Commonwealth of Pennsylvania

CAMPAIGN FINANCE REPORT

PAGE 1 OF (COVER PAGE)

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

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Filer Identification Number:		Filed	d By:		ANDID			GOIVING.) tee		1.00		-
Name of Filing Committee, Candidate or Lopbyist: (1216-05 OF EILEEN WHALONS SITHE													
Street Address: 4	035 LA FRI	ANCE ROA	FD										
City: PLyn	mouth Mi	EFTING		Sta	PA				188) 	-	tary ge	_
TYPE OF REPORT	RTH TUESDAY	2ND FRIDAY PRE-PRIMARY	2. 30 DAY POST PRIMAR		ARY	3.	AMENDM REPORT?	?	YES		NO		
(place X to	6TH TUESDAY PRE-ELECTION	4. ZND FRIDAY PRE-ELECTION	5.	30 DAY POST ELECTION 6.			REPORT?	20 A 10 A 10	YES	4	МО		
the right of report type)	ANNUAL 7. REPORT	7. YEAR			CHECK	ONE		PAPE		7		ETTE	
Name of Office Soug	ght by Candidate:	415 10		DAT	TE OF	ELEC	TION EAR	District Number	Offic Code		Party Code		ode
Monta	anery Count	Shentt		1 /	S	20		 				بيل	
	,			1''			10				CTIONS		
		MO. DAY YEAR	<u> </u>	MO.	DAY	Ϋ́	EAR	 "	FOR OF		13 €	ONLY	
Summary of Rand Expenditu	teceipts	10 22 2013	T _o	o 11	25	201	13		<u> </u>	3_	3DEC	; [1
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	ht Forward From Last			403 €				İ	(4)11	a ===	တ်	(i. R.) Linear instance	į
		eceipts (From Schedule						i	CO. PA	<u> </u>	A	6	
	vailable (Sum of Lines			5130		<u> عـ</u>		1	کار کار	Ž	ထ္	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	tures (From Schedule		- s	400				4	Ċ.	3	1 8	- Andrews	7
	lalance (Subtract Line		\$	473	4	02		4					
F. Value of In-Ki	ind Contributions Rec	eived (From Schedule I	10) \$	9	<u> </u>			4		<u></u>			•
G. Unpaid Debts	and Obligations (From	Schedule IV)	\$	9				lute	% 20	(A			
		AFFI	TIVAC	SECT-ON							en e		\$ 1.2 m
PART I - If this	is a Committee repr	ort, treasurer sign here.	. H thi	is is a C	endide	rte res	port c	andidate	sign he	are.	174 794 - 1 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
i swear (or affirm)	that this report, including	ng the attached schedules,			uter dir	skette,	are to	the best of	of my kr	nowled	ge and :	belier	truë,
	scribed before me this	PATRICIA		MBRONE		+	7,	/	(//	1			ļ
	of MANAGE		kotary Pob DUGH, MM	olic INTGOMERY	COUNT	YY	<u> </u>	hu	<u> </u>				
Total.	17/1/1/	My Commission				5igr	nature o	of Person	Subplitt	ing Kes 1	port		ļ
SUMUCIA	A Signatura	MANUEL -	- 7	<u> </u>	7	<u></u>	<u> </u>	Printed N	lame	}	3698		
My commission e		13 300	1		<u> </u>	<u> </u>					phone Ni		
1	/ MO. /	DAY /YR.			Area C	COSE			Uay	1 (4	Altono		
PART II - If this is a report of a Candidate's Authorized Committee, candidate shall sign here.													
I swear (or effirm) 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. 1933, No. 320) as amended.													
Sworn to and subscribed before me this													
day of													
}													
	Signature			— : i				Printed N	Name				
My commission e	expires	DAY VP	J		Area (Code			Daytim	e Tele	phone N	Number	

Department of State ● Bureau of Commissions, Elections and Legislation 210 North Office Bullding ● Harrisburg, PA 17120-0029 ● (717) 787-5280

SCHEDULE !

PAGE 2 OF

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period	
FRIKNOS of Eileen Whalon Behr	From	То
1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LE	SS PER CONTRI	BUTOR
TOTAL for the Reporting Per		Ø
2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PAR	RT B)	
Contributions Received from Political Committees (Part A)	4	· · · · · · · · · · · · · · · · · · ·
All Other Contributions (Part B)		
TOTAL for the Reporting Per	riod (2) 1	6
3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D		
3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D) Contributions Received from Political Committees (Part C)		500-
Contributions Received from Political Committees (Part C)		
Contributions Received from Political Committees (Part C) All Other Contributions (Part D)		
Contributions Received from Political Committees (Part C) All Other Contributions (Part D)	riod (3)	-
Contributions Received from Political Committees (Part C) All Other Contributions (Part D) TOTAL for the Reporting Per	iod (3) S	FROM PART E
Contributions Received from Political Committees (Part C) All Other Contributions (Part D) TOTAL for the Reporting Per 4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED	iod (3) S	FROM PART E

PART C

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

OVER \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value over \$250.00 in the reporting period.

