

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 ²	<input type="checkbox"/> LOBBYIST ³												
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Friends of Sean Kilkenny</i>																		
STREET ADDRESS <i>715 Washington Lane</i>																		
CITY <i>Jenkintown</i>			STATE <i>PA</i>	ZIP CODE <i>19046</i>														
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION												
1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT		<i>Sheriff</i>		<i>46</i>	<i>D</i>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>NO.</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td><i>11</i></td> <td><i>3</i></td> <td><i>2015</i></td> </tr> </table>	NO.	DAY	YEAR	<i>11</i>	<i>3</i>	<i>2015</i>						
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		CASH BALANCE AT END OF REPORTING PERIOD: \$ <u><i>0</i></u> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u><i>0</i></u>																
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TERMINATION REPORT?	YES	NO																

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 MY OWN KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS *26* DAY OF *January*
 Notarial Seal
 Dianna DiIlio, Notary Public
 North Hill Boro, Montgomery County
 My Commission Expires March 16, 2016
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

SIGNATURE OF PERSON SUBMITTING REPORT: *Sean Kilkenny*
 PRINTED NAME: *Sean Kilkenny*
 MY COMMISSION EXPIRES: *3* *16* *2016*
 MO. DAY YR. AREA CODE: *267* DAYTIME TELEPHONE NUMBER: *625 6343*

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: _____