

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>Peter C. Amuso</i>																		
STREET ADDRESS <i>1507 E. Willow Grove Ave</i>																		
CITY <i>WYNDMOOR</i>		STATE <i>PA</i>	ZIP CODE <i>19038 -</i>															
TYPE OF REPORT (CHECK ONE) 6TH TUESDAY PRE-PRIMARY 1. 2ND FRIDAY PRE-PRIMARY 2. 30 DAY POST-PRIMARY 3. 6TH TUESDAY PRE-ELECTION 4. 2ND FRIDAY PRE-ELECTION 5. 30 DAY POST-ELECTION 6. ANNUAL REPORT 7.	NAME OF OFFICE SOUGHT BY CANDIDATE <i>District Attorney</i>		DISTRICT NO.	PARTY <i>D</i>	DATE OF ELECTION													
	DATES OF REPORTING PERIOD <table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>1</td><td>1</td><td>10</td></tr> </table> TO <table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>5</td><td>3</td><td>10</td></tr> </table>		MO.	DAY	YEAR	1	1	10	MO.	DAY	YEAR	5	3	10	CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>			FOR OFFICE USE ONLY RECEIVED 2010 MAY -7 P 2:40 OFFICE OF VOTER SERVICES MONTG. CO. PA.
	MO.	DAY	YEAR															
	1	1	10															
	MO.	DAY	YEAR															
	5	3	10															
	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 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

7 DAY OF May 2010

[Signature]
 SIGNATURE OF PERSON SUBMITTING REPORT
Peter C. Amuso
 PRINTED NAME

215 805-4765
 AREA CODE DAYTIME TELEPHONE NUMBER

[Signature]
 SIGNATURE
 COMMONWEALTH OF PENNSYLVANIA
 MY COMMISSION EXPIRES 2010
 NOTARIAL SEAL DAY YR
 JULIA A. FONTANEZ, Notary Public
 Norristown Boro., Montgomery County
 My Commission Expires November 16, 2010

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

 SIGNATURE

 AREA CODE DAYTIME TELEPHONE NUMBER

MY COMMISSION EXPIRES _____
 MO. DAY YR.