

CAMPAIGN FINANCE REPORT

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number: ▶	Report Filed By: ▶	CANDIDATE ^{1.}	COMMITTEE ^{2.} <input checked="" type="checkbox"/>	LOBBYIST ^{3.} <input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist: HANES FOR REGISTER OF WILLS				
Street Address: 313 MARVIN ROAD				
City: ELKINS PARK		State: PA	Zip Code: 19027 -	
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY ^{1.}	2ND FRIDAY PRE-PRIMARY ^{2.} <input checked="" type="checkbox"/>	30 DAY POST PRIMARY ^{3.}	AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION ^{4.}	2ND FRIDAY PRE-ELECTION ^{5.}	30 DAY POST ELECTION ^{6.}	TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
	ANNUAL REPORT ^{7.}	YEAR	FILING METHOD () CHECK ONE ▶	PAPER <input checked="" type="checkbox"/> DISKETTE <input type="checkbox"/>
Name of Office Sought by Candidate: MONTGOMERY COUNTY REGISTER OF WILLS AND CLERK OF THE ORPHANS' COURT			DATE OF ELECTION	
			MO. DAY YEAR	District Number
			5 17 2011	Office Code
				Party Code
				County Code
(SEE INSTRUCTIONS FOR CODES)				

Summary of Receipts and Expenditures from: ▶	MO. DAY YEAR	To	MO. DAY YEAR	FOR OFFICE USE ONLY RECEIVED JUN MAY -6 P 1:59 OFFICE OF VOTER SERVICES MONTG. CO PA	
	12 31 2010		5 2 2011		
	A. Amount Brought Forward From Last Report	\$	1636.87		
	B. Total Monetary Contributions and Receipts (From Schedule I)	\$	1150.00		
	C. Total Funds Available (Sum of Lines A and B)	\$	12786.87		
	D. Total Expenditures (From Schedule III)	\$	3737.40		
	E. Ending Cash Balance (Subtract Line D from Line C)	\$	9049.47		
	F. Value of In-Kind Contributions Received (From Schedule II)	\$	1415.42		
G. Unpaid Debts and Obligations (From Schedule IV)	\$	00.00			

AFFIDAVIT SECTION

PART I - 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 or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL DONNA L. MORPHY, Notary Public Jenkintown Boro., Montgomery County My Commission Expires May 9, 2011 Signature: <i>Donna L. Morphy</i> MO. DAY YR.	Signature of Person Submitting Report <i>Edward Lichstein</i> EDWARD LICHSTEIN Printed Name 215 635-3154 Area Code Daytime Telephone Number
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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, No. 320) as amended.

Sworn to and subscribed before me this

COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL DONNA L. MORPHY, Notary Public Jenkintown Boro., Montgomery County My Commission Expires May 9, 2011 Signature: <i>Donna L. Morphy</i> MO. DAY YR.	Signature of Candidate <i>D. Bruce Hanes</i> D. BRUCE HANES Printed Name 215 813-1400 Area Code Daytime Telephone Number
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CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$ 250.00

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ 600.00
All Other Contributions (Part B)	\$ 5450.00
TOTAL for the Reporting Period	(2) \$ 6050.00

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ 500.00
All Other Contributions (Part D)	\$ 4350.00
TOTAL for the Reporting Period	(3) \$ 4850.00

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period	(4) \$ 00.00

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)</i>	\$ 11150.00
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PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
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	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributing Committee OBERMAYER REBMAN MAXWELL PAC	3	21	2011	\$ 250.00
Mailing Address 1617 JOHN F. KENNEDY BLVD.				\$
City PHILADELPHIA				\$
State PA				
Zip Code (Plus 4) 19103-				
Full Name of Contributing Committee TIM BRIGGS FOR STATE REP.	4	7	2011	\$ 100.00
Mailing Address PO BOX 62193				\$
City KING OF PRUSSIA				\$
State PA				
Zip Code (Plus 4) 19406				
Full Name of Contributing Committee TIMONEY KNOX PAC	4	7	11	\$ 250.00
Mailing Address 400 MARYLAND DR.				\$
City FORT WASHINGTON				\$
State PA				
Zip Code (Plus 4) 19034				
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				
Zip Code (Plus 4)				
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				
Zip Code (Plus 4)				
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				
Zip Code (Plus 4)				
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				
Zip Code (Plus 4)				
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				
Zip Code (Plus 4)				

PAGE TOTAL
\$ 600.00

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PART B
ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.
 (Exclude contributions from political committees reported in Part A.)

