## 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 Scott Grim Name: 646 Hanover Ave Address: Allentown Pa 18109 City, State, Zip: **Report Filed By** X Committee Candidate Termination **Election Date** Amended **Type of Report** 01/13/2017 2016 – Annual Report YES TERMINATION REPORT? County **Office Sought By Candidate** Party $\overline{D}$ Lehigh Lehigh County Coroner 0.00 **Cash Balance at end of Reporting Period:** Total Amount of Filer's Outstanding Debts or 0.00 Liabilities at the End of Reporting Period: 12/31/2016 01/01/2016 To: From:

**CAMPAIGN FINANCE STATEMENT** 

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