

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: <input type="checkbox"/>		Report Filed By: <input type="checkbox"/>		CANDIDATE ^{1.}		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST ^{3.}	
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF JOE HOFFEL									
Street Address: 21 E. AIRY ST									
City: NORRISTOWN				State: PA		Zip Code: 19401 -			
TYPE OF REPORT (place X to the right of report type)	5TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	YES	NO
	5TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	YES	NO
	ANNUAL REPORT	7.	YEAR 2011		FILING METHOD <input checked="" type="checkbox"/> CHECK ONE		PAPER	<input checked="" type="checkbox"/>	DISKETTE

Name of Office Sought by Candidate: COUNTY COMMISSIONER				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
				MO.	DAY	YEAR				
				11	8	2011				
(SEE INSTRUCTIONS FOR CODES)										

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY RECEIVED 2012 JAN 13 A 9 48 GA		
	1	1	2011		12	31	2011			
A. Amount Brought Forward From Last Report	\$		453.65							
B. Total Monetary Contributions and Receipts (From Schedule I)	\$		567.77							
C. Total Funds Available (Sum of Lines A and B)	\$		1,021.42							
D. Total Expenditures (From Schedule III)	\$		1,021.42							
E. Ending Cash Balance (Subtract Line D from Line C)	\$		0							
F. Value of In-Kind Contributions Received (From Schedule II)	\$		0							
G. Unpaid Debts and Obligations (From Schedule IV)	\$		0							

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 10 day of January, 2012

COMMONWEALTH OF PENNSYLVANIA
Notarial Seal
Patrick L. Pinski, Notary Public
Tredyfflin Twp., Chester County
My commission expires Sept. 16, 2015

[Signature]
Signature of Person Submitting Report
STEVE WICKE
Printed Name
484 **988-1014**
Area Code Daytime Telephone Number

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 13 day of January, 2012

NOTARIAL SEAL
ALVIN L. PINSKER
Notary Public
DOYLETOWN BORO, BUCKS CNTY
My Commission Expires Oct. 7, 2013

[Signature]
Signature of Candidate
JOSEPH M. HOFFEL
Printed Name
215 **983-7708**
Area Code Daytime Telephone Number

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate FRIENDS OF JOE HOEFFEL	Reporting Period From <u>1/1/11</u> To <u>12/31/11</u>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the Reporting Period	(1)	\$ 259.68

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

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

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)		
TOTAL for the Reporting Period	(4)	\$ 58.09

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)		\$ 567.77
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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 FRIENDS OF JOE HOFFEL	Reporting Period From <u>1/1/11</u> To <u>12/31/11</u>
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				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributing Committee PECO PAC				01	21	11	\$ 250.00
Mailing Address 2301 MARKET ST.							\$
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19101 -					\$
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)					\$
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)					\$

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

PAGE TOTAL
\$ 250.00

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 FRIENDS OF JOE HOEFFEL	Reporting Period From 1/1/11 To 12/31/11
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Full Name VERIZON						
Mailing Address 350 GRANITE ST						
City BRAINTREE	State MA	Zip Code (Plus 4) 02184 -	MO 01	DAY 21	YEAR 11	Amount \$ 58.09

Receipt Description
CREDIT BALANCE REFUND

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

PAGE TOTAL
\$ 58.09

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

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate FRIENDS OF JOE HOEFFEL	Reporting Period From <u>1/1/11</u> To <u>12/31/11</u>
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To Whom Paid NGP Van	MO.	DAY	YEAR	Amount
1225 EYE ST, NW	02	25	11	\$ 200.00
Mailing Address WASHINGTON	Description of Expenditure DATA SERVICES - FINAL PMT.			
City WASHINGTON	State DC	Zip Code (Plus 4) 20005		

To Whom Paid MONTGOMERY COUNTY YOUNG DEMOCRATS	MO.	DAY	YEAR	Amount
414 REVERE RD	12	29	11	\$ 821.42
Mailing Address LAFAYETTE HILL	Description of Expenditure DONATION			
City LAFAYETTE HILL	State PA	Zip Code (Plus 4) 19444-		

To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	Zip Code (Plus 4)			
	-			

To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	Zip Code (Plus 4)			
	-			

To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	Zip Code (Plus 4)			
	-			

To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	Zip Code (Plus 4)			
	-			

To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	Zip Code (Plus 4)			
	-			

To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	Description of Expenditure			
State	Zip Code (Plus 4)			
	-			

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

PAGE TOTAL
\$ 1,021.42