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
STEPHEN McCARTER	2	9	2011	\$ 125.00
Mailing Address 211 W. WAVERY RD.	MO.	DAY	YEAR	\$
City GREENSIDE	MO.	DAY	YEAR	\$
State PA	Zip Code (Plus 4) 19038			
JANET AMACHER	2	9	2011	\$ 125.00
Mailing Address 311 N. SUMNEYTOWN PIKE	MO.	DAY	YEAR	\$
City NORTH WALES	MO.	DAY	YEAR	\$
State PA	Zip Code (Plus 4) 19454			
FELDMAN AND FELDMAN	2	9	2011	\$ 250.00
Mailing Address 820 HOLMESTEAD RD.	MO.	DAY	YEAR	\$
City JENKINTOWN	MO.	DAY	YEAR	\$
State PA	Zip Code (Plus 4) 19046			
PETER STERN	2	9	2011	\$ 100.00
Mailing Address 209 FERNBROOK AVE.	MO.	DAY	YEAR	\$
City WYNCOTE	MO.	DAY	YEAR	\$
State PA	Zip Code (Plus 4) 19095			
HAROLD COHEN	2	9	2011	\$ 250.00
Mailing Address 101 EAST BELLS MILL RD.	MO.	DAY	YEAR	\$
City PHILADELPHIA	MO.	DAY	YEAR	\$
State PA	Zip Code (Plus 4) 19118			
DOUGLAS PIKE	2	9	2011	\$ 125.00
Mailing Address 1579 MAPLE AVE.	MO.	DAY	YEAR	\$
City PADLI	MO.	DAY	YEAR	\$
State PA	Zip Code (Plus 4) 19301			
JOANNE OLSZEWSK	2	9	2011	\$ 100.00
Mailing Address 1260 HOLSTEIN COURT	MO.	DAY	YEAR	\$
City BLUE BELL	MO.	DAY	YEAR	\$
State PA	Zip Code (Plus 4) 19422			
ROTH DAMSKER	2	9	2011	\$ 100.00
Mailing Address 7840 CEDAR LANE	MO.	DAY	YEAR	\$
City ELKINS PARK	MO.	DAY	YEAR	\$
State PA	Zip Code (Plus 4) 19027			

PAGE TOTAL
\$ 1175.00

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

PART B
ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A.)

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
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	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributor ROBERT SLUTSKY	2	9	11	\$ 125.00
Mailing Address 1950 BUTLER PIKE	MO.	DAY	YEAR	\$
City CONSHOHOCKEN State PA Zip Code (Plus 4) 19428	MO.	DAY	YEAR	\$
Full Name of Contributor MANNION PRIOR	2	17	11	\$ 250.00
Mailing Address 840 FIRST AVE., STE 100	MO.	DAY	YEAR	\$
City KING OF PRUSSIA State PA Zip Code (Plus 4) 19406	MO.	DAY	YEAR	\$
Full Name of Contributor DANIEL MUROFF	2	22	11	\$ 150.00
Mailing Address 328 WADSWORTH AVE.	MO.	DAY	YEAR	\$
City PHILADELPHIA State PA Zip Code (Plus 4) 19119-	MO.	DAY	YEAR	\$
Full Name of Contributor MARGARET PHIAMBOLIS	3	11	11	\$ 100.00
Mailing Address 1012 BETHLEHEM PIKE	MO.	DAY	YEAR	\$
City SPRINGHOUSE State PA Zip Code (Plus 4) 19477	MO.	DAY	YEAR	\$
Full Name of Contributor DAVID BUFULCO	4	7	11	\$ 100.00
Mailing Address 761 NORTH CROSKY ST.	MO.	DAY	YEAR	\$
City PHILADELPHIA State PA Zip Code (Plus 4) 19130	MO.	DAY	YEAR	\$
Full Name of Contributor MARTIN BURMAN	4	7	11	\$ 100.00
Mailing Address 72 LANCASTER AVE.	MO.	DAY	YEAR	\$
City MALVERN State PA Zip Code (Plus 4) 19355	MO.	DAY	YEAR	\$
Full Name of Contributor JOHN DIPETRO	4	7	11	\$ 200.00
Mailing Address 2116 OLD ARCH RD.	MO.	DAY	YEAR	\$
City E. NORRTON State PA Zip Code (Plus 4) 19401	MO.	DAY	YEAR	\$
Full Name of Contributor JEFFREY HARBISON	4	7	11	\$ 100.00
Mailing Address 530 SPRING LANE	MO.	DAY	YEAR	\$
City WYNDMOOR State PA Zip Code (Plus 4) 19038	MO.	DAY	YEAR	\$

PAGE TOTAL
\$1125.00

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

PART B
ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A.)

