

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 <input checked="" type="checkbox"/>		COMMITTEE ^{2.} <input type="checkbox"/>		LOBBYIST ^{3.} <input type="checkbox"/>	
Name of Filing Committee, Candidate or Lobbyist: <i>William A Holt Jr</i>									
Street Address: <i>PO Box 483</i>									
City: <i>Willow Grove</i>					State: <i>PA</i>		Zip Code: <i>19090</i>		
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY <input checked="" type="checkbox"/>		2ND FRIDAY PRE-PRIMARY ^{2.} <input type="checkbox"/>		30 DAY POST PRIMARY ^{3.} <input type="checkbox"/>		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION ^{4.} <input type="checkbox"/>		2ND FRIDAY PRE-ELECTION ^{5.} <input type="checkbox"/>		30 DAY POST ELECTION ^{6.} <input type="checkbox"/>		TERMINATION REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>		
	ANNUAL REPORT ^{7.} <input type="checkbox"/>		YEAR: <i>2012</i>		FILING METHOD () CHECK ONE <input type="checkbox"/>		PAPER <input type="checkbox"/>		DISKETTE <input type="checkbox"/>

Name of Office Sought by Candidate: <i>Sheriff of Montgomery County</i>			DATE OF ELECTION			District Number	Office Code	Party Code	County Code
MO.	DAY	YEAR	MO.	DAY	YEAR	<i>46</i>	<i>OTH</i>	<i>DEM</i>	<i>DEM</i>
<i>11</i>	<i>8</i>	<i>2011</i>							

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR
A. Amount Brought Forward From Last Report							
B. Total Monetary Contributions and Receipts (From Schedule I)							
C. Total Funds Available (Sum of Lines A and B)							
D. Total Expenditures (From Schedule III)							
E. Ending Cash Balance (Subtract Line D from Line C)							
F. Value of In-Kind Contributions Received (From Schedule II)							
G. Unpaid Debts and Obligations (From Schedule IV)							

FOR OFFICE USE ONLY

2012 APR 12 P 2:03

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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 _____ day of _____ 20____

Signature _____

My commission expires MO. _____ DAY _____ YR. _____

Signature of Person Submitting Report _____

Printed Name _____

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 *15th* day of *April* 20 *12*

Signature *Allison Lian Masser*

My commission expires *Feb* MO. _____ DAY *11* YR. *2015*

Signature of Candidate *William A Holt Jr*

Printed Name *William A Holt Jr*

Area Code *215* Daytime Telephone Number *657 1281*

Department of State • Bureau of Commissions, Elections and Legislation
210 North Office Building • Harrisburg, PA 17120-0029 • (717) 781-5280

NOTARIAL SEAL
ALLISON LIAN MASSER
Notary Public
LOWER GWYNEDD TOWNSHIP, MONTGOMERY COUNTY
My Commission Expires Feb 11, 2015

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>William A. Nott Jr</i>	Reporting Period From <u>11/1/12</u> To <u>3/5/12</u>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$ <u>0.00</u>

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ <u>0.00</u>
All Other Contributions (Part B)	\$ <u>0.00</u>
TOTAL for the Reporting Period	(2) \$ <u>0.00</u>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ <u>0.00</u>
All Other Contributions (Part D)	\$ <u>0.00</u>
TOTAL for the Reporting Period	(3) \$ <u>0.00</u>

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period	(4) \$ <u>0.00</u>

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>	\$ <u>0.00</u>
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