

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 <i>Jenny Brown</i>																		
STREET ADDRESS <i>2 Gunning Ln</i>																		
CITY <i>Etadegne</i>		STATE <i>PA</i>	ZIP CODE <i>19035 -</i>															
TYPE OF REPORT (CHECK ONE) 1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY <input checked="" type="checkbox"/> 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT	NAME OF OFFICE SOUGHT BY CANDIDATE <i>County Commissioner</i>		DISTRICT NO.	PARTY <i>R</i>	DATE OF ELECTION													
	DATES OF REPORTING PERIOD <table border="1" style="display: inline-table; margin-right: 10px;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>5</td><td>3</td><td>11</td></tr> </table> TO <table border="1" style="display: inline-table;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>6</td><td>6</td><td>11</td></tr> </table>		MO.	DAY	YEAR	5	3	11	MO.	DAY	YEAR	6	6	11			FOR OFFICE USE ONLY	
	MO.	DAY	YEAR															
	5	3	11															
	MO.	DAY	YEAR															
	6	6	11															
	CASH BALANCE AT END OF REPORTING PERIOD: \$ <i>0</i>		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <i>0</i>		RECEIVED 2011 JUN 10 P 12:18 VOTER SERVICES MONTE CO. PA													
	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 <i>9</i> DAY OF <i>June</i> <i>Beverly Green</i> SIGNATURE MY COMMISSION EXPIRES <i>6</i> <i>22</i> <i>11</i> MO. DAY YR.	COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL BEVERLY GREEN, Notary Public <i>West Conchohocken Boro., Montgomery Co</i> <i>My Commission Expires June 22, 2011</i>	SIGNATURE OF PERSON SUBMITTING REPORT <i>Jenny Brown</i> PRINTED NAME AREA CODE <i>610</i> DAYTIME TELEPHONE NUMBER <i>520-1614</i>
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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 MY COMMISSION EXPIRES _____ MO. DAY YR.	SIGNATURE OF CANDIDATE _____ PRINTED NAME _____ AREA CODE _____ DAYTIME TELEPHONE NUMBER _____
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