

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 checked="" type="checkbox"/>	COMMITTEE ² <input type="checkbox"/>	LOBBYIST ³ <input type="checkbox"/>													
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Shawn Martell																	
STREET ADDRESS 1417 Stehr St																	
CITY Bethlehem		STATE PA	ZIP CODE 18018														
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY													
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td>MO.</td><td>DAY</td><td>YEAR</td> <td>TO</td> <td>MO.</td><td>DAY</td><td>YEAR</td> </tr> <tr> <td>1</td><td>1</td><td>15</td> <td></td> <td>12</td><td>31</td><td>15</td> </tr> </table>		MO.	DAY	YEAR	TO	MO.	DAY	YEAR	1	1	15		12	31	15	
MO.	DAY	YEAR	TO	MO.	DAY	YEAR											
1	1	15		12	31	15											
6TH TUESDAY PRE-PRIMARY	Bethlehem City Council																
2ND FRIDAY PRE-PRIMARY																	
30 DAY POST-PRIMARY																	
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ANNUAL REPORT				<input checked="" type="checkbox"/>													
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30 DAY POST-PRIMARY ^{3.}																																																					
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PART I -

