

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 ▶ 45-0678927		REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE ² <input type="checkbox"/>	LOBBYIST ³ <input type="checkbox"/>		
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST Moon Ahn							
STREET ADDRESS 142 E. Main St							
CITY Lansdale		STATE PA	ZIP CODE 19446 - 2519				
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION		
	Clerk of Courts		Mont	Rep	MO.	DAY	YEAR
	6TH TUESDAY PRE-PRIMARY				5	17	2011
	2ND FRIDAY PRE-PRIMARY				FOR OFFICE USE ONLY		
	30 DAY POST-PRIMARY				RECEIVED 2011 JUN 16 A 9:50 NOTARY PUBLIC JOANNE Y. AHN		
	6TH TUESDAY PRE-ELECTION						
	2ND FRIDAY PRE-ELECTION						
30 DAY POST-ELECTION							
ANNUAL REPORT							
DATES OF REPORTING PERIOD		CASH BALANCE AT END OF REPORTING PERIOD: \$ 0		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 0			
MO. DAY YEAR		MO. DAY YEAR		AMENDMENT REPORT? YES NO <input checked="" type="checkbox"/>			
5 3 2011		6 6 11		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
 14th DAY OF June

SIGNATURE OF PERSON SUBMITTING REPORT
 [Signature] ROYALD HOCT
 PRINTED NAME
 847-0506
 DAYTIME TELEPHONE NUMBER

NOTARIAL SEAL
 JOANNE Y AHN
 Notary Public
 WORCESTER TWP. MONTGOMERY COUNTY
 My Commission Expires Dec 18, 2011

MY COMMISSION EXPIRES 12 MO. 18 DAY 2011

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
 14th DAY OF June

SIGNATURE OF CANDIDATE
 [Signature] Ahn
 PRINTED NAME
 2-8417
 DAYTIME TELEPHONE NUMBER

NOTARIAL SEAL
 JOANNE Y AHN
 Notary Public
 WORCESTER TWP. MONTGOMERY COUNTY
 My Commission Expires Dec 18, 2011

MY COMMISSION EXPIRES 12 MO. 18 DAY 2011