

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	COMMITTEE	LOBBYIST
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Mark Levy					
STREET ADDRESS 2051 Mitchell Court					
CITY Lafayette Hill			STATE PA	ZIP CODE 19344	
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	
	6TH TUESDAY PRE-PRIMARY		Prothonotary	NA	DEM
	2ND FRIDAY PRE-PRIMARY		DATE OF ELECTION		
	30 DAY POST-PRIMARY		MO.	DAY	YEAR
	6TH TUESDAY PRE-ELECTION		11	3	2015
	2ND FRIDAY PRE-ELECTION		FOR OFFICE USE ONLY		
	30 DAY POST-ELECTION				
ANNUAL REPORT					
DATES OF REPORTING PERIOD		CASH BALANCE AT END OF REPORTING PERIOD:		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:	
MO. DAY YEAR		\$ 0		\$ 0	
11 04 15 TO 12 31 15					
AMENDMENT REPORT?		YES	NO		
TERMINATION REPORT?		YES	NO		
			<input checked="" type="checkbox"/>		
			<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
21st DAY OF **January** 20**16**

[Signature]
 SIGNATURE
 MY COMMISSION EXPIRES **July 27 2019**
 MO. DAY YR.
 COMMONWEALTH OF PENNSYLVANIA

[Signature]
 SIGNATURE OF PERSON SUBMITTING REPORT
Michele Hockman
 PRINTED NAME
215 **215-740-5411**
 AREA CODE DAYTIME TELEPHONE NUMBER

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. 1088, No. 62) AS AMENDED.

SWORN TO AND SUBSCRIBED BEFORE ME THIS
21st DAY OF **January** 20**16**

[Signature]
 SIGNATURE
 MY COMMISSION EXPIRES **July 27 2019**
 MO. DAY YR.
 COMMONWEALTH OF PENNSYLVANIA

[Signature]
 SIGNATURE OF CANDIDATE
MARK LEVY
 PRINTED NAME
267 **738-6536**
 AREA CODE DAYTIME TELEPHONE NUMBER

NOTARIAL SEAL
LISA J BORKOWSKI
 Notary Public Department of State
NORRISTOWN BORO, MONTGOMERY COUNTY
 My Commission Expires Jul 27, 2019