Print Form

Commonwealth of Pennsylvania - Campaign Finance Report

		(Note: In	iis rep	ort mus	t be cle	ar and	i legible.	it snot	uld be typed)				
Filer Identification Number	- · · ·			rt Filed B k X)	y C	andida	te		Committee		X	Lobbyist		
Name of Filing Comr Lobbyist	nittee, Ca	ndidate or		Elect Scott Zelov										
Street Address			220 Rose Lane											
City	Haverford				Si	tate	PA		Zip Code	19041				
Type of Report (Place	e x under i	report type)												
]	2 nd Friday						6- 30 Da Election	•	7- Annual	Special 2 nd Friday Pre-Election		Special 30 D Post-Election	Special 30 Day	
Pre-Primary Pre	re-Primary Pre-Primary Primary		Pre- E	lection	Pre- Ele	ection	Election		Pre-Elec			rost-Electio		
			Year			<u>]</u>	X	<u> </u>			<u> </u>			
Date Of Election (MM/DD/YYYY)	Date Of Election (MM/DD/YYYY) 11/03/2015				46, REP	, Oth	Amendr Report	nent		Terminat Report	ion 			
Summary of Receipt	s and	From Date		To Date	e			-	For	Office Use	Only			
Expenditures 10/20/2015			11/23/2015											
A. Amount Brought	A. Amount Brought Forward From Last Repo				50,073.4									
B. Total Monetary Contributions and Receip (From Schedule I)			\$		0									
C. Total Funds Available			\$	\$ 60,073.4		1					1.			
(Sum of Lines A and B) D. Total Expenditures			\$	\$ 1,250								r		
(From Schedule III) E. Ending Cash Balance			- 5	S			ł							
(Subtract Line D from Line C) E. Value of In-Kind Contributions Received					58,823.4									
rom Schedule II)			\$		0									
paid Debts and Econo Schedule IV)	d Obligatio	ons	\$		0									
E 2						davit Se						==:		
Fir (or affirm) that	this report	rt, treasurer sign h , including the atta	ere. If t ched so	nis is a Ca c hedules o	n didate re n paper, i	s to the	best of my	knowle	dge and belief t	rue, correct	and comple	ete.		
day of Sign	ed before m	ne this		_			11		+ Rel	Δ <i>C</i>				
day of	ددسا ه ۹ ۷	20 15 20 15	_	-		-			of Person Subr		t			
Sign Sign	ature .	-coley	-	r		i.	el Coopen	ian, trea	Printed Nan	ne .				
mmission expire		5- 2017		. •		4	84	_//	437	-7777				
N. S.	MO.	DAY YR.					Area Code		Da	ytime Telepl	none Numb	oer		
Part II- If this is a repor	t of a Cand	idate's Authorized	Comm	ittee, cand	didate sha	ill sign t	nere.	plated ar	ov provisions of	the Act of Ju	ne 3, 1937	(P.L. 1333. NO.	320) as	
amended.	. to the best	or my knowledge	ond be	ner ans pu					· , p		,,	. ==,	,	
Sworn to and subscrib	ed before m	ne this		• •			Q	11	in So	Zuh				
	day of Signatore					Signature of Candidate V. Scott Zelov Printed Name								
My Commission explre		15-2017	· . • 6			256-4120								
	MO.	DAY YR.					Area Code		Day	time Teleph	one Numb	er		

COMMONWEALTH OF PENNSYLVANIA

NOTARIAL SEAL JODY L. KELLEY, Notary Public Township of Lower Merion, Montgomery County My Commission Expires January 15, 2017

