

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>Shoaib Adam Chaudhary</i> |
| Address: | <i>Macungie PA 18062</i> |
| City, State, Zip: | |

| | | | |
|---|-------------------|----------------------|-------------------|
| Candidate | <i>X</i> | Committee | |
| Type of Report | | Election Date | Amended |
| 2017- ANNUAL REPORT | | | |
| <i>TERMINATION REPORT?</i> | | | |
| Office Sought By Candidate | | Party | County |
| <i>Lehigh County Commissioner Dist #2</i> | | <i>D</i> | <i>Lehigh</i> |
| Cash Balance at end of Reporting Period: | | | (-17,135.77) |
| Total Amount of Filer's Outstanding Debts or Liabilities at the End of Reporting Period: | | | 0.00 |
| From: | <i>11/27/2017</i> | To: | <i>12/31/2017</i> |

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