FILED IN LIEU OF A FULL REPORT ONLY IF AGGREGATE RECEIPTS, EXPENDITURES, OR LIABILITIES INCURRED EACH DID NOT EXCEED $250.00 DURING THE REPORTING PERIOD.

<table>
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<th>FILTER IDENTIFICATION NUMBER</th>
<th>REPORT FILED ON BEHALF OF</th>
<th>CANDIDATE ☒</th>
<th>COMMITTEE ☐</th>
<th>LOBBYIST ☐</th>
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**D. BRUCE HANES**

313 MARVIN ROAD

ELKINS PARK, PA

CITY

STATE

ZIP CODE: 19027

**TYPE OF REPORT (CHECK ONE)***

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<th>2ND FRIDAY PRE-PRIMARY</th>
<th>30 DAY POST-PRIMARY</th>
<th>6TH TUESDAY PRE-ELECTION</th>
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<th>30 DAY POST-ELECTION</th>
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**DATES OF REPORTING PERIOD***

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**CASH BALANCE AT END OF REPORTING PERIOD:**

$00.00

**TOTAL AMOUNT OF FILER’S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:**

$00.00

**AMENDMENT REPORT?**

YES ☐

NO ☒

**TERMINATION REPORT?**

YES ☐

NO ☒

**OFFICE OF VOLUNTEER SERVICES, MONTGOMERY COUNTY**

**RECEIVED**

2010 MAY 4 P 2:04

**AFFIDAVIT SECTION***

PART I

If statement is filed on behalf of a Political Committee or Candidate’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 SWORN TO AND SIGNED BEFORE ME THIS

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COMMONWEALTH OF PENNSYLVANIA

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DONNA L. MURPHY, Notary Public

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