Commonwealth of Pennsylvania

PAGE 1 OF _

CAMPAIGN FINANCE REPORT

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification			Report	CANDIDATE	1,	COMMITTEE	1	LOBBYIST 3.	٦	
Number:			Filed By:		<u> </u>		<u></u>	· · · · · · · · · · · · · · · · · · ·		
Course	so of En	CEC WI	HAWK	3 BEHC						
Street Address:	LA FRAN	SCE RO	OAC							
Chy: PLYMO	Me Me	ETING		State		zip Code: 19462	_			
TYPE OF	STH TUESDAY	2ND FRIDAY 2.		O DAY POST PRIMARY		AMENDMENT REPORT?	YES	NO X	9	
REPORT		2ND FRIDAY	Б.	30 DAY POST ELECTION	6.	TERMINATION	YES	NO X	9	
(place X to the right of report type)		YEAR		FILING METHOD () CHECK ONE		PAPER	1	DISKETTE Coun	1+v	
Name of Office Soug	ht by Candidate:			DATE OF ELEC	EAR	Number Co	de	Party Coun		
MONTE	omery Cour	sy SHER	IFF	MO. DAY Y	EAR	MONTE O	1	TIONS FOR CO	DES)	
						FOR	OFFICE I	JBE ONLY	3	
Summary of R and Expanditu	teceipts res from:	MO. DAY YE	13 To	- / 2	EAR اد		e~	$\overline{\Box}$		
A. Amount Brough	nt Forward From Las	t Report	\$	1416.05		132	س ب ۳۳			
	Contributions and R		dule i) \$	ø						
C. Total Funds Available (Sum of Lines A and B)			\$	\$ 1416. OS						
D. Total Expenditures (From Schedule III)			\$	0						
E. Ending Cash B.	alance (Subtract Line	D from Line C)	\$	791.05			,, ċ			
F. Value of In-K	ind Contributions Rec	ceived (From Sched	L L	<u> </u>		┨, ‴	-	 		
G. Unpaid Debts	and Obligations (Fron	n Schedule IV)	\$	Ø		<u> </u>				
DATE MATERIA	is a Committee rep	out trassistat sign	AFFIDAVIT here. If th	is is a Candidate r	eport,	candidate sign	here			
I swear (or affirm)	that this report, includi	ng the attached sched	lules, on pape	er or computer diskette	e, are to	the best of my	knowledg	ge and belief to	rue,	
1 (1)	of /// // // // // // // // // // // // /		13	Si Si	i gnatore	Sharkey Printed Name	litting Res			
My commission e	mo.	DAY YAPA	MOTARIAL TRICIA A. GL	MBRONE Area Cose			me Telep	70 hone Number		
	s is a report of a C	endidate & Author	TOTAL COTOM	tree gardinate shall	sign l	iere.				
I swear (or affirm)	that to the best of my	knowledge and belie	this politic	al committee has not	violated	any provisions	of the Ad	t of June 3, 19	937	
(P.L. 1333, No. 320	ns amended.		ו או	5.100	2	x B				
Cahi	y of //(U/) Apignature	oline)	×3_ 	Ei/89	51	gnature of Candi	Behi	L 3337		
My commission	1 <i>07</i>	13 3016 DAY 3016		Area Code	<u> </u>	Day	ime Tele	phone Number		

SCHEDULE III

STATEMENT OF EXPENDITURES

		T	Repor	ting Pe	riod.	- 1
FRIEDDS OF EILEN WA	alon Behr		Fro	m <u>l//</u>	/20	13 to 5/6/2013
/ Lio Co 50					45.00	Amount
Whom Paid Faring		<u>мо.</u> 4	ĪΖ	DAY Y	:0/3	\$ 500
NORMANDY FARMS		Secreta	tion o	f Expend	liture	e Ma
ing Address 1401 MORRIS RD.	State Zip Code (Plus 4	+ '2	€ pc	7120	YES	r May
BIVE BELL	PA 19422 -	FL	1	ORA	SER	
	\circ : \circ	MO.		DAY	YEAR	Amount \$ 125 -
Mow Gomery Co ling Address 314 E. Juhnson Hi	rwing Kepulican Mrss	Descri	ntion	of Expen	ර්ර/3 diture	
iling Address	iehwa za	Do		470	<u>~~</u>	FOR
314 E. JOHNSON 111	State Zip Code (Plus	'	ر د د	e. 7/	G- (Reception.
Norristown	P4 1940 -	MO.	التنوس	DAY		
Whom Paid						\$
siling Address		Descr	ption	of Exper	nditure	
	State Zip Code (Plus	, 			.,	<u> </u>
y	_					
Whom Paid		MO	-	DAY	YEAR	Amount \$
		Descr	iption	of Expe	nditure	
niling Address						
ity	State Zip Code (Plus	4)				
		MC). T	DAY	YEAR	Amount
o Whom Paid						\$
failing Address		Desc	riptio	n of Exp	enditure	
	State Zip Code (Plus	4)				
aty	-					
o Whom Paid		М	0.	DAY	YEAR	Amount \$
		Desi	riptio	n of Exp	enditure	
Visiting Address						
City	State Zip Code (Plu	· 4)				
			0.	DAY	YEAR	
To Whom Paid	_					\$
Mailing Address		Des	criptio	on of Exp	penarture	•
	State Zip Code (Plu	3 4)				
Citý					-	Amount
To Whom Paid			AO.	DAY	YEA	\$
		D.	script	on of Ex	penditur	
Mailing Address						
City	State Zip Code (Pi	15 4)				
						PAGE TOTAL
	tures on Page 1, Report Co					\$ 625-

SCHEDULE 1

PAGE 2 OF

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CO	ONTRI	SUTO	R ,	
UNITEMIZED CONTRIBUTIONS AND RECEIPTS GOLDEN	(1) \$			
TOTAL for the Reporting Period			\mathcal{L}	
		(
CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)				
Contributions Received from Political Committees (Part A)	!	<u> </u>		
All Other Contributions (Part B)	!	5		, ····
TOTAL for the Reporting Period	(2)	\$	\emptyset	
CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		\$		
Contributions Received from Political Committees (Part C)		\$ \$		
Contributions Received from Political Committees (Part C) All Other Contributions (Part D)	(3)		6	
Contributions Received from Political Committees (Part C)	(3)	\$	B	
Contributions Received from Political Committees (Part C) All Other Contributions (Part D) TOTAL for the Reporting Period		\$	OM PART E	
Contributions Received from Political Committees (Part C) All Other Contributions (Part D) TOTAL for the Reporting Period 4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS	, ETC	\$ \$ (FR)	OM PART EL	
		\$	OM PART E	
Contributions Received from Political Committees (Part C) All Other Contributions (Part D) TOTAL for the Reporting Period 4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS	, ETC	\$ \$ (FR)	OM PART E	