

COMMONWEALTH OF PENNSYLVANIA
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>v Scott Zelen</i>																	
STREET ADDRESS <i>270 Ridge Lane</i>																	
CITY <i>Haverford</i>		STATE <i>PA</i>	ZIP CODE <i>19041</i>														
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION												
	<i>mont. city Commissioner</i>		<i>46</i>	<i>Rep</i>	MO.	DAY											
	6TH TUESDAY PRE-PRIMARY				<i>11</i>	<i>03</i>											
	2ND FRIDAY PRE-PRIMARY					<i>2015</i>											
	30 DAY POST-PRIMARY				FOR OFFICE USE ONLY												
	6TH TUESDAY PRE-ELECTION				RECEIVED 2016 FEB - 2 AM 11:21 OFFICE OF VOTER SERVICES MONTG. CO. PA												
	2ND FRIDAY PRE-ELECTION																
30 DAY POST-ELECTION																	
ANNUAL REPORT <input checked="" type="checkbox"/>																	
DATES OF REPORTING PERIOD		CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u>															
<table border="1"> <tr><td>MO.</td><td>DAY</td><td>YEAR</td></tr> <tr><td><i>11</i></td><td><i>24</i></td><td><i>2015</i></td></tr> </table> TO <table border="1"> <tr><td>MO.</td><td>DAY</td><td>YEAR</td></tr> <tr><td><i>12</i></td><td><i>31</i></td><td><i>2015</i></td></tr> </table>		MO.	DAY	YEAR	<i>11</i>	<i>24</i>	<i>2015</i>	MO.	DAY	YEAR	<i>12</i>	<i>31</i>	<i>2015</i>	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>			
MO.	DAY	YEAR															
<i>11</i>	<i>24</i>	<i>2015</i>															
MO.	DAY	YEAR															
<i>12</i>	<i>31</i>	<i>2015</i>															
AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		TERMINATION REPORT? YES <input type="checkbox"/> 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

27th DAY OF January 2016

Jody L. Kelley
 SIGNATURE

MY COMMISSION EXPIRES 01-15-2017
 MO. DAY YR.

V. Scott Zelen
 SIGNATURE OF PERSON SUBMITTING REPORT

V. Scott Zelen
 PRINTED NAME

610 256-4120
 AREA CODE DAYTIME TELEPHONE NUMBER

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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

MY COMMISSION EXPIRES MO. DAY YR.

SIGNATURE OF CANDIDATE

PRINTED NAME

AREA CODE DAYTIME TELEPHONE NUMBER