

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>Robert 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 – 30 Day Post - Primary | 05/16/2017 | | |
| <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>05/02/2017</i> | To: | <i>06/05/2017</i> |

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