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: Address: City, State, Z	$227 N 9^{th} St$				
Candidate		X	Committee		
Type of Report			Election Date	Amended	Termination
2017- ANNU	AL REPORT				
TERMINATIO	ON REPORT?		-		
Office Sought By Candidate			Party	County	
Lehigh County Commissioner Dist #4			D	Lehigh	
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:			To:	12/31/2017	

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