Name of Filing Committee or Candidate					Reporting Period					
FRIENDS of Eileen	اسلم	ulon Dehr		From _		То				
				DATE		AMOUNT				
Full Name of Contributing Committee PECO AC			MO.	DAY	YEAR	\$ ===				
Mailing Address			MO.	DAY	YEAR	\$ 500				
2301 Market Street	+ 1	20 Bex 8699			I I I	\$				
Mailing Address 2301 Market Stree City Philadelphia	State	19101 -8699	MO.	DAY	YEAR	\$				
Full Name of Contributing Committee			MO.	DAY	YEAR	\$				
Mailing Address	·····		MO.	DAY	YEAR					
City	T Caraca]\$				
	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$				
Full Name of Contributing Committee	•		MO.	DAY	YEAR	\$				
Mailing Address			. MQ.	DAY	YEAR	*				
				1		\$				
City	State	Zip Code (Plus 4)	MQ.	DAY	YEAR	\$				
Full Name of Contributing Committee	<u> </u>		1 140	DAY	VEAG	Ψ				
			MO.	DAY	YEAR	\$				
Mailing Address			MO.	DAY	YEAR	s				
City	State	Zip Code (Plus 4)	MO.	DAY	VEAD	*				
		_		J DAT	YEAR	\$				
Full Name of Contributing Committee			MO.	DAY	YEAR	•				
Mailing Address			100		WEAR	\$				
			MO.	DAY	YEAR	\$				
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$				
						3				
Full Name of Contributing Committee			MO.	DAY	YEAR	\$				
Mailing Address			MO.	DAY	YEAR					
City	State	Zip Code (Plus 4)				\$				
		-	MO.	DAY	YEAR	\$				
Full Name of Contributing Committee	·		MO.	DAY	YEAR					
Mailing Address			<u> </u>			\$				
			MG.	DAY	YEAR	\$				
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$				
Full Name of Contributing Committee			MO.	DAY	YEAR	-				
						\$				
Mailing Address			MO.	DAY	YEAR	\$				
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$				
		<u> </u>								
.						PAGE TOTAL				
Enter Grand Total of Part C on Sched	dule I,	Detailed Summary	Page,	Section	3.	\$				
SEB-502 (7-99)										

SCHEDULE III

STATEMENT OF EXPENDITURES

			ĪRs	porting F	Period	
Name of Filing Committee or Candidate FRICTIONS of Eleen Whalon C	s hr	••				To
Microsy Eilen Charle	<i>)</i>					
			MO.	DAY	YEAR	Amount
TO Whom Paid MRIENOS OF JIM TOTTE	حح_		70	30	2013	\$ 250-
Mailing Address Elm Stront	ا بنک	G 320	Description	n of Expe	mditure	
101 W. Elm Street Conshohecken	State	Zip Code (Plus 4)				
Conshohocken	IA	19428 -				
To Whom Paid	AP.	a Usan Croser	MO.		YEAR 20/3	Amount \$
Montgomery Count Council Mailing Address	0/10	postition come	Description	on of Expe		3
			ļ			
City	State	Zip Code (Plus 4) —				
To Whom Paid	1		MO.	DAY	YEAR	Amount
			Description	on of Expe	enditure	\$
Mailing Address				J., G. G.,		
City	State	Zip Code (Plus 4)				
				547	YEAR	Amount
To Whom Paid			MO.	DAY	TEAR	\$
Mailing Address			Descripti	on of Exp	enditore	
	State	Zip Code (Plus 4)	 			
CHY	3.0.0	-				
To Whom Paid			MO.	DAY	YEAR	Amount
			Descripti	on of Exp	enditure	\$
Mailing Address				·		
City	State	Zip Cade (Plus 4)				
			MO	DAY	YEAR	Amount
To Whom Paid			MO.	UAT	1EAR	\$
Mailing Address	Description of Expenditure					
City	State	Zip Code (Plus 4)				
		_				
To Whom Paid			MO.	DAY	YEAR	Amount
Mailing Addrags			Descript	ion of Exp	enditure	\$
Mailing Address						
City	State	Zip Code (Plus 4)				
T- W 9:-			MO.	DAY	YE AR	Amount
To Whom Paid						\$
Mailing Address			Descript	ion of Ex	penditura	
City	State	Zip Code (Plus 4)	 	··	·	
				PAGE TOTAL		
Enter Grand Total of Expenditures on P	age 1.	Report Cover	Page, It	em D.		15 400