

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>JEANNE SORG</b>																											
STREET ADDRESS <b>76 S Bethlencn PK</b>																											
CITY <b>Ambler</b>		STATE <b>PA</b>	ZIP CODE <b>19002</b>																								
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE <b>RECORDER OF DEEDS</b>		DISTRICT NO.	PARTY <b>DEM</b>																							
	DATE OF ELECTION																										
	<table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>11</td><td>5</td><td>2019</td></tr> </table>		MO.	DAY	YEAR	11	5	2019																			
	MO.	DAY	YEAR																								
	11	5	2019																								
	<table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>1</td><td>1</td><td>19</td></tr> </table>		MO.	DAY	YEAR	1	1	19	<table border="1"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>5</td><td>6</td><td>19</td></tr> </table>		MO.	DAY	YEAR	5	6	19											
	MO.	DAY	YEAR																								
1	1	19																									
MO.	DAY	YEAR																									
5	6	19																									
<table border="1"> <tr><td>6TH TUESDAY PRE-PRIMARY</td><td>1</td></tr> <tr><td>2ND FRIDAY PRE-PRIMARY</td><td>2 <input checked="" type="checkbox"/></td></tr> <tr><td>30 DAY POST-PRIMARY</td><td>3</td></tr> <tr><td>6TH TUESDAY PRE-ELECTION</td><td>4</td></tr> <tr><td>2ND FRIDAY PRE-ELECTION</td><td>5</td></tr> <tr><td>30 DAY POST-ELECTION</td><td>6</td></tr> <tr><td>ANNUAL REPORT</td><td>7</td></tr> </table>		6TH TUESDAY PRE-PRIMARY	1	2ND FRIDAY PRE-PRIMARY	2 <input checked="" type="checkbox"/>	30 DAY POST-PRIMARY	3	6TH TUESDAY PRE-ELECTION	4	2ND FRIDAY PRE-ELECTION	5	30 DAY POST-ELECTION	6	ANNUAL REPORT	7	<table border="1"> <tr><td>AMENDMