

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	<input checked="" type="checkbox"/>	COMMITTEE	<input type="checkbox"/>	LOBBYIST	<input type="checkbox"/>
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Kevin R. Steele</i>								
STREET ADDRESS <i>426 Withey Road</i>								
CITY <i>Wynnewood</i>			STATE <i>PA</i>	ZIP CODE <i>19096 - 2425</i>				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION		
6TH TUESDAY PRE-PRIMARY		<i>Montgomery County District Attorney</i>			<i>Democrat</i>	MO.	DAY	YEAR
2ND FRIDAY PRE-PRIMARY						<i>5</i>	<i>19</i>	<i>2015</i>
30 DAY POST-PRIMARY								
6TH TUESDAY PRE-ELECTION								
2ND FRIDAY PRE-ELECTION								
30 DAY POST-ELECTION								
ANNUAL REPORT								
		DATES OF REPORTING PERIOD				FOR OFFICE USE ONLY		
		NO. DAY YEAR		NO. DAY YEAR				
		<i>5 5 15</i>		TO <i>6 8 15</i>				
		CASH BALANCE AT END OF REPORTING PERIOD:		\$ <i>-0-</i>				
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ <i>-0-</i>				
		AMENDMENT REPORT?		YES	NO			
					<input checked="" type="checkbox"/>			
		TERMINATION REPORT?		YES	NO			
					<input checked="" type="checkbox"/>			

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

10 DAY OF *June*

[Signature] SIGNATURE OF PERSON SUBMITTING REPORT

Kevin R. Steele PRINTED NAME

431-1173 DAYTIME TELEPHONE NUMBER

COMMONWEALTH OF PENNSYLVANIA

Notarial Seal

Dianna DiIillio, Notary Public

Norristown Boro, Montgomery County

My Commission Expires March *4, 2016*

MO. DAY MONTH YEAR

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

DAY OF 20

SIGNATURE OF CANDIDATE

PRINTED NAME

SIGNATURE

MY COMMISSION EXPIRES MO. DAY YR.

AREA CODE DAYTIME TELEPHONE NUMBER