

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 FRIENDS OF JOE HOFFEL						
STREET ADDRESS 21 E. AIRY ST						
CITY NORRISTOWN			STATE PA	ZIP CODE 19401		
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	NAME OF OFFICE SOUGHT BY CANDIDATE COUNTY COMMISSIONER		DISTRICT NO.	PARTY DEM	DATE OF ELECTION	
	DATES OF REPORTING PERIOD MO. DAY YEAR TO MO. DAY YEAR 10 18 10 TO 12 31 10		FOR OFFICE USE ONLY			
	CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>453.65</u>		RECEIVED 2011 JAN 28 A 11:11 OFFICE OF VOTER SERVICES MONTG. CO. PA			
	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>					
	AMENDMENT REPORT? YES NO <input checked="" type="checkbox"/>					
	TERMINATION REPORT? YES 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
28 DAY OF January 2011
Jennifer Mairead Gallivan
 SIGNATURE
 MY COMMISSION EXPIRES Aug 13 2012
 MO. DAY YR.

Steve Wicke
 SIGNATURE OF PERSON SUBMITTING REPORT
STEVE WICKE
 PRINTED NAME
 AREA CODE DAYTIME TELEPHONE NUMBER

PART II -

NOTARIAL SEAL

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.S. 9833 PMS. 820) AS AMENDED.

SWORN TO AND SUBSCRIBED BEFORE ME THIS
28 DAY OF January 2011
Jennifer Mairead Gallivan
 SIGNATURE
 MY COMMISSION EXPIRES Aug 13 2012
 MO. DAY YR.

Joseph Hoeffel
 SIGNATURE OF CANDIDATE
JOSEPH HOFFEL
 PRINTED NAME
215 983-7708
 AREA CODE DAYTIME TELEPHONE NUMBER

NOTARIAL SEAL

JENNIFER MAIREAD GALLIVAN
 Notary Public

Department of State • Bureau of Commissions, Elections and Legislation
 303 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280

MONTGOMERY COUNTY COURT HOUSE

Board of Elections
 PO Box 37
 Norristown, PA 19381

DSEB 503 (12-99)

NORRISTOWN BORO., MONTGOMERY COUNTY
 My Commission Expires Aug 13 2012