

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 LWDA M. HEE					
STREET ADDRESS 1517 EDGE HILL ROAD					
CITY ARLINGTON		STATE PA	ZIP CODE 10001		
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE MONTGOMERY COUNTY RECORDS OF DEBTS		DISTRICT NO.	PARTY DEM	
			DATE OF ELECTION		
6TH TUESDAY PRE-PRIMARY	1			MO. 11	DAY 08
2ND FRIDAY PRE-PRIMARY	2			YEAR 2011	
30 DAY POST-PRIMARY	3				
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		FOR OFFICE USE ONLY	
MO. 11	DAY 29	YEAR 2011	RECEIVED 2012 FEB - 1 A 10:45 OFFICE OF VOTER SERVICES MONTG. CO PA <input checked="" type="checkbox"/>
CASH BALANCE AT END OF REPORTING PERIOD: \$ 100		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ 00	

AMENDMENT REPORT?	YES	NO
TERMINATION REPORT?	YES	NO

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 2012

Linda M. Hee
 SIGNATURE OF PERSON SUBMITTING REPORT

LWDA M. HEE
 PRINTED NAME

MY COMMISSION EXPIRES 8 23 12
 MO. DAY YR.

(267) 738-2234
 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

DAY OF 20

SIGNATURE OF CANDIDATE

PRINTED NAME

SIGNATURE

MY COMMISSION EXPIRES MO. DAY YR.

AREA CODE

DAYTIME TELEPHONE NUMBER

Department of State • Bureau of Commissions, Elections and Legislation
 210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-6280