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
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	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributor MICHAEL SULLIVAN	4	7	11	\$ 250.00
Mailing Address 15 CLEARVIEW AVE.	MO.	DAY	YEAR	\$
City CHALFONT	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 18914	MO.	DAY	YEAR	\$
Full Name of Contributor PENELOPE CUTLER	4	7	11	\$ 100.00
Mailing Address 901 HOMESTEAD RD.	MO.	DAY	YEAR	\$
City JENKINTOWN	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 19046	MO.	DAY	YEAR	\$
Full Name of Contributor ROBERT BILLET	4	7	11	\$ 250.00
Mailing Address 36 MULBERRY LANE	MO.	DAY	YEAR	\$
City ELKINS PARK	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 19027	MO.	DAY	YEAR	\$
Full Name of Contributor JASON SALUS	4	7	11	\$ 100.00
Mailing Address 210 MAPLE ST.	MO.	DAY	YEAR	\$
City CONSHOHOCKEN	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 19428	MO.	DAY	YEAR	\$
Full Name of Contributor REGINA CREEDON	4	7	11	\$ 100.00
Mailing Address 4 SALJON COURT	MO.	DAY	YEAR	\$
City MAPLE GLEN	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 19002	MO.	DAY	YEAR	\$
Full Name of Contributor CRAIG BRADY	4	7	11	\$ 100.00
Mailing Address 728 STANBRIDGE ST.	MO.	DAY	YEAR	\$
City NORRISTOWN	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 19401	MO.	DAY	YEAR	\$
Full Name of Contributor RONIN ACQUISITIONS	4	7	11	\$ 250.00
Mailing Address P.O. BOX 16873	MO.	DAY	YEAR	\$
City PHILADELPHIA	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 19142	MO.	DAY	YEAR	\$
Full Name of Contributor MICHELLE BERK	4	7	11	\$ 100.00
Mailing Address 11 WEST AVE., SUITE 202	MO.	DAY	YEAR	\$
City WAYNE	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 19087	MO.	DAY	YEAR	\$

PAGE TOTAL
\$ 1250.00

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

PART B
ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A.)

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
---	---

	DATE			AMOUNT
Full Name of Contributor	MO.	DAY	YEAR	
DON BENN	4	7	11	\$ 100.00
Mailing Address	MO.	DAY	YEAR	\$
2502 VINCENT WAY				
City	MO.	DAY	YEAR	\$
E. NORRITON PA 19401				
EMMETT MADDEN	4	7	11	\$ 200.00
Mailing Address	MO.	DAY	YEAR	\$
101 GREENWOOD AVE. SUITE 500				
City	MO.	DAY	YEAR	\$
JENKINTOWN PA 19046				
W. WALLACE DYER	4	7	11	\$ 100.00
Mailing Address	MO.	DAY	YEAR	\$
542 W. ELLET ST.				
City	MO.	DAY	YEAR	\$
PHILADELPHIA PA 19119				
BARRY YACHES	4	7	11	\$ 250.00
Mailing Address	MO.	DAY	YEAR	\$
400 GREENWOOD AVE.				
City	MO.	DAY	YEAR	\$
WYNCOTE PA 19095				
SALVATORE PAPARONE	4	7	11	\$ 250.00
Mailing Address	MO.	DAY	YEAR	\$
1520 BROOKFIELD ST.				
City	MO.	DAY	YEAR	\$
YARDLEY PA 19067				
A. J. TENNEY	4	7	11	\$ 250.00
Mailing Address	MO.	DAY	YEAR	\$
801 EAST WALNUT ST.				
City	MO.	DAY	YEAR	\$
NORTH WALES PA 19454				
CLIFFORD GOLDSTEIN	4	7	11	\$ 100.00
Mailing Address	MO.	DAY	YEAR	\$
309 MARVIN RD.				
City	MO.	DAY	YEAR	\$
ELKINS PARK PA 19027				
THOMAS JENNINGS	4	7	11	\$ 100.00
Mailing Address	MO.	DAY	YEAR	\$
1030 FARMAL COURT				
City	MO.	DAY	YEAR	\$
YARDLEY PA 19067				

PAGE TOTAL
\$ 1350.00

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

**PART B
ALL OTHER CONTRIBUTIONS**

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A.)

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
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				DATE	AMOUNT
Full Name of Contributor	MO.	DAY	YEAR		
ROBERT PAUL	4	7	11	\$	250.00
Mailing Address 345 N. BOWMAN AVE.	MO.	DAY	YEAR	\$	
City MERION STATION	MO.	DAY	YEAR	\$	
State PA				\$	
Zip Code (Plus 4) 19066				\$	
LARRY SCHWARTZ	4	24	11	\$	100.00
Mailing Address 1 GODFREY COURT	MO.	DAY	YEAR	\$	
City MT. LAUREL	MO.	DAY	YEAR	\$	
State NJ				\$	
Zip Code (Plus 4) 80544				\$	
SCOTT MUSTIN	4	24	11	\$	100.00
Mailing Address 1507 GLIFF RD.	MO.	DAY	YEAR	\$	
City WYNNEWOOD	MO.	DAY	YEAR	\$	
State PA				\$	
Zip Code (Plus 4) 19096				\$	
GARY DAHMS	4	30	11	\$	100.00
Mailing Address 2112 CASTLETON COURT	MO.	DAY	YEAR	\$	
City ALLENWOOD	MO.	DAY	YEAR	\$	
State NJ				\$	
Zip Code (Plus 4) 87200				\$	
Full Name of Contributor	MO.	DAY	YEAR	\$	
Mailing Address	MO.	DAY	YEAR	\$	
City	MO.	DAY	YEAR	\$	
State				\$	
Zip Code (Plus 4)				\$	
Full Name of Contributor	MO.	DAY	YEAR	\$	
Mailing Address	MO.	DAY	YEAR	\$	
City	MO.	DAY	YEAR	\$	
State				\$	
Zip Code (Plus 4)				\$	
Full Name of Contributor	MO.	DAY	YEAR	\$	
Mailing Address	MO.	DAY	YEAR	\$	
City	MO.	DAY	YEAR	\$	
State				\$	
Zip Code (Plus 4)				\$	
Full Name of Contributor	MO.	DAY	YEAR	\$	
Mailing Address	MO.	DAY	YEAR	\$	
City	MO.	DAY	YEAR	\$	
State				\$	
Zip Code (Plus 4)				\$	

PAGE TOTAL
\$ 550.00

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

PART C

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

OVER \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value over \$250.00 in the reporting period.

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
---	---

	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributing Committee PA LIBERTY FUND	2	9	2011	\$ 500.00
Mailing Address 101 GREENWOOD AVE., SUITE 500	MO.	DAY	YEAR	\$
City JENKINTOWN State PA Zip Code (Plus 4) 19046	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 500.00

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
---	---

	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributor RICHARD SAND	2	9	2011	\$ 500.00
Mailing Address 8201 FENTON AVE.	MO.	DAY	YEAR	\$
City LAVEROCK	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 19038	MO.	DAY	YEAR	\$
Employer Name SAND & SAIDEL	Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 113 S. 21ST ST. PHILA., PA 19103				
Full Name of Contributor KATHERINE DALEY	2	9	2011	\$ 500.00
Mailing Address 8201 FENTON AVE.	MO.	DAY	YEAR	\$
City LAVEROCK	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 19038	MO.	DAY	YEAR	\$
Employer Name SPRINGSIDE SCHOOL	Occupation EDUCATOR			
Employer Mailing Address/Principal Place of Business CHEROKEE ST., PHILA., PA 19118				
Full Name of Contributor MICHAEL HINKSON	4	7	11	\$ 350.00
Mailing Address 1908 MIDFIELD AVE.	MO.	DAY	YEAR	\$
City FEASTERVILLE	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 19053	MO.	DAY	YEAR	\$
Employer Name PAPERLESS SOLUTIONS, INC.	Occupation COMPANY CEO			
Employer Mailing Address/Principal Place of Business 3494 PROGRESS DR., BENSALEM, PA 19020				
Full Name of Contributor EDWARD RUDOLPH	4	7	11	\$ 500.00
Mailing Address 8 NESHAMINEY INTERPLEX #215	MO.	DAY	YEAR	\$
City TREVOSE	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 19053	MO.	DAY	YEAR	\$
Employer Name RUDOLPH, CLARKE & KIRK	Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 8 NESHAMINEY INTERPLEX, #215, TREVOSE, PA 19053				
Full Name of Contributor PAMELA CLARKE	4	7	11	\$ 500.00
Mailing Address 506 LANTERN LANE	MO.	DAY	YEAR	\$
City PHILADELPHIA	MO.	DAY	YEAR	\$
State PA	MO.	DAY	YEAR	\$
Zip Code (Plus 4) 19128	MO.	DAY	YEAR	\$
Employer Name DELVA HEALTH CARE COUNCIL	Occupation VICE PRESIDENT			
Employer Mailing Address/Principal Place of Business 1835 MARKET ST. PHILA. PA 19102				

Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 2350.00

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
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				DATE			AMOUNT
Full Name of Contributor	MO.	DAY	YEAR				
DAVID BUSCH	4	7	11	\$	500.00		
Mailing Address 1200 NEW CHURCH COURT	MO.	DAY	YEAR	\$			
City AMBLER	MO.	DAY	YEAR	\$			
State PA	Zip Code (Plus 4) 19002			\$			
Employer Name KEYSTONE ALLIANCE CONSULTING	Occupation CONSULTANT						
Employer Mailing Address/Principal Place of Business 1200 NEW CHURCH COURT, AMBLER, PA 19002							
DENNIS L. FRIEDMAN	4	7	11	\$	1000.00		
Mailing Address 455 LEVERING MILL RD.	MO.	DAY	YEAR	\$			
City BALA CYNWD	MO.	DAY	YEAR	\$			
State PA	Zip Code (Plus 4) 19004			\$			
Employer Name DENNIS L. FRIEDMAN, ESQ.	Occupation ATTORNEY						
Employer Mailing Address/Principal Place of Business 1515 MARKET ST. STE 714, PHILA, PA 19102							
DANIEL MULLEN	4	24	11	\$	500.00		
Mailing Address 24 ANVIL LANE	MO.	DAY	YEAR	\$			
City WARRINGTON	MO.	DAY	YEAR	\$			
State PA	Zip Code (Plus 4) 18976			\$			
Employer Name CARROL ENGINEERING	Occupation COMPANY CFO						
Employer Mailing Address/Principal Place of Business 949 EASTON RD., WARRINGTON, PA 18976							
Full Name of Contributor	MO.	DAY	YEAR	\$			
Mailing Address	MO.	DAY	YEAR	\$			
City	MO.	DAY	YEAR	\$			
State	Zip Code (Plus 4)			\$			
Employer Name	Occupation						
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor	MO.	DAY	YEAR	\$			
Mailing Address	MO.	DAY	YEAR	\$			
City	MO.	DAY	YEAR	\$			
State	Zip Code (Plus 4)			\$			
Employer Name	Occupation						
Employer Mailing Address/Principal Place of Business							

Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$2000.00

**PART E
OTHER RECEIPTS**

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
---	---

Full Name							Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount	\$						
Receipt Description													
Full Name							Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount	\$						
Receipt Description													
Full Name							Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount	\$						
Receipt Description													
Full Name							Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount	\$						
Receipt Description													
Full Name							Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount	\$						
Receipt Description													
Full Name							Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount	\$						
Receipt Description													
Full Name							Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount	\$						
Receipt Description													

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 00.00

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
---	---

1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 00.00

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 00.00

3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$ 1415.42

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)	\$ 1415.42
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**SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED**
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
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				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL
\$ 00.00

**SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00**

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
---	---

	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributor RICHARD SAND	2	9	2011	\$ 486.20
Mailing Address 8201 FENTON AVE.	MO.	DAY	YEAR	\$
City LAVEROCK State PA Zip Code (Plus 4) 19038-	MO.	DAY	YEAR	\$
Employer of Contributor SAND & SAIDEL				Occupation
Employer Mailing Address/Principal Place of Business 113 S. 21ST ST., PHILA. PA 19103				Description of Contribution EVENT FOOD, BEVERAGE
Full Name of Contributor RUDOLPH, CLARKE & KIRK	4	7	2011	\$ 929.22
Mailing Address 8 NESHAMINY INTERPLEX	MO.	DAY	YEAR	\$
City TREVOSE State PA Zip Code (Plus 4) 19053	MO.	DAY	YEAR	\$
Employer of Contributor SAME				Occupation LAW FIRM
Employer Mailing Address/Principal Place of Business SAME				Description of Contribution EVENT, FOOD, BEVERAGE
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer of Contributor				Occupation
Employer Mailing Address/Principal Place of Business				Description of Contribution
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer of Contributor				Occupation
Employer Mailing Address/Principal Place of Business				Description of Contribution
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer of Contributor				Occupation
Employer Mailing Address/Principal Place of Business				Description of Contribution

