

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 <input type="checkbox"/>		
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST ELECT SCOTT ZELON							
STREET ADDRESS 220 RISE LANE							
CITY HAVERFORD		STATE PA	ZIP CODE 19041				
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION		
	mont. city commissioner		46	REP	MO.	DAY	YEAR
	6TH TUESDAY PRE-PRIMARY	DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY			
	2ND FRIDAY PRE-PRIMARY	MO.	DAY	YEAR	2016 FEB -2 AM 11:24		
	30 DAY POST-PRIMARY	TO		RECEIVED			
	6TH TUESDAY PRE-ELECTION	MO.	DAY	YEAR	OFFICE OF VOTER SERVICES		
	2ND FRIDAY PRE-ELECTION	CASH BALANCE AT END OF REPORTING PERIOD:		\$ 58,823.40			
30 DAY POST-ELECTION	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ 0				
ANNUAL REPORT <input checked="" type="checkbox"/>	AMENDMENT REPORT?		YES	NO	X		
	TERMINATION REPORT?		YES	NO	X		

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

27th DAY OF January 2016

Jody L. Kelley
 SIGNATURE

MY COMMISSION EXPIRES 01-15-2017
 MO. DAY YR.

Scott Cooperman
 SIGNATURE OF PERSON SUBMITTING REPORT

SCOTT COOPERMAN
 PRINTED NAME

484 437 7777
 AREA CODE DAYTIME TELEPHONE NUMBER

NOTARIAL SEAL
 JODY L. KELLEY, Notary Public
 Township of Lower Merion, Montgomery County, PA
 My Commission Expires January 15, 2017

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

27th DAY OF January 2016

Jody L. Kelley
 SIGNATURE

MY COMMISSION EXPIRES 01-15-2017
 MO. DAY YR.

V. Scott Zelon
 SIGNATURE OF CANDIDATE

V. SCOTT ZELON
 PRINTED NAME

610 256-4100
 AREA CODE DAYTIME TELEPHONE NUMBER

NOTARIAL SEAL
 JODY L. KELLEY, Notary Public
 Township of Lower Merion, Montgomery County, PA
 My Commission Expires January 15, 2017