

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

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

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF		CANDIDATE	<input checked="" type="checkbox"/>	COMMITTEE	<input type="checkbox"/>	LOBBYIST	<input type="checkbox"/>	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Jeff Glazier										
STREET ADDRESS 2915 Parkway Blvd										
CITY Allentown				STATE PA		ZIP CODE 18104				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.		PARTY		DATE OF ELECTION	
6TH TUESDAY PRE-PRIMARY		Allentown Controller							MO. DAY YEAR	
2ND FRIDAY PRE-PRIMARY									05 16 17	
30 DAY POST-PRIMARY										
6TH TUESDAY PRE-ELECTION										
2ND FRIDAY PRE-ELECTION										
30 DAY POST-ELECTION										
ANNUAL REPORT										
		DATES OF REPORTING PERIOD			MO. DAY YEAR		MO. DAY YEAR		FOR OFFICE USE ONLY	
		1 1 17 TO 5 1 17								
		CASH BALANCE AT END OF REPORTING PERIOD: \$								
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$								
		AMENDMENT REPORT?			YES NO		X			
		TERMINATION REPORT?			YES NO		X			

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
If statement is filed on behalf of a Candidate, the Candidate must sign here.
If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS
DAY OF May 2017
SIGNATURE OF PERSON SUBMITTING REPORT
Jeff Glazier
PRINTED NAME
Jeff Glazier
MY COMMISSION EXPIRES 07 13 18
NOTARIAL SEAL
Dalma C. Brown, Notary Public
610
667-8507
DAYTIME TELEPHONE NUMBER
MO. DAY YEAR
07 13 18
My Commission Expires July 13, 2018
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

I SWEAR (OR AFFIRM) THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS POLITICAL COMMITTEE HAS NOT VIOLATED ANY PROVISIONS OF THE ACT OF JUNE 3, 1937 (P.L. 1333, No. 320) AS AMENDED.

SWORN TO AND SUBSCRIBED BEFORE ME THIS
DAY OF 20
SIGNATURE OF CANDIDATE
PRINTED NAME
MY COMMISSION EXPIRES MO. DAY YR.
AREA CODE DAYTIME TELEPHONE NUMBER