CAMPAIGN FINANCE STATEMENT

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

Name and Address of Filing Candidate or Committee

| Name: | James B. Martin |
|-------------------|------------------------|
| Address: | 3845 Hawthorne Dr |
| City, State, Zip: | Center Valley PA 18034 |

Report Filed By

| Candidate | X | Committee | | |
|--|------------------|---------------|------------|-------------|
| Type of Report | | Election Date | Amended | Termination |
| 2015 – 30 Day Post Primary | | 05/19/2015 | | |
| TERMINATION REPORT? |) | | | |
| Office Sought By Candidate | | Party | County | |
| Lehigh County District Attorney | | R | Lehigh | |
| Cash Balance at end of Reporting Period: | | | 0.00 | |
| Total Amount of Filer's | 0.00 | | | |
| Liabilities at the End of | Reporting | Period: | | |
| From: 05/04/2015 | | То: | 06/08/2015 | |

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