

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 WALTER I HOFMAN											
STREET ADDRESS 707 BOWMAN AVE											
CITY MERION STATION				STATE PA		ZIP CODE 19066-					
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.		PARTY		DATE OF ELECTION		
6TH TUESDAY PRE-PRIMARY		CORONER			AL		Dem		MO. DAY YEAR		
2ND FRIDAY PRE-PRIMARY		MONTGOMERY COUNTY			AL		Dem		MO. DAY YEAR		
30 DAY POST-PRIMARY		MONTGOMERY COUNTY			AL		Dem		MO. DAY YEAR		
6TH TUESDAY PRE-ELECTION		MONTGOMERY COUNTY			AL		Dem		MO. DAY YEAR		
2ND FRIDAY PRE-ELECTION		MONTGOMERY COUNTY			AL		Dem		MO. DAY YEAR		
30 DAY POST-ELECTION		MONTGOMERY COUNTY			AL		Dem		MO. DAY YEAR		
ANNUAL REPORT		MONTGOMERY COUNTY			AL		Dem		MO. DAY YEAR		
		DATES OF REPORTING PERIOD			TO				FOR OFFICE USE ONLY		
		MO. DAY YEAR			MO. DAY YEAR				RECEIVED		
		10 19 10			11 22 10				OFFICE OF VOTER SERVICES MONTG. CO PA 2010 NOV 30 P 12:43		
		CASH BALANCE AT END OF REPORTING PERIOD: \$			0				RECEIVED		
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$			0				RECEIVED		
		AMENDMENT REPORT?		YES		NO	<input checked="" type="checkbox"/>				
		TERMINATION REPORT?		YES		NO	<input checked="" type="checkbox"/>				

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
 29th DAY OF November 2010

Kathy L. Phifer
 SIGNATURE
 COMMONWEALTH OF PENNSYLVANIA
 MY COMMISSION EXPIRES: DAY YR.
 Kathy L. Phifer, Notary Public
 Norristown Boro, Montgomery County
 My Commission Expires May 9, 2013

Walter I. Hofman
 SIGNATURE OF PERSON SUBMITTING REPORT
 WALTER I. HOFMAN
 PRINTED NAME
 610 664 5954
 AREA CODE DAYTIME TELEPHONE NUMBER

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
 29th DAY OF November 2010

Kathy L. Phifer
 SIGNATURE
 COMMONWEALTH OF PENNSYLVANIA
 MY COMMISSION EXPIRES: DAY YR.
 Kathy L. Phifer, Notary Public
 Norristown Boro, Montgomery County
 My Commission Expires May 9, 2013

 SIGNATURE OF CANDIDATE

 PRINTED NAME

 AREA CODE DAYTIME TELEPHONE NUMBER

COMMONWEALTH OF PENNSYLVANIA
 Notary Seal
 Kathy L. Phifer, Notary Public
 Norristown Boro, Montgomery County
 My Commission Expires May 9, 2013
 Member, Pennsylvania Association of Notaries