## 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	•					ORT FILED BEHALF OF	<b>▶</b> CA	INDIDATE	' X	COMMITTEE	2	LOBBYIST	, ,
NAME OF FILING COMM		ANDIDATE OR LOBBYIST ICE Hanes							<b>I</b>		<b></b>	<b></b>	
SIRELI AUDRESS	313 N	larvin Road								* *************************************			
Elkins Park						STATE PA			ZIP CODE 19027				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE Montgomery County Register of Wills and Clerk of Orphans' Court				DISTRICT NO.		PARTY Democratic		MO.	····		
6th tuesday pre-primary	ļ†	-								5 FOR 0	17 FFICE	USE ONLY	<u> </u>
2nd friday pre-primary	2	OATES OF REPORTING PERIOD		2011 TO	мо. 6	6 201							
30 DAY POST-PRIMARY 6TH TUESDAY	3 X 4.	CASH BALANCE AT END OF REPORTING PERIOD:  TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES OTHER OF REPORTING PERIOD:  OUTSTANDING DEBTS OR LIABILITIES OUTSTANDING DEBTS OR LIABILITIES OTHER OF REPORTING PERIOD:  OUTSTANDING DEBTS OR LIABILITIES OUTSTANDIN									OF 1102	开	
PRE-ELECTION  2ND FRIDAY PRE-ELECTION	5.												
30 day post-election	6.		AMENDMENT REPORT?	YES	СМ	×				SUCS.	ī;	5 5	M
ANNUAL REPORT	7.		TERMINATION REPORT?	YES	NO	X				/		57	
				AFFIDA	VIT	SECTION	ł		1				
statement is	filed o	on behalf of a <u>Po</u> on behalf of a <u>Ca</u> on behalf of a <u>Co</u>	ndidate, the	Candidate	must	sign here	<b>)</b> .	_	Trea	surer mu:	st sig	ın her <b>e</b>	•
I SWEAR (OR AFFI	RM) THA	T THE AGGREGATE RECE ID FIFTY DOLLARS (\$25)	PTS OR DISGURSE	EMENTS OR UA	BILITIES	NCURRED DU		THE POP		ERIOD INDICA JE, CORPECT			
. = ok	and su ay of _	BSCRIBED BEFORE ME		e0 <u>//</u>	#	\\ • <i>\\</i> /		~	U) SON SI	JBMITTING R	EPORT	T	
SIGNATURE  MAY COMMISSION EVENESS  MAY COMMISSION EVENESS  11 - 30 - 2014						PRINTED NAME 215 813-1400							•••
MY COMMIS INONWEALTH		MQ.	DAY YR.			AREA CODE		Đ,	AYTIME	TELEPHONE	NUM	BER	
THLEEN M. ACC	AL SE	AL Noteer Publis a <u>Ca</u> mery County											
	NOV	ruber 30 2014 or 1333, No. 320) As	MY KNOWLEDGE A AMENDED.	AND BELIEF TH:	S POLITI	CAL COMMITTI	EE HA!	S NOT VIOL	ATED A	NY PROVISICI	NS OF	THE ACT O	F
SWORN TO AND SUBSCRIBED BEFORE ME THIS						SIGNATURE OF CANDIDATE						-	
	DAY OF 20					PRINTED NAME							
		SIGNATURE		<del></del>	_								
MY COMMIS	SION EX	MO.	DAY YR.			AREA CODE		D	AYTIME	TELEPHONE	NUM	BER	