

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.

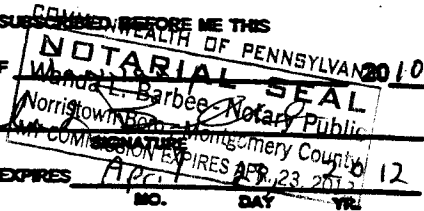
FILER IDENTIFICATION NUMBER ▶ <b>0060526</b>		REPORT FILED ON BEHALF OF ▶	CANDIDATE <sup>1</sup>	COMMITTEE <sup>2</sup>	LOBBYIST <sup>3</sup>	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <b>Jim Matthews</b>						
STREET ADDRESS <b>674 Greycliffe Lane</b>						
CITY <b>Ambler</b>		STATE <b>PA</b>	ZIP CODE <b>19002-</b>			
TYPE OF REPORT (CHECK ONE)  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 <input checked="" type="checkbox"/>	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY		
	DATE OF ELECTION					
	MO. DAY YEAR		<b>11 03 09</b>			
	DATES OF REPORTING PERIOD					
	MO. DAY YEAR		<b>11 24 09 TO 12 31 09</b>			
	CASH BALANCE AT END OF REPORTING PERIOD: \$		<b>- 0 -</b>			
	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$		<b>- 0 -</b>			
AMENDMENT REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>						
TERMINATION REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>						
OFFICE OF VOTER SERVICES MONTG. CO. PA. RECEIVED 2010 JAN 29 P 4:02 <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 <b>29th</b> DAY OF <b>Wanda L. Barbee</b> Notary Public My Commission Expires <b>Apr 23 2012</b>	 SIGNATURE OF PERSON SUBMITTING REPORT <u>Jim Matthews</u> PRINTED NAME _____ AREA CODE _____ DAYTIME TELEPHONE NUMBER _____
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**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 MY COMMISSION EXPIRES _____ MO. DAY YR.	SIGNATURE OF CANDIDATE _____ PRINTED NAME _____ AREA CODE _____ DAYTIME TELEPHONE NUMBER _____
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