## CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each <u>did not exceed \$250.00</u> during the reporting period.

ER IDENTIFICATION				ON E	EHALF OF		GANDIDATE	X	COMMITTEE	<u> </u>	l	
MBER ME OF FILING COMMITTEE,	CANDIDATE OR LOBBYIST	<u></u>										
Jenny Br												
REET ADDRESS												
2 Gunnir	g Lane			<del></del>				ZIP C	NO.E		·	
n'				STATE	PA			1"	1903	35	_	
Gladwyne					DISTRICT	. 200	PARTY	<u> </u>			ELECTIO	 N
TYPE OF REPORT	NAME OF OFFICE SOUG Montgomery	County			DISTRICT	NO.			MO.	DA	Y Y	EAR
(CHECK ONE)	Commission	Commissioner					REP		11	08	20	11
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Department of State ● Bureau of Commissions, Elections and Legislation 210 North Office Building ● Harrisburg, PA 17120-0029 ● (717) 787-5280