

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	COMMITTEE	<input checked="" type="checkbox"/> LOBBYIST			
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <b>HANES FOR REGISTER OF WILLS</b>								
STREET ADDRESS <b>313 MARVIN RD.</b>								
CITY <b>ELKINS PARK</b>			STATE <b>PA</b>	ZIP CODE <b>19027-</b>				
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION			
	<b>MONTGOMERY COUNTY REGISTER OF WILLS/CLERK OF ORPHANS' COURT</b>			<b>DEM</b>	MO.	DAY	YEAR	
6TH TUESDAY PRE-PRIMARY	1				<b>11</b>	<b>2</b>	<b>2010</b>	
2ND FRIDAY PRE-PRIMARY	2				FOR OFFICE USE ONLY			
30 DAY POST-PRIMARY	3				RECEIVED 2011 JAN 25 P 3:39 OFFICE OF VOTER SERVICES MONTG. CO. PA			
6TH TUESDAY PRE-ELECTION	4							
2ND FRIDAY PRE-ELECTION	5							
30 DAY POST-ELECTION	6							
ANNUAL REPORT	<input checked="" type="checkbox"/>							
DATES OF REPORTING PERIOD		MO.	DAY	YEAR				TO
		<b>11</b>	<b>23</b>	<b>10</b>		<b>12</b>	<b>31</b>	<b>10</b>
CASH BALANCE AT END OF REPORTING PERIOD:				\$ <b>1636.87</b>				
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:				\$ <b>00.00</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  
**25<sup>th</sup>** DAY OF **January** 20**11**  
*Kathleen M. Acosta*  
 SIGNATURE  
 COMMONWEALTH OF PENNSYLVANIA 11/30/2014  
 NOTARIAL SEAL MO. DA YR.  
**KATHLEEN M. ACOSTA, Notary Public**  
 Jenkintown Boro., Montgomery County  
 My Commission Expires November 30, 2014

*Edward Lichstein*  
 SIGNATURE OF PERSON SUBMITTING REPORT  
**EDWARD LICHSTEIN**  
 PRINTED NAME  
**215 635-3154**  
 AREA CODE 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) 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  
**25<sup>th</sup>** DAY OF **January** 20**11**  
*Kathleen M. Acosta*  
 SIGNATURE  
 COMMONWEALTH OF PENNSYLVANIA 11/30/2014  
 NOTARIAL SEAL MO. DA YR.  
**KATHLEEN M. ACOSTA, Notary Public**  
 Jenkintown Boro., Montgomery County  
 My Commission Expires November 30, 2014

*D. Bruce Hanes*  
 SIGNATURE OF CANDIDATE  
**D. BRUCE HANES**  
 PRINTED NAME  
**215 813-1400**  
 AREA CODE DAYTIME TELEPHONE NUMBER