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.

<table>
<thead>
<tr>
<th>FILER IDENTIFICATION NUMBER</th>
<th>REPORT FILED ON BEHALF OF</th>
<th>CANDIDATE</th>
<th>COMMITTEE</th>
<th>LOBBYIST</th>
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NAME OF COMMITTEE, CANDIDATE OR LOBBYIST
Karen Gold Sanchez

STREET ADDRESS
356 Evergreen Road

CITY
Jenkintown

STATE
PA

ZIP CODE
19046

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

DISTRICT NO.

PARTY
Dem

DATE OF ELECTION
11 03 2015

FOR OFFICE USE ONLY

CASH BALANCE AT END OF REPORTING PERIOD: $ 0

TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: $ 0

DATES OF REPORTING PERIOD
11 24 15 TO 12 31 15

AMENDMENT REPORT?
YES

TERMINATION REPORT?
YES

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 SWORE (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OF EXPENDITURES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS ($250.00). THIS STATEMENT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS 27 DAY OF January 2016.

SIGNATURE OF PERSON SUBMITTING REPORT
Karen Gold Sanchez

SIGNATURE OF COMMISSIONER OF MUNICIPAL OFFICIALS

SIGNATURE OF NOTARY PUBLIC
Dianna Dillio, Notary Public

MASSACHUSETTS ASSOCIATION OF NOTARIES

SIGNATURE OF PERSON SUBMITTING REPORT
Karen Gold Sanchez

SIGNATURE OF COMMISSIONER OF MUNICIPAL OFFICIALS

SIGNATURE OF NOTARY PUBLIC
Dianna Dillio, Notary Public

PART II -
If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

I SWORE (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 ___DAY OF _________ 20__

SIGNATURE OF CANDIDATE

SIGNATURE

MY COMMISSION EXPIRES ___ MO. ___ DAY ___ YR.

AREA CODE 267 DAYTIME TELEPHONE NUMBER 4115-1199

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

DSEB-503 (12-99)