

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 <i>Stephen A Tolbert, Jr.</i>						
STREET ADDRESS <i>2439 Hillside Dr.</i>						
CITY <i>Jeffersonville</i>		STATE <i>PA</i>	ZIP CODE <i>19403</i>			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE <i>West Norriton Commission</i>		DISTRICT NO. <i>46</i>	PARTY <i>R</i>		
	DATE OF ELECTION		DATE OF ELECTION			
	MO. DAY YEAR		MO. DAY YEAR			
	<i>11 13 2015</i>		<i>11 13 2015</i>			
	6TH TUESDAY PRE-PRIMARY		FOR OFFICE USE ONLY			
	2ND FRIDAY PRE-PRIMARY <input checked="" type="checkbox"/>		APR 15 PM 3:27			
	30 DAY POST-PRIMARY		OFFICE USE ONLY			
30 DAY POST-ELECTION		DATES OF REPORTING PERIOD		CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u>		
ANNUAL REPORT		MO. DAY YEAR TO MO. DAY YEAR		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>		
		AMENDMENT REPORT?		NO <input checked="" type="checkbox"/>		
		TERMINATION REPORT?		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 COMMONWEALTH OF PENNSYLVANIA DAY OF <u>20</u> <u>11</u> 20 <u>15</u> NOTARIAL SEAL WHITNEY ROBIN DAVIS Notary Public NORRISTOWN BORO, MONTGOMERY CNTY MY COMMISSION EXPIRES <u>Feb 28 2019</u>	SIGNATURE OF PERSON SUBMITTING REPORT PRINTED NAME <u>Stephen A Tolbert Jr.</u> AREA CODE <u>610</u> DAYTIME TELEPHONE NUMBER <u>635-8292</u>
--	---

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 _____ DAY OF _____ 20____ _____ SIGNATURE MY COMMISSION EXPIRES _____ MO. DAY YR.	SIGNATURE OF CANDIDATE _____ PRINTED NAME _____ AREA CODE _____ DAYTIME TELEPHONE NUMBER _____
--	--

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