

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				
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Grace Crampsie Smith</i>									
STREET ADDRESS <i>1403 Locain Ave.</i>									
CITY <i>Bethlehem</i>		STATE <i>PA</i>	ZIP CODE <i>18018</i>						
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE	DISTRICT NO.	PARTY	DATE OF ELECTION					
				MO.	DAY	YEAR			
6TH TUESDAY PRE-PRIMARY	<i>Bethlehem City Council</i>		<i>Dem</i>	<i>11</i>	<i>05</i>	<i>2019</i>			
2ND FRIDAY PRE-PRIMARY				FOR OFFICE USE ONLY					
30 DAY POST-PRIMARY				DATES OF REPORTING PERIOD					
6TH TUESDAY PRE-ELECTION				MO.	DAY	YEAR	MO.	DAY	YEAR
2ND FRIDAY PRE-ELECTION				<i>11</i>	<i>26</i>	<i>2019</i>	<i>12</i>	<i>31</i>	<i>2019</i>
30 DAY POST-ELECTION				CASH BALANCE AT END OF REPORTING PERIOD: \$ <u><i>3,150.80</i></u>					
ANNUAL REPORT	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u><i>1,000.00</i></u>								
	AMENDMENT REPORT?	YES	NO						
	TERMINATION REPORT?	YES	NO						

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 do (or affirm) WEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT

SCHEDULE IV

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:	
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Name of Creditor		<i>Grace Grampsie Smith</i>				Outstanding Balance of Debt	
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]		\$		<i>\$1,000.00</i>	
<i>1403</i>	<i>Lorain Ave.</i>	<i>02/19/2019</i>					
City		State	Zip Code				
<i>Bethlehem</i>		<i>PA</i>	<i>18018</i>				
Description of Debt							
<i>Campaign loan</i>							

Name of Creditor						Outstanding Balance of Debt	
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]		\$			
City		State	Zip Code				
Description of Debt							

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Description of Debt							

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Description of Debt							

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City		State	Zip Code				
Description of Debt							

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House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]		\$			
City		State	Zip Code				
Description of Debt							

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FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF		CANDIDATE	1	COMMITTEE	2	LOBBYIST	3	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Friends of Bruce Crampie Smith</i>										
STREET ADDRESS <i>1403 Lorain Ave.</i>										
CITY <i>Bethlehem</i>				STATE <i>PA</i>		ZIP CODE <i>18018-</i>				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY		DATE OF ELECTION		
6TH TUESDAY PRE-PRIMARY		<i>Bethlehem City Council</i>				<i>Dem</i>		MO.	DAY	YEAR
2ND FRIDAY PRE-PRIMARY								<i>11</i>	<i>05</i>	<i>2019</i>
30 DAY POST-PRIMARY								FOR OFFICE USE ONLY		
6TH TUESDAY PRE-ELECTION										
2ND FRIDAY PRE-ELECTION										
30 DAY POST-ELECTION										
ANNUAL REPORT										

DATES OF REPORTING PERIOD			TO			DATES OF REPORTING PERIOD		
MO.	DAY	YEAR		MO.	DAY	YEAR		
<i>11</i>	<i>26</i>	<i>2019</i>		<i>12</i>	<i>31</i>	<i>2019</i>		

CASH BALANCE AT END OF REPORTING PERIOD:	\$ <u><i>3,150.80</i></u>
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:	\$ <u><i>1,000.00</i></u>

AMENDMENT REPORT?	YES		NO	
TERMINATION REPORT?	YES		NO	

AFFIDAVIT SECTION

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I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT

My cot

SCHEDULE IV

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Filer Identification Number:	
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Name of Creditor		<i>Grace Crampsie Smith</i>				Outstanding Balance of Debt	
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]		\$		\$1,000.00	
<i>1463</i>	<i>Lorain Ave.</i>	<i>02/19/2019</i>					
City		State	Zip Code				
<i>Bethlehem</i>		<i>PA</i>	<i>18018</i>				
Description of Debt							
<i>Campaign loan</i>							

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City		State	Zip Code				
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City		State	Zip Code				
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House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]		\$			
City		State	Zip Code				
Description of Debt							