

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	<input checked="" type="checkbox"/>	COMMITTEE	<input type="checkbox"/>	LOBBYIST	<input type="checkbox"/>
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <b>MARK LEVY</b>								
STREET ADDRESS <b>2113 SIERRA RD</b>								
CITY <b>PLYMOUTH MEETING</b>			STATE <b>PA</b>		ZIP CODE <b>19462</b>			
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY		DATE OF ELECTION	
6TH TUESDAY PRE-PRIMARY		<b>PROTHONOTARY</b>		<b>N/A</b>	<b>DEM</b>		MO.	DAY
2ND FRIDAY PRE-PRIMARY							<b>11</b>	<b>6</b>
30 DAY POST-PRIMARY							YEAR <b>2012</b>	
6TH TUESDAY PRE-ELECTION							FOR OFFICE USE ONLY	
2ND FRIDAY PRE-ELECTION							RECEIVED 2012 JAN 30 P 2:4 CAMPAIGN FINANCE STATEMENT COUNTY OF DELAWARE	
30 DAY POST-ELECTION								
ANNUAL REPORT								
		DATES OF REPORTING PERIOD		MO.	DAY	YEAR	TO	
				<b>1</b>	<b>1</b>	<b>2012</b>	<b>12 31 2012</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	NO	<input checked="" type="checkbox"/>		
		TERMINATION REPORT?		YES	NO	<input checked="" type="checkbox"/>		

**AFFIDAVIT SECTION**

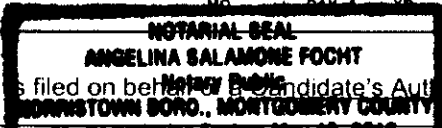
**PART I -**

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  
**30th** DAY OF **January** 20**13**  
**Angelina Salamone Focht**  
 SIGNATURE  
 MY COMMISSION EXPIRES **05/10/2015**

**Mark Levy**  
 SIGNATURE OF PERSON SUBMITTING REPORT  
**MARK LEVY**  
 PRINTED NAME  
**267** AREA CODE  
**738-6536** 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) TO THE BEST OF MY KNOWLEDGE AND BELIEF THIS POLITICAL COMMITTEE HAS NOT VIOLATED ANY PROVISIONS OF THE ACT OF JUNE 3, 1957 (P.L. 1955, 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