

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 ¹	COMMITTEE ² <input checked="" type="checkbox"/>	LOBBYIST ³													
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Friends of Ann Thornburg Weiss</i>																	
STREET ADDRESS <i>1100 Donna Drive</i>																	
CITY <i>Ft. Washington</i>		STATE <i>PA</i>	ZIP CODE <i>19034 -</i>														
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION												
	<i>Clerk of Courts</i>			<i>DEM</i>	MO.	DAY	YEAR										
6TH TUESDAY PRE-PRIMARY ¹					<i>11</i>	<i>3</i>	<i>2015</i>										
2ND FRIDAY PRE-PRIMARY ²					FOR OFFICE USE ONLY												
30 DAY POST-PRIMARY ³					DATES OF REPORTING PERIOD MO. DAY YEAR TO MO. DAY YEAR <i>11 24 15 TO 12 31 2015</i>												
6TH TUESDAY PRE-ELECTION ⁴																	
2ND FRIDAY PRE-ELECTION ⁵																	
30 DAY POST-ELECTION ⁶																	
ANNUAL REPORT ⁷ <input checked="" type="checkbox"/>																	
		DATES OF REPORTING PERIOD MO. DAY YEAR TO MO. DAY YEAR <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td>MO.</td><td>DAY</td><td>YEAR</td></tr> <tr><td><i>11</i></td><td><i>24</i></td><td><i>15</i></td></tr> </table> TO <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td>MO.</td><td>DAY</td><td>YEAR</td></tr> <tr><td><i>12</i></td><td><i>31</i></td><td><i>2015</i></td></tr> </table>		MO.	DAY	YEAR	<i>11</i>	<i>24</i>	<i>15</i>	MO.	DAY	YEAR	<i>12</i>	<i>31</i>	<i>2015</i>		
MO.	DAY	YEAR															
<i>11</i>	<i>24</i>	<i>15</i>															
MO.	DAY	YEAR															
<i>12</i>	<i>31</i>	<i>2015</i>															
		CASH BALANCE AT END OF REPORTING PERIOD: <i>\$ 5,602.12</i>															
		TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: <i>\$ 10,000.00</i>															
		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>															
		TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" 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 _____ DAY OF _____ 20____

SIGNATURE

MY COMMISSION EXPIRES _____ MO. DAY YR.

SIGNATURE OF PERSON SUBMITTING REPORT

PRINTED NAME

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 *15* DAY OF *February* 20*16*

Ann Thornburg Weiss
SIGNATURE OF CANDIDATE

Ann Thornburg Weiss
PRINTED NAME

215 _____
AREA CODE

643-0496
DAYTIME TELEPHONE NUMBER

Robin D. Leedom
SIGNATURE

COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL
 Robin D. Leedom, Notary Public
 Upper Dublin Twp., Montgomery County
 My Commission Expires Dec. 22, 2018

MY COMMISSION EXPIRES _____ MO. DAY YR.

MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES
 Department of State • Bureau of Commissions, Elections and Legislation
 210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280