

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 <i>Friends of Sheriff Russell J. Bone</i>					
STREET ADDRESS <i>40 EAST WILKINSON</i>					
CITY <i>NORRISTOWN</i>		STATE <i>PA</i>	ZIP CODE <i>19401</i>		
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	
	<i>Sheriff of Montgomery County</i>		<i>46</i>	<i>R</i>	
6TH TUESDAY PRE-PRIMARY	1.	DATES OF REPORTING PERIOD		DATE OF ELECTION	
2ND FRIDAY PRE-PRIMARY	2.	MO. DAY YEAR		MO.	DAY YEAR
30 DAY POST-PRIMARY	3.	<i>11 29 15</i> TO <i>12 31 15</i>		<i>11</i>	<i>3 15</i>
6TH TUESDAY PRE-ELECTION	4.	CASH BALANCE AT END OF REPORTING PERIOD: \$ <i>0</i> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <i>0</i>			
2ND FRIDAY PRE-ELECTION	5.				
30 DAY POST-ELECTION	6.	AMENDMENT REPORT?		FOR OFFICE USE ONLY	
ANNUAL REPORT	7. <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
		TERMINATION REPORT?			
		YES <input checked="" type="checkbox"/> NO <input 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 NOTARIAL SEAL WHITNEY ROBIN DAVIS Notary Public NORRISTOWN BORO, MONTGOMERY CNTY MY COMMISSION EXPIRES <i>08/20/2018</i>	SIGNATURE OF PERSON SUBMITTING REPORT <i>[Signature]</i> PRINTED NAME <i>610 275-2110</i> AREA CODE DAYTIME TELEPHONE NUMBER
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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 COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL WHITNEY ROBIN DAVIS Notary Public NORRISTOWN BORO, MONTGOMERY CNTY MY COMMISSION EXPIRES <i>08/20/2018</i>	SIGNATURE OF CANDIDATE <i>Russell J. Bone</i> PRINTED NAME <i>610 637-3490</i> AREA CODE DAYTIME TELEPHONE NUMBER
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