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TYPE OF REPORT	PRE-PRIMA	AY 1. RY	2ND FRIDA	2.	30	DAY	3.				- /		_
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(place X to the right of	PRE-ELECTI	ON 7.	PRE-ELECTI	DN X		DAY	6.	TERMIN	ATION	YES		NO	X
report type)	REPORT		YEAR		FILIN	G METHOD					┽──┛	- (4703) 	
Name of Office Sou	ght by Candidate			-		CHECK ONE		PAP	28	X	DISKI	ETTE	
MONTGOME	er cour	by Ka	11sze-of	Wills/	MO.			District Number	Office Code	1	Party Code	Cou Co	
CIEFK	of Orpu	rang	Court	•	1								ae
		F.2.							SEE IN	STRUC	TIONS	FOR CO	DES)
ummary of R nd Expenditur	leceipts		DAY YEAN 15 201		MO.	161	AR	<u>in in F</u>	or off	ICE U	ise on	a y	.a. (.).
and the second				<u>4</u> To	10	22 201	2						
Amount Brough	Creatile in the second second	n Last Repor	t	\$	- 5	54.49	1						
Total Monetary	Contributions a	nd Receipts	(From Schedu	le I) Ş		50		Ś	2012 OCT 25 A II:		т		
Total Funds Ava			B)	\$		04.49			20	合	ן ר		
Total Expenditur				\$		750			G	Ċ)		
Ending Cash Bala				s		54.49		(MA)	25		1		
Value of In-Kind	d Contributions	Received (F	rom Schedule	10) \$		5 1.49		≚o	⊳	\leq			
Unpaid Debts and	d Obligations (i	rom Schedu	le (V)					ön ≞	A II:	П			
				*				<i>w</i>	Ē	\Box		_	
RT I - If this is	a Committee	CECONT trave	AFFI	DAVIT SEC	TION								
RT I — If this is wear (or affirm) the	t this report, inc	luding the atta	ched schedules	on non-	a Can	didate report	t, cand	lidete sig	here.			as fin dia	
wear (or affirm) that rect and complete,				on paper or	compute	ar diskette, are	to the	best of m	y knowle	adge ar	nd belie	af true,	
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commission expire		Short Schilds N	ay 9, 2015	F (-			<u> </u>	ted Name				···	
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$T \parallel - \parallel this is$	a report of a	Candidate's	Authorized C	ommittee,	candida	te shall/sign	here.			10.01.7			
ear (or affirm) that 1333, No. 320) as			and belief this p	olitical com	11119	has not fieldted	d any pi	rovisions	of the A	ct of J	June 3,	1937	
orn to and subscrib	112	.		_	1/1	$\mathcal{A}Mh$	\mathbf{V}						
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Jenkintow	n Baro., Menagom	Try County			Area	s Code		Daytir	ne Telep	hone N	lumber		
My Com	nicelon Expires M	× 9. 2015	• Bureau o	of Commis	sione	Elections and	1 ! -						
	210 North C	Office Buildin	ng 🗨 Harris	burg, PA	17120-	-0029 • (*	7 LOGIS 7 1 7) 7	12110N 187-529/	`				

isburg, PA 17120-0029 🌒 (717) 787-5280

PAGE 2 OF

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

of Filing Comm			<u> </u>	
 HANES	Sor	BGISTER.	op	wills

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r.

Reporting Period 51(5(1) From <u>545100</u>To <u>10/22/1</u>2,

UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER	CONT	RIBUTOR	
TOTAL for the Reporting Period	(1)		

2 CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	
All Other Contributions (Part B)	\$
	\$ 1850.
TOTAL for the Reporting Period (2)	\$ 1000
	1850-

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		
Contributions Received from Political Committees (Part C)	T	
All Other Contributions (Part D)	\$	<u> </u>
	\$	500-
TOTAL for the Reporting Period (3)	\$	500-
		500

