

CAMPAIGN FINANCE STATEMENT

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

Name and Address of Filing Candidate or Committee

Name:	<i>Bob Elbich</i>
Address:	<i>3153 Masters Hill Rd</i>
City, State, Zip:	<i>Fogelsville PA 18051</i>

Candidate	<i>X</i>	Committee	
Type of Report	Election Date	Amended	Termination
2017- ANNUAL REPORT			
<i>TERMINATION REPORT?</i>			
Office Sought By Candidate	Party	County	
<i>Lehigh County Commissioner Dist #1</i>	<i>D</i>	<i>Lehigh</i>	
Cash Balance at end of Reporting Period:		0.00	
Total Amount of Filer's Outstanding Debts or Liabilities at the End of Reporting Period:		0.00	
From:	<i>11/28/2017</i>	To:	<i>12/31/2017</i>

*Complete reports, including signatures are on file in the Office of Voter Registration.