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.

IDENTIFICATION NUMBER

NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST

LINDA M. HEE

STREET ADDRESS

5TH EDGE HILL ROAD

CITY

ABINGTON

STATE

PA

ZIP CODE

19001

TYPE OF REPORT

(CHECK ONE)

30 DAY POST-PRIMARY

6TH TUESDAY PRE-PRIMARY

2ND FRIDAY PRE-PRIMARY

30 DAY POST-PRIMARY

6TH TUESDAY PRE-ELECTION

2ND FRIDAY PRE-ELECTION

30 DAY POST-ELECTION

ANNUAL REPORT

NAME OF OFFICE SOUGHT BY CANDIDATE

DISTRICT NO.

PARTY

DEM

DATE OF ELECTION

01 01 2013

6 TO 31 2013

CASH BALANCE AT END OF REPORTING PERIOD:

$ 00

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

$ 00

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.

SIGNATURE OF PERSON SUBMITTING REPORT

PRINTED NAME

SIGNATURE OF CANDIDATE

PRINTED NAME

SIGNATURE OF LOBBYIST

PRINTED NAME

DATE OF COMMISSION EXPIRES OCTOBER 18, 2016

COMMONWEALTH OF PENNSYLVANIA

HARRISBURG, PA 17120-0029

(717) 787-5280

Department of State • Bureau of Commissions, Elections and Legislation