

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 <b>Leslie Richards</b>									
STREET ADDRESS <b>2106 Basswood Drive</b>									
CITY <b>Lafayette Hill</b>			STATE <b>PA</b>		ZIP CODE <b>19444</b>				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION			
1. 6TH TUESDAY PRE-PRIMARY 2. 2ND FRIDAY PRE-PRIMARY <input checked="" type="checkbox"/> 3. 30 DAY POST-PRIMARY 4. 6TH TUESDAY PRE-ELECTION 5. 2ND FRIDAY PRE-ELECTION 6. 30 DAY POST-ELECTION 7. ANNUAL REPORT		<b>County Commissioner</b>			<b>DEM</b>	MO.	DAY	YEAR	
		DATES OF REPORTING PERIOD		MO.	DAY	YEAR	MO.	DAY	YEAR
		1 1 11 TO 5 2 11							
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>0</u>							
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0</u>							
		AMENDMENT REPORT? YES NO <input checked="" type="checkbox"/>							
		TERMINATION REPORT? YES NO <input checked="" type="checkbox"/>							
		FOR OFFICE USE ONLY							
		RECEIVED 2011 MAY -6 A 11 OFFICE OF VOTER SERVICE MONTG. CO.							

**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

5<sup>th</sup> DAY OF May

NOTARIAL SEAL  
 ROBIN A BEALL  
 Notary Public  
 SIGNATURE: Leslie Richards  
 MONTGOMERY COUNTY  
 My Commission Expires Dec 19, 2012

SIGNATURE OF PERSON SUBMITTING REPORT  
Leslie Richards  
 PRINTED NAME

MY COMMISSION EXPIRES MO. DAY YR.

215 886-7376  
 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

SIGNATURE

PRINTED NAME

MY COMMISSION EXPIRES MO. DAY YR.

AREA CODE DAYTIME TELEPHONE NUMBER