

Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	Report Filed By (Mark X)	Candidate	<input checked="" type="checkbox"/>	Committee	<input type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		Friends of Grace Crampsie Smith					
Street Address		1403 Lorain Ave					
City	Bethlehem	State	PA	Zip Code	18018		

Type of Report (Place x under report type)								
1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6 th Tuesday Pre- Election	5- 2 nd Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)			Year		Amendment Report	Termination Report		
			2023		<input type="checkbox"/>	<input type="checkbox"/>		

Summary of Receipts and Expenditures	From Date	To Date
	1/1/2023	12/3/2023
A. Amount Brought Forward From Last Report	\$	9281.49
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	0
C. Total Funds Available (Sum of Lines A and B)	\$	9281.49
D. Total Expenditures (From Schedule III)	\$	\$275.00
E. Ending Cash Balance (Subtract Line D from Line C)	\$	9006.49
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0
G. Unpaid Debts and Obligations (From Schedule IV)	\$	\$1,000.00

For Office Use Only

Affidavit Section

Part 1- If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.
 I swear (or affirm) that this report, including the attached schedules on paper, is to the best of my knowledge and belief true, correct and complete.

sworn to and subscribed before me this
30 day of January 2024
IRIS N. LINARES
 Signature
 Commonwealth of Pennsylvania - Notary Seal
 Commission expires IRIS N LINARES - Notary Public
 MO. Northampton County
 My Commission Expires March 13, 2027
 Commission Number 1095968

II- If this is a report of a Candidate's Authorized Committee, candidate
 I swear (or affirm) that to the best of my knowledge and belief this political
 is true and correct.

sworn to and subscribed before me this
30 day of January 2024
IRIS N. LINARES
 Signature
 Commonwealth of Pennsylvania - Notary Seal
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 Northampton County
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SCHEDULE I
Contributions and Receipts
 Detailed Summary Page

Filer Identification Number	
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1. Unitemized Contributions and Receipts—\$ 50.00 or Less per Contributor

Total for the reporting period	(1)	\$	0
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2. Contributions of \$ 50.01 to \$ 250.00 (From Part A and Part B)

Contributions Received from Political Committees (Part A)	\$	0
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All Other Contributions (Part B)	\$	0
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Total for the reporting period	(2)	\$	0
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3. Contributions Over \$ 250.00 (From Part C and Part D)

Contributions Received from Political Committees (Part C)	\$	0
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All Other Contributions (Part D)	\$	0
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Total for the reporting period	(3)	\$	0
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Other Receipts—Refunds, Interest Earned, Returned Checks, ETC. (From Part E)

Total for the reporting period	(4)	\$	0
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Total Monetary Contributions and Receipts during this reporting period <i>(Add and subtract amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Form 278, Item B)</i>	\$	0
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**SCHEDULE III
Statement of Expenditures**

Filer Identification Number: _____

To Whom Paid						Bethlehem NAACP		Date [MM/DD/YYYY]	\$	\$50.00
House #						627		3/26/2023		
Street Address						Cherokee St				
City						Bethlehem		State		PA
Zip Code						18105		Annual Banquet ticket		
To Whom Paid						GJ Green/O'Brien Banquet		Date [MM/DD/YYYY]	\$	\$125.00
House #						53		5/7/23		
Street Address						Lehigh St				
City						Bethlehem		State		Pa
Zip Code						18018		Program Ad		
To Whom Paid						McNeil for PA		Date [MM/DD/YYYY]	\$	\$100.00
House #						3163		12/6/23		
Street Address						N Front St				
City						Whitehall		State		PA
Zip Code						18052		Fundraiser		
To Whom Paid								Date [MM/DD/YYYY]	\$	
House #										
Street Address										
City								State		
Zip Code										
To Whom Paid								Date [MM/DD/YYYY]	\$	
House #										
Street Address										
City								State		
Zip Code										
To Whom Paid								Date [MM/DD/YYYY]	\$	
House #										
Street Address										
City								State		
Zip Code										
To Whom Paid								Date [MM/DD/YYYY]	\$	
House #										
Street Address										
City								State		
Zip Code										
To Whom Paid								Date [MM/DD/YYYY]	\$	
House #										
Street Address										
City								State		
Zip Code										
To Whom Paid								Date [MM/DD/YYYY]	\$	
House #										
Street Address										
City								State		
Zip Code										

Statement of Unpaid Debts

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Filer Identification Number:									
Name of Creditor		Grace Crampsie Smith				DATE DEBT INCURRED [MM/DD/YYYY]		Outstanding Balance of Debt	
House #	1403	Street Address		Lorain Ave				\$	
City	Bethlehem	State	PA	Zip Code	18018			\$1,000.00	
Description of Debt									
Campaign Loan									
Name of Creditor						DATE DEBT INCURRED [MM/DD/YYYY]		Outstanding Balance of Debt	
House #		Street Address						\$	
City		State		Zip Code					
Description of Debt									
Name of Creditor						DATE DEBT INCURRED [MM/DD/YYYY]		Outstanding Balance of Debt	
House #		Street Address						\$	
City		State		Zip Code					
Description of Debt									
Name of Creditor						DATE DEBT INCURRED [MM/DD/YYYY]		Outstanding Balance of Debt	
House #		Street Address						\$	
City		State		Zip Code					
Description of Debt									
Name of Creditor						DATE DEBT INCURRED [MM/DD/YYYY]		Outstanding Balance of Debt	
House #		Street Address						\$	
City		State		Zip Code					
Description of Debt									
Name of Creditor						DATE DEBT INCURRED [MM/DD/YYYY]		Outstanding Balance of Debt	
House #		Street Address						\$	
City		State		Zip Code					
Description of Debt									
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House #		Street Address						\$	
City		State		Zip Code					
Description of Debt									

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City	Bethlehem	State	PA	Zip Code	18018			

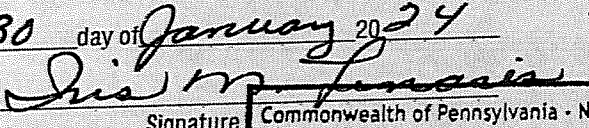
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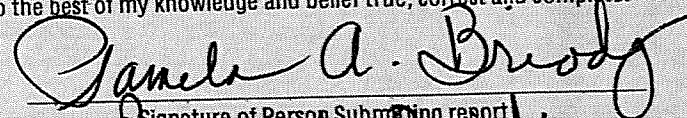
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 Signature _____
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 IRIS N LINARES - Notary Public
 Northampton County
 My Commission expires _____
 MO. My Commission Expires March 13, 2027
 Commission Number 1095968


 Signature of Person Submitting report

 Printed Name
Pamela A. Brady
(610) Area Code
442-2178 Daytime Telephone Number

Part II- If this is a report of a Candidate's Authorized Committee, candidate shall 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, N.C. amended).

Sworn to and subscribed before me this
 _____ day of _____ 20____

 Signature

 Signature of Candidate

 Printed Name

 Area Code

 Daytime Telephone Number

Commission expires _____
 MO. DAY YR.

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