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 1415.42

SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
---	---

To Whom Paid	MO.	DAY	YEAR	Amount	Description of Expenditure
HEE FOR DEEDS	1	30	11	\$ 275.00	CONTRIBUTION
Mailing Address PO BOX 41					
City ABINGTON	State PA	Zip Code (Plus 4) 19001			
NORRISTOWN NAACP	2	13	11	\$ 350.00	CONTRIBUTION
Mailing Address PO BOX 201					
City NORRISTOWN	State PA	Zip Code (Plus 4) 19404			
JASON SALUS FOR TREASURER	2	16	11	\$ 100.00	CONTRIBUTION
Mailing Address 210 MAPLE ST.					
City CONSHOHOCKEN	State PA	Zip Code (Plus 4) 19428			
CHELTENHAM PRINTING	2	27	11	\$ 296.80	CAMPAIGN MATERIAL
Mailing Address 518 RYERS AVE.					
City CHELTENHAM	State PA	Zip Code (Plus 4) 19012			
UPPER DUBLIN DEMOCRATS	2	27	11	\$ 35.00	CONTRIBUTION
Mailing Address P.O. BOX 1182					
City FT. WASHINGTON	State PA	Zip Code (Plus 4) 19034			
MONTGOMERY COUNTY DEM. COMM.	3	16	11	\$ 510.60	CONTRIBUTION,
Mailing Address 21 EAST AIRY ST.					
City NORRISTOWN	State PA	Zip Code (Plus 4) 19401			
COMM. TO ELECT ELIZABETH MEUGH	3	15	11	\$ 100.00	CONTRIBUTION
Mailing Address 7868 SPRING AVE.					
City ELKINS PARK	State PA	Zip Code (Plus 4) 19027			
MUNICIPALITY OF NORRISTOWN	3	21	11	\$ 100.00	ELECTRONIC CAMPAIGN
Mailing Address 235 EAST AIRY ST.					
City NORRISTOWN	State PA	Zip Code (Plus 4) 19401			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL
\$2767.40

SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
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To Whom Paid	MO.	DAY	YEAR	Amount
ABINGTON ROCKLEDGE DEM. COMMITTEE	4	5	11	\$ 205.00
Mailing Address PO BOX 132	Description of Expenditure ELECTRONIC CAMPAIGN			
City ABINGTON	State PA	Zip Code (Plus 4) 19001		ADVERTISEMENT
ABINGTON ROCKLEDGE DEM. COMMITTEE	4	11	11	\$ 15.00
Mailing Address PO BOX 132	Description of Expenditure CONTRIBUTION			
City ABINGTON	State PA	Zip Code (Plus 4) 19001		
CITIZENS FOR NORRISTOWN	4	22	11	\$ 100.00
Mailing Address P.O. BOX 337	Description of Expenditure CONTRIBUTION			
City NORRISTOWN	State PA	Zip Code (Plus 4) 19401		
CHELtenham DEM. COMMITTEE	4	25	11	\$ 650.00
Mailing Address 209 FERNBROOK AVE.	Description of Expenditure CONTRIBUTION			
City WYNCOTE	State PA	Zip Code (Plus 4) 19095		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL
\$ 970.00

**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.

Name of Filing Committee or Candidate HANES FOR REGISTER OF WILLS	Reporting Period From 12-31-10 To 5-2-11
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Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City	State	Zip Code (Plus 4)				
Description of Debt						

Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City	State	Zip Code (Plus 4)				
Description of Debt						

Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City	State	Zip Code (Plus 4)				
Description of Debt						

Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City	State	Zip Code (Plus 4)				
Description of Debt						

Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City	State	Zip Code (Plus 4)				
Description of Debt						

Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City	State	Zip Code (Plus 4)				
Description of Debt						

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

PAGE TOTAL
\$ 00.00