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:	Geoffrey Brace
Address:	227 N 9 th St
City, State, Zip:	Allentown PA 18102

Candidate		X	Committee	ommittee	
Type of Report		Election Date	Amended	Termination	
2017 – 2 nd Friday Pre-Primary		05/16/2017			
TERMINAT	ION 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				0.00	
Liabilities at the End of Reporting Period:From:01/01/2017To:				05/01/2017	

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