4. UTHER RECEIPTS - REFUNDS,	INTEREST	EARNED,	RETURNED	CHECKS,	ETC	FROM	PART E)
			eporting Per		(4)			

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.)	\$ 2350 -

ALL OTHER CONTR		PAGE 3 OF 6
\$50.01 TO \$250.0 Use this Part to itemize all other contributions \$50.01 to \$250.00 in the repo		
\$50.01 to \$250.00 in the repo (Exclude contributions from political comm Name of Filing Committee or Candidate	orting period.	value from
HANES For Register of Wills	Reporting Perio	15/12 To 10/22/12
Full Name of Contributor		
Robert Lefeure	MO. DAY YE	AMOUNT
City 285 E. 3rd Ave	MO. DAY YEA	<u> </u>
College units	MO. DAY YEA	\$
Full Name of Contributor		\$
Mailing Address Mailing Address	MO. DAY YEA	
2605 N. Broad 57. Box 1277	MO. DAY YEA	R S
City LANSDALE State Zip Code (Plus 4) LANSDALE PA 19446	MO. DAY YEA	R
Full Name of Contributor Robert Slutsky Mailing Address	MO. DAY YEAT	\$
Mailing Address 121 Black Walnut LA	8 16 12	\$ 150-
City PLUMOURU March State Zip Code (Plus 4)	MO. DAY YEAR	\$
City PLYMOU7H Meering State Zip Code (Plus 4) Full Name of Contributor	MO. DAY YEAR	\$
Mailing Address Friedman.	MO. DAY YEAR	
1515 MARIA 62	8 17 12 MO. DAY YEAR	\$ 250 -
City Philade phia State Zip Code (Plus 4) Full Name of Contributor	MO. DAY YEAR	\$
Full Name of Contributor	TEAR	\$
Samuel Alboeser	MO. DAY YEAR 8 16 12	\$ 100
618 Fox Foelds RD	MO. DAY YEAR	-
BMN MAWR BA 19010 -	MO. DAY YEAR	
Full Name of Contributor	MO. DAY YEAR	\$
Meiling Address WINDEUR	8 22 12	\$ 100-
8106 Zedar Rd.	MO. DAY YEAR	\$
GLKINS PARK PARE PA 19027-	MO. DAY YEAR	\$
Full Name of Contributor Norman Zarwin	MO. DAY YEAR	
	8 21 12 MO. DAY YEAR	\$ 100-
City Philadelphia PA 19103-	MO. DAY YEAR	\$
Full Name of Contributor	MO. DAY YEAR	\$
Mailing Address PATRICK Cograllo	MO. DAY YEAR	\$ 250-
119 Holly Drive -	MO. DAY YEAR	s
State Zip Code (Plus 4)	MO. DAY YEAR	
NATISORO PA 19040-		\$ PAGE TOTAL
Enter Grand Total of Part B on Schedule I, Detailed Summary F	age, Section 2.	\$ 1300 -
	1	

DSEB-502 (7-99)

1 200 L

-	_	PART B
ALL	OTHER	CONTRIBUTIONS

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PAGE 4 OF 6

\$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.)

HANES For Degiszer of W.	ile	Repor	ted in F	d
		Fro	m <u>51</u>	15/12-TO 10/22
Ull Name of Contributor		DA	TE	AMOUNT
DANIEL MURPHY		9	AY YEA	
HAVERFORD PA 19041 -		10. 0/		
HAVERFORD PA 19041 -	us 4) M	0. 0/	Y YEA	
name of Contributor		0. DA	Y YEAI	\$
Silling Address RONALD ATKING		0	2 12	
572 general PATTerson		<u>0.</u> <u>DA</u>	Y YEAF	\$
glengide State Zip Code (P)	is 4) M(). DA	Y YEAR	
	M			\$
Ming Address YACHES		9 30		
400 greenwood Ave Wyncore PA 19095 -	MC			
Neme of Convince	4) MO	DAY	YEAR	
Calle of Contributor				\$
Ing Address MARGare7 Phiambolis	/	DAY		\$ 100
1012 Bethlehem Pik.	e <u>Mo</u>			
SPRING HOUSE PA 19477	4) MO.	DAY	YEAR	→
Name of Contributor				\$
ing Address	MO.	DAY	YEAR	\$
	MO.	DAY	YEAR	\$
State Zip Code (Plus	4) MO.	DAY	YEAR	3
Name of Contributor			(Ean	\$
ng Address	MQ.	DAY	YEAR	\$
	MO.	DAY	YEAR	
State Zip Code (Plus	MO.	DAY		\$
ame of Contributor			YEAR	\$
	MO.	DAY	YEAR	\$
g Address	MD.	DAY	YEAR	
State Zip Code (Plus 4	, MO.	DAY.		\$
ame of Contributor			YEAR	\$
	MO.	DAY	YEAR	\$
g Åddress	MO.	DAY	YEAR	
State Zip Code (Plus 4				\$
	<u>MO.</u>	DAY	YEAR	
				\$

ALL OTHER CONTR	RIBUT	IONS	5	PAG	5. OF 6
• OVER \$250.00	0				
Use this Part to itemize all other contribution	ons wit	h an a	goregai	te valu	e of
Over \$250.00 in the report (Exclude contributions from political com	ting pe	riod.	33.094		
					.)
HAWES FOR Register of Will	lc	r i	rting Peri		. plant
	- >	- Fra		5112	To 10/22/1
Full Name of Contributor			TE		AMOUNT
MICHAEL CLARKE	LM			2 \$	Em
506 LANTOCH LANE	M		AY YE	AR	500
City State Zic Cope (P is 4)	MIC			\$	
Philadelphia PA 1928	(WI)	0 01	Y YE	\$	
Employer Name EUDOLPH, Clarke & Kirk LLC Employer Mailing Address/Principal Place of Business	Occup	et an	l		<u>ور میں میں اور اور اور اور اور اور اور اور اور اور</u>
Employer Mailing Address/Principal Place of Business		4	AWY	ER	
D RESTIGNING INTERPLEX SUND 215	5 7	reu	160	PA	
Fall Name of Contributor	MO	DA	Y YEA		19053
Mailing Addrass				- \$	
C. ty	<u>Mo</u> .	DA	Y YEA	8 \$	
State Zip Code (P us 4)	MO.	DA	Y YEAL		
Emaloyer Nome				\$	
PDO ALLER BRAN	Occupi	ltion			
Employer Mailing AddressiPrincipal Place of Business		· · · · · · · · · · · · · · · · · · ·			
full Name of Contributor					
	MO.	DAY	YEAR		
Aailing Acdress	MQ.	DAY	YEAR	\$	
(0)			JEAH	\$	
Stere Zip Code (Pius 2)	MO.	DAY	YEAR		
nployer Name	Occupat	Inn		\$	
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Il Name of Contributor					
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	MO.	DAY	YEAR	+	
State Zip Code (Pius 4:	MO			\$	
plover Name	<u></u>	DAY	YEAR	\$	
	Occupati.	າກ		<u> </u>	
ployer Mailing Address/Principel Place of Business					
Name of Contributor					
rearrie of Contributor	MO.	DAY	YEAR		
ling Address				\$	
	MO.	DAY	YEAR	\$	Name
	MO.	DAY	YEAR		
State Zip Code (Plus 4)			1	\$	
State Zip Code (Plus 4)	Occupation				
olover Name	Occupatio		<u> </u>		
State Zip Code (Plus 4)	Occupatio	1			
State Zip Code (Plus 4)					

SCHEDULE III STATEMAENIT O

FAGE	6	Ur-	
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STATEMENT OF EXPEND	ITURES	
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Whom Paid		
MONTGOMERY CON POBOX 857		76 Day YEAR Amount 16 J 15 J S 70-
Whom Paid MONJED CONST	PA 19404	
MONIZO CONSTAN Ing Address P.O. BOX 163)	MO. DAY YEAR Amount 6 15 12 \$ 30
Oreland	State Zip Code Plus PA 1909 5-	16 d) Contribution
MONTED DEMOZRA P.D Box 857		Description of Expenditure \$ 750.
Norris Town		4 Convinion
FRIENDS OF S 7918 PARK AU	e	Description of Expenditure
GLIGING PARIC	Stere Zip Code Pius at	
Address Karen Moska 528 PINE	DWITZ Tree PD	MO. DAY YEAR Amount 10 4 12 \$ 50
ENKINTOWN Mandara David		I INNEL
MONTED DEMOCR Address P.O. BOX 8.57		Description of Expenditure
Norristown	PA 19404-	
MONICO Democ Address PO BOX 857	ratic comm.	MO. DAY YEAR AMOUNT 10 13 12 \$ 300 Description of Expenditure
Norastown	State Zip Code (Plus d) PA 19404 -	DINNER TICKOTS
4dor 96%		MD. DAY YEAR Amount Description of Expenditura
	State Zip Code (Plus 4)	
Grand Total of Expenditures on	Page 1 Page 4 Comm	PAGE TOTAL

\$ 4