGNATURE OF PERSON SUBMITTING REPORT

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
AREA CODE

\_\_\_\_\_  
DAYTIME TELEPHONE NUMBER

**PART II -**

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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

29th DAY OF FEBRUARY 2015

\_\_\_\_\_  
SIGNATURE

MY COMMISSION EXPIRES 9 27 18  
MO. DAY YR.

\_\_\_\_\_  
SIGNATURE OF CANDIDATE

SIOBHAN L. BENNETT  
PRINTED NAME

484  
AREA CODE

360-2810  
DAYTIME TELEPHONE NUMBER

LEHIGH COUNTY • BOARD OF ELECTIONS  
 17 S 7<sup>TH</sup> STREET • ALLENTOWN, PA 18101-2401 • (610) 782-3197