

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	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST <input type="checkbox"/>	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST FRIENDS OF WALTER HOFMAN						
STREET ADDRESS 707 S BOWMAN AVE						
CITY MERION STATION		STATE PA	ZIP CODE 19066 -			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY		
	6TH TUESDAY PRE-PRIMARY		MONTGOMERY COUNTY CORONER		AL	Dem
	2ND FRIDAY PRE-PRIMARY					
	30 DAY POST-PRIMARY					
	6TH TUESDAY PRE-ELECTION		DATE OF ELECTION			
	2ND FRIDAY PRE-ELECTION		MO. DAY YEAR			
	30 DAY POST-ELECTION		MO. DAY YEAR			
ANNUAL REPORT <input checked="" type="checkbox"/>						
DATES OF REPORTING PERIOD		MO. DAY YEAR		MO. DAY YEAR		
		10 23 12		12 31 12		
CASH BALANCE AT END OF REPORTING PERIOD:		\$ 3,419¹⁰				
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ _____				
AMENDMENT REPORT?		YES	NO	<input checked="" type="checkbox"/>		
TERMINATION REPORT?		YES	NO	<input checked="" type="checkbox"/>		
RECEIVED 2013 JAN 25 P 2:20 OFFICE OF THE CLERK OF THE COMMONWEALTH OF PENNSYLVANIA						

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

14th DAY OF JANUARY 2013

Victoria Laughlin
SIGNATURE

MY COMMISSION EXPIRES MARCH 2, 2016
MO. DAY YR.

Samuel T. Adewbaum
SIGNATURE OF PERSON SUBMITTING REPORT

SAMUEL T ADEUBAUM
PRINTED NAME

610 585 1830
AREA CODE DAYTIME TELEPHONE NUMBER

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

Monday DAY OF January 2013

Patricia A. Miers
SIGNATURE

MY COMMISSION EXPIRES SEPTEMBER 19, 2014
MO. DAY YR.

WMAA
SIGNATURE OF CANDIDATE

WMAA
PRINTED NAME

610 664 5854
AREA CODE DAYTIME TELEPHONE NUMBER

PATRICIA A. MIERS, Notary Public
Montgomery County, PA
My Commission Expires September 19, 2014