SCHEDULE I

Contributions and Receipts

Detailed Summary Page

Filer Identification Number Elect Scott Zelov									
1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor									
Total for the reporting period	(1)	\$	o						
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)									
Contributions Received from Political Committees (Part A)		\$	o						
All Other Contributions (Part B)		\$	o						
Total for the reporting period	(2)	\$	0						
3. Contributions Over \$250.00 (From Part C and Part D)		•							
Contributions Received from Political Committees (Part C)		\$	0						
All Other Contributions (Part D)		\$	0						
Total for the reporting period	(3)	\$	o						
4. Other Receipts-Refunds, interest Earned, Returned Checks, ETC. (From Part E)									
Total for the reporting period	(4)	\$	0						
Total Monetary Contributions and Receipts during this reporting period (Add and	············	5							

enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report

Cover Page, Item B)

PART A

Contributions Received From Political Committees

\$50.01 TO \$250.00 Use this Part to itemize only contributions received from Political Committees with an aggregate value from \$50.01 TO \$250.00 in the reporting period.

Filer Iden	tification Numb		Elect Scott Zelov								
								Amount			
Sull Nam	ne of Contribu	ting				Date [MM/DD/Y	YYY] \$				
Commit		ring.	•								
201111111											
House #		Street A	\ddress			Date [MM/DD/Y	YYY] \$	P			
l I											
City		1	L	State	Zip Code	Date [MM/DD/Y	7777] \$	\$			
~~											
Full Nam	ne of Contribu	iting			وبالمستجيد المستجيد	Date [MM/DD/Y	YYY] :	\$			
Commit			1								
				<u> </u>		Date (MM/DD/Y	7777	\$			
House #	1	Street	Address			Date [MM/DD/		~			
1											
City		ــــــ		State	Zip Code	Date [MM/DD/	(111	\$			
1											
Full Nan	ne of Contribu	ıting				Date [MM/DD/	mm] :	\$			
Commit		· · - · · · · · · · · · · · · · · · · ·									
	 	-				Ph Fa to a fam h	- L	<u>e</u>			
House #	' <u></u>	Street.	Address			Date [MM/DD/	· · · · · · · ·	\$			
1											
City			.,	State	Zip Code	Date [MM/DD/	YYYY]	\$			
''											
Full No-	ne of Contrib	utine				Date [MM/DD/	7777]	\$			
Commit		1									
House #	f	Street	Address			Date [MM/DD/	YYYY]	\$			
		-41 641									
<u></u>				100	71-0-1-	Date [MM/DD/	yyyy 1	\$			
City				State	Zip Code	Date (MIMI/DD)					
								_			
	me of Contrib	uting				Date [MM/DD/	7777]	\$			
Commi	ttee										
House #	14 I	E4	Address			Date [MM/DD/	7777]	\$			
nouse i	"	otreet	Aduress								
				- T 42 - 1	1	Date [MM/DD/	- rvvvi	\$			
City				State	Zip Code	Date [MM/UU/					
			.,			Date [MM/DD/	VVVV1	\$			
	me of Contrib	uting				Date [MM/DD]	1	*			
Commi						The state of the s		\$			
House	#	Street	Address			Date [MM/DD/	*****	7			
1			ļ								
City	ity State Zip Code				Zip Code	Date [MM/DD/	/YYYY]	\$			
1								1			
1	1										

PART B All Other Contributions

4/12

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number:

- the local	idikation Rumber.	Elect Scott Zelov			
Full Nar	ne of Contributor			Date [MM/DD/YYYY]	\$
House #	Stre	et Address		Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Nam	ne of Contributor			Date [MM/DD/YYYY]	\$
House #	Stre	eet Address		Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Nar	me of Contributor			Date [MM/DD/YYYY]	\$
House #	Stre	eet Address		Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Nan	ne of Contributor			Date [MM/DD/YYYY]	\$
House #	Stre	eet Address		Date [MM/DD/YYYY]	\$
City	1	State	Zip Code	Date [MM/DD/YYYY]	\$
Full Nar	me of Contributor		<u> </u>	Date [MM/DD/YYYY]	\$
House #	Stre	eet Address		Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Nar	ne of Contributor			Date [MM/DD/YYYY]	\$
House #	Stre	eet Address		Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$

PART C Contributions Received From Political Committees

Filer Identification Number:

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.

		Elect Scott Zelov					
Full Nam					Date [MM/	/DD/YYYY] \$	·
	uting Committee	•					
House #	·	treet Address			Date [MM/	/DD/YYYY] \$	
\							
City	<u>L</u> _	<u></u>	State	Zip Code	Date [MM/	/DD/YYYY] \$	
	<u></u>						
Full Nam					Date [MM/	/DD/YYYY] \$	
	uting Committee	1					
House #	\ \	treet Address			Date (MM/	/DD/YYYY] \$	
ļ							
City		<u></u>	State	Zip Code	Date (MM/	/DD/YYYY] \$	
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Full Nan	ne of	1			Date [MM/	/DD/YYYY] \$	
	uting Committee	•					
House #	† Te	Street Address			Date [MM/	/DD/YYYY] \$	
City			State	Zip Code	Date [MM/	/DD/YYYY] \$	
	1			,			
Full Nan	ne of				Date [MM/	/DD/YYYY} \$	
	uting Committee	•					
House #	; c	Street Address			Date [MM/	/DD/YYYY] \$	
City			State	Zip Code	Date [MM/	/DD/YYYY] \$	1
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Full Nar	me of		<u></u>	· · · · · · · · · · · · · · · · · · ·	Date [MM/	/DD/YYYY] \$	T T
	outing Committee	e					
House #	y Is	Street Address			Date [MM/	/DD/YYYY] \$	
	ľ						}
City			State	Zip Code	Date [MM/	/DD/YYYY] \$	
Full Nar				Date [MM/	/DD/YYYY] \$		
	outing Committee	•					
House #	# 5	Street Address		,	Date [MM,	/DD/YYY] \$	
	1						
City	1		State	Zip Code	Date [MM	/DD/YYYY] \$	
. \	1		1		1		

PART D All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part C)

Filer iden	tification Number:					
		Elect Scott Zelov				j
•						
Full Nam	ne of Contributor				Date [MM/DD/YYYY]	\$
House #	Stro	eet Address	· · · · · · · · · · · · · · · · · · ·		Date [MM/DD/YYYY]	\$
City			State	Zip Code	Date [MM/DD/YYYY]	\$
Employe	er Name		<u> </u>		Occupation	
	r Mailing Address Place of Business				——————————————————————————————————————	
Full Nam	e of Contributor			· · · · · · · · · · · · · · · · · · ·	Date [MM/DD/YYYY]	\$
House #	Stre	eet Address			Date [MM/DD/YYYY]	\$
City			State	Zip Code	Date [MM/DD/YYYY]	\$
Employer Name					Occupation	
	er Mailing Address Place of Business					
Full Nam	e of Contributor				Date [MM/DD/YYYY]	\$
House #	Stre	eet Address			Date [MM/DD/YYYY]	\$
City		<u>- I.</u>	State	Zip Code	Date [MM/DD/YYYY]	_ \$
Employe	r Name		<u> </u>		Occupation	
	er Mailing Address Place of Business					
Full Nam	e of Contributor				Date [MM/DD/YYYY]	_ \$
House #	Stre	et Address		·	Date [MM/DD/YYYY]	\$
Clty			State	Zip Code	Date [MM/DD/YYYY]	\$
Employe	r Name				Occupation	

Employer Mailing Address / Principal Place of Business

PART E Other Receipts

REFUNDS, INTREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Filer Identification Number:	Elect Scott Zelov							
Full Name								
	reet Address							
City		State	Zip Code	Date [MM/DD/YYYY] \$				
Receipt Description		<u></u>						
Fuli Name								
	reet Address							
City		State	Zip Code	Date [MM/DD/YYYY] \$				
Receipt Description								
Full Name								
House # St	reet Address							
City		State	Zip Code	Date [MM/DD/YYYY] \$				
Receipt Description				<u> </u>				
Full Name								
House # St	treet Address							
City		State	Zip Code	Date [MM/DD/YYYY] \$				
Receipt Description				•				
Full Name								
House #	treet Address							
City		State	Zip Code	Date [MM/DD/YYYY] \$				
Receipt Description		11	<u> </u>	<u> </u>				
Full Name								
House # S	treet Address							
City		State	Zip Code	Date [MM/DD/YYYY] \$				
Receipt Description								

SCHEDULE II

8/13

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECIEVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD DETAILED SUMMARY PAGE

Filer Identification Number:	Elect Scott Zelov							
1. UNITEMIZED IN-KINI	CONTRIBUTIONS RECEIVED-VALUE OF \$5).00 C	R LESS PER CONTRIBUTOR					
TOTAL for the reporting period	(1)	\$						
2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)								
TOTAL for the reporting period	(2)	\$	0					
3. IN-KIND CONTRIBUT	ION RECEIVED-VALUE OVER \$250.00 (FROM	/ PAR	T G)					
TOTAL for the reporting period	(3)	\$.0					
	TRIBUTIONS DURING THIS REPORTING at totals from boxes 1, 2, and 3; also enter ltem F)	\$	0					

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

Filer Identification Number:	Elect Scott Zelov

		a fage - fam ben	-X1			
Full Nam	e of Contribute	or			Date [MM/DD/YYYY]	>
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House #	s	treet Address			Date [MM/DD/YYYY]	\$
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	<u> </u>					
City			State	Zip Code	Date [MM/DD/YYYY]	\$
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<u> </u>			<u> </u>	<u> </u>		
Descript	ion of Contribu	tion				
Full Nam	e of Contribut	Dr .			Date [MM/DD/YYYY]	\$ "
		1				<u>'</u>
House #	use # Street Address				Date [MM/DD/YYYY]	\$
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	1	ļ				
City	•		State	Zip Code	Date [MM/DD/YYYY]	\$
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Descript	ion of Contribu	tion	T	<u> </u>		
Full Man	ne of Contribut	or			Date [MM/DD/YYYY]	\$
1 5017 (107)		-				
l						
Massa #	 1.	<u> </u>			Date [MM/DD/YYYY]	\$
House # Street Address					Date Immilant 1111	*
]					
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City			State	Zip Code	Date [mm/DD/ (111)	[7]
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Descript	ion of Contribu	ıtlon				
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Eul Na-	ne of Contribut	or			Date [MM/DD/YYYY]	\$
- CON 1490	re or contribut					·
					Date [MM/DD/YYYY]	\$
House #	f l	Street Address				i
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City			State	Zip Code	Date Linital DOLLALLE	1 [™] l
Docario	tion of Contrib	ition	 			
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Full Mar	ne of Contribu	or	<u></u>		Date [MM/DD/YYYY]	\$
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				<u> </u>	Date [MM/DD/YYYY]	\$
House #	'	Street Address				1 1
<u> </u>			- State	Zip Code	Date [MM/DD/YYYY]	\$
City			State	Zip Code	Pare framelost 1111	1 ~ (
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Descri-	tion of Contrib	ution	1			
nezcub	WOULD CONTINU	W11011				

SCHEDULE II Part G In-Kind Contributions Received

VALUE OVER \$250

Film Idan (Cartion Number)		•	•	
Filer Identification Number:	Elect Scott Zelov			
	Elect Scott Zelov			

Full Name of C	Contributor						Date [MM/DD/	YYYY]	\$		
House #	Street	Address				• "	Date [MM/DD/	YYYY]	\$		
City	<u> </u>		State	Zip (Code		Date [MM/DD/	YYYY]	\$		
Employer Nan	er Name Occupation				Щ	<u> </u>					
Employer Mai	ling Address / P	rincipal	<u> </u>				Description				
Place of Business						of Contribution					
Full Name of Contributor							Date [MM/DD/	YYYY]	\$		
House#	House # Street Address						Date (MM/DD/	YYYY]	\$		
City	City			Zip (Code		Date [MM/DD/	Date [MM/DD/YYYY]			
Employer Name						Occupation					
Employer Mailing Address / Principal					***	Description					
Place of Business						of Contribution					
Full Name of 0	Contributor						Date [MM/DD/	YYYY]	\$		
House #	Street	Address					Date [MM/DD/	YYYY]	\$		
City		. 	State	Zip	Code		Date [MM/DD/	YYYY]	\$		
Employer Nar	me					<u> </u>	Occupation		<u> </u>		
	iling Address / I	Principal					Description				
Place of Busin	ness						of Contribution				
Full Name of (Contributor		1				Date [MM/DD/		\$		
House #	Street	Address					Date (MM/DD)	/	\$		
City		L	State	Zip	Code		Date [MM/DD	/YYYY]	\$		
Employer Nar						.	Occupation				
Employer Ma Place of Busin	niling Address / i ness	Principal					Description of Contribution				

Statement of Expenditures

Filer Identification Number:	Elect Scott Zelov		

To Whom Paid						Date [MM/DD/YYYY] \$	
		Friends of Chuck Wilson	1				10/25/2015 250
House	* 0	Street Address Box	166			· · · · · · · · · · · · · · · · · · ·	Description of Expenditure
City	Lansdale		State	PA	Zip Code	19446	Donation
To W	hom Paid	Tolbert for County Com	missioner				Date [MM/DD/YYYY] \$ 1,000
House	<u>. # 1</u>	Street Address					Description of Expenditure
, ious		Street Address Box	621				
City	Blue Bell		State	PA	Zip Code	19422	Donation
To W	hom Paid						Date [MM/DD/YYYY] \$
House	= #	Street Address	*:=				Description of Expenditure
City			State		Zip Code		
To W	hom Paid	1	-	1		1	Date [MM/DD/YYYY] \$
1							
House	e#	Street Address					Description of Expenditure
City	L		State		Zip Code		
To W	hom Paid						Date [MM/DD/YYYY] \$
House	e#	Street Address		<u> </u>			Description of Expenditure
City			State		Zip Code		
To W	hom Paid						Date [MM/DD/YYYY] \$
Hous	e#	Street Address				· · · · · · · · · · · · · · · · · · ·	Description of Expenditure
City			State		Zip Code	<u> </u>	
To W	hom Paid			-			Date [MM/DD/YYYY] \$
Hous	e#	Street Address					Description of Expenditure
City			State		Zip Code		
To W	/hom Paid						Date [MM/DD/YYYY] \$
Hous	ie#	Street Address					Description of Expenditure
City			State		Zip Code		

Statement of Unpaid Debts

12/12

ier Identification i	lumber: Elect Scott Zelov		·	
ame of Creditor				Outstanding Balance of Debt
ouse #	Street Address		DATE DEBT INCURRED [MM/DD/YYYY]	\$
ity		State	Zip Code	
escription of De	bt			
Name of Creditor				Outstanding Balance of Debt
louse #	Street Address		DATE DEBT INCURRED [MM/DD/YYYY]	\$
lity		State	Zip Code	
escription of De	ebt.			
Name of Credito				Outstanding Balance of Deb
House #	Street Address		DATE DEBT INCURRE [MM/DD/YYYY]	5
City		State	Zip Code	
Description of D	ebt			
Name of Credito			Outstanding Balance of Det	
House #	Street Address		DATE DEBT INCURRE [MM/DD/YYYY]	D \$
City		State	Zip Code	
Description of D	ebt	-		
	Decision in			Outstanding Balance of Del
House #	Sireet Address	t Address		\$
City		State	Zip Code	
Description of D				

House #

City

Description of Debt

Street Address

DATE DEBT INCURRED
[MM/DD/YYYY]

Zip

Code

State