

Commonwealth of Pennsylvania
CAMPAIGN FINANCE REPORT

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number: <input type="checkbox"/>		Report Filed By: <input type="checkbox"/>		CANDIDATE ^{1.}		COMMITTEE ^{2.} <input checked="" type="checkbox"/>		LOBBYIST ^{3.}	
Name of Filing Committee, Candidate, or Lobbyist: HANES for REGISTER OF WILLS									
Street Address: 313 MARVIN RD									
City: ELKINS PARK					State: PA		Zip Code: 19027		
TYPE OF REPORT (place X to the right of report type)	1ST TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST PRIMARY	3.	AMENDMENT REPORT?	YES	NO <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5. <input checked="" type="checkbox"/>	30 DAY POST ELECTION	6.	TERMINATION REPORT?	YES	NO <input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	YEAR		FILING METHOD () CHECK ONE		PAPER	<input checked="" type="checkbox"/>	DISKETTE
Name of Office Sought by Candidate: MONTGOMERY COUNTY Register of Wills Clerk of Orphans Court					DATE OF ELECTION			District Number	Office Code
					MO.	DAY	YEAR		Party Code
					11	5	2013		County Code
(SEE INSTRUCTIONS FOR CODES)									
Summary of Receipts and Expenditures from:			MO.	DAY	YEAR	To	MO.	DAY	YEAR
			6	11	2013		10	21	2013
A. Amount Brought Forward From Last Report					\$ 4644.78				
B. Total Monetary Contributions and Receipts (From Schedule I)					\$ 250 -				
C. Total Funds Available (Sum of Lines A and B)					\$ 4894.78				
D. Total Expenditures (From Schedule III)					\$ 2243.40				
E. Ending Cash Balance (Subtract Line D from Line C)					\$ 2651.38				
F. Value of In-Kind Contributions Received (From Schedule II)					\$				
G. Unpaid Debts and Obligations (From Schedule IV)					\$				
FOR OFFICE USE ONLY									
2013 OCT 23 PM 3:00									

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

23rd day of October, 2013

Edward Lichstein

Signature of Person Submitting Report

EDWARD LICHSTEIN

Printed Name

215

Area Code

635-3154

Daytime Telephone Number

COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL

Signature KATHLEEN M. ACOSTA, Notary Public

11 - 30 - 2014
 MO. DAY YR. My Commission Expires November 30, 2014

PART II - If this is a report of a Candidate's Authorized Committee, candidate shall 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

23rd day of October, 2013

D. Bruce Hanes

Signature of Candidate

D. BRUCE HANES

Printed Name

215

Area Code

813-1400

Daytime Telephone Number

Signature

11 - 30 - 2014
 MO. DAY YR. My Commission Expires November 30, 2014

NOTARIAL SEAL

KATHLEEN M. ACOSTA, Notary Public
 Jenkintown Boro., Montgomery County
 My Commission Expires November 30, 2014

Department of State • Bureau of Commissions, Elections and Legislation
 Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate HANES for REGISTER of Mills	Reporting Period From 6/11/13 To 10/21/13
---	--

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$ <u> </u>

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ <u>250</u>
All Other Contributions (Part B)	\$ <u> </u>
TOTAL for the Reporting Period	(2) \$ <u>250. —</u>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ <u> </u>
All Other Contributions (Part D)	\$ <u> </u>
TOTAL for the Reporting Period	(3) \$ <u> </u>

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period	(4) \$ <u> </u>

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)</i>	\$ <u>250 —</u>
---	-----------------

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate HANES for Register of Wills	Reporting Period From 6/11/13 To 10/21/13
---	--

				DATE			AMOUNT
Full Name of Contributing Committee				MO.	DAY	YEAR	
T AND M Associates PAC				7	12	2013	\$ 250.00
Mailing Address				MO.	DAY	YEAR	\$
11 TINDALL RD							
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
MIDDLETON		NJ	07748 -				
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State				MO.	DAY	YEAR	\$
Zip Code (Plus 4)				MO.	DAY	YEAR	\$
-							
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State				MO.	DAY	YEAR	\$
Zip Code (Plus 4)				MO.	DAY	YEAR	\$
-							
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State				MO.	DAY	YEAR	\$
Zip Code (Plus 4)				MO.	DAY	YEAR	\$
-							
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State				MO.	DAY	YEAR	\$
Zip Code (Plus 4)				MO.	DAY	YEAR	\$
-							
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State				MO.	DAY	YEAR	\$
Zip Code (Plus 4)				MO.	DAY	YEAR	\$
-							
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State				MO.	DAY	YEAR	\$
Zip Code (Plus 4)				MO.	DAY	YEAR	\$
-							
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City				MO.	DAY	YEAR	\$
State				MO.	DAY	YEAR	\$
Zip Code (Plus 4)				MO.	DAY	YEAR	\$
-							

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL
\$ 250.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate HANES for Register of Wills	Reporting Period From 6/11/13 To 10/21/13
---	--

To Whom Paid HORSHAM DEMOCRATIC COMMITTEE	MO. 6	DAY 19	YEAR 13	Amount \$ 100.-
Mailing Address P.O. Box 691				
Description of Expenditure CONTRIBUTION				
City Horsham	State PA	Zip Code (Plus 4) 19044-		

To Whom Paid Friends of JASON SALUS	MO. 6	DAY 19	YEAR 13	Amount \$ 100.-
Mailing Address 210 MAPLE STREET				
Description of Expenditure CONTRIBUTION				
City Coughlaoken	State PA	Zip Code (Plus 4) 19428		

To Whom Paid FRIENDS of Leslie RICHARDS	MO. 6	DAY 25	YEAR 13	Amount \$ 100.-
Mailing Address P.O. BOX 241				
Description of Expenditure CONTRIBUTION				
City Abington	State PA	Zip Code (Plus 4) 19001-		

To Whom Paid MONTGOMERY COUNTY Dem. Comm.	MO. 6	DAY 25	YEAR 13	Amount \$ 750.-
Mailing Address P.O. Box 857				
Description of Expenditure CONTRIBUTION				
City NORTGTON,	State PA	Zip Code (Plus 4) 19404		

To Whom Paid NATIONbuilder	MO. 7	DAY 10	YEAR 13	Amount \$ 278.40
Mailing Address 448 Hill ST. STE 200				
Description of Expenditure e-mail services				
City LOS ANGELES	State CA	Zip Code (Plus 4) 90013-		

To Whom Paid Friends of Shapiro/Richards	MO. 7	DAY 12	YEAR 13	Amount \$ 40.-
Mailing Address P.O. Box 241				
Description of Expenditure CONTRIBUTION				
City Abington	State PA	Zip Code (Plus 4) 19001-		

To Whom Paid Upper gunned First	MO. 7	DAY 16	YEAR 13	Amount \$ 100.-
Mailing Address P.O. Box 64				
Description of Expenditure CONTRIBUTION				
City West Point	State PA	Zip Code (Plus 4) 19486		

To Whom Paid Upper Moreland Democrats	MO. 8	DAY 13	YEAR 13	Amount \$ 100
Mailing Address P.O. Box 219				
Description of Expenditure CONTRIBUTION				
City Willow Grove	State PA	Zip Code (Plus 4) 19090-		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	PAGE TOTAL \$ 1568.40
---	---------------------------------

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate HANES for REGISTER of Wills	Reporting Period From 6/11/13 To 10/21/13
---	--

To Whom Paid JOANNE Olszewski	MO. 8	DAY 14	YEAR 13	Amount \$ 50.-
Mailing Address 1538 BETHLEHEM PIKE				
Description of Expenditure re-embursement for				
City FLOURTOWN State PA Zip Code (Plus 4) 19031 -				
Sum AD				

To Whom Paid ROYERSFORD Democratic Party	MO. 9	DAY 14	YEAR 13	Amount \$ 100
Mailing Address ROYERSFORD Democratic Party				
Description of Expenditure CONTRIBUTION				
City ROYERSFORD State PA Zip Code (Plus 4) 19068 -				

To Whom Paid Friends of Jeanne Soy	MO. 9	DAY 21	YEAR 13	Amount \$ 100.-
Mailing Address 76 S Bethlehem Pike				
Description of Expenditure CONTRIBUTION				
City Ambler State PA Zip Code (Plus 4) 19002-				

To Whom Paid MONTGOMERY County Dem. Comm.	MO. 9	DAY 24	YEAR 13	Amount \$ 150.-
Mailing Address P.O. BOX 857				
Description of Expenditure CONTRIBUTION				
City NORTASTOWN State PA Zip Code (Plus 4) 19094 -				

To Whom Paid Area 4 Democratic Comm.	MO. 10	DAY 10	YEAR 13	Amount \$ 250.-
Mailing Address PO BOX 285				
Description of Expenditure CONTRIBUTION				
City Worcester State PA Zip Code (Plus 4) 19149-				

To Whom Paid JENKINTOWN Democrats	MO. 10	DAY 19	YEAR 13	Amount \$ 25.-
Mailing Address 306 ROD MAN ST				
Description of Expenditure CONTRIBUTION				
City JENKINTOWN State PA Zip Code (Plus 4) 19146-				

To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address				
Description of Expenditure				
City				
State				
Zip Code (Plus 4)				

To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address				
Description of Expenditure				
City				
State				
Zip Code (Plus 4)				

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL
\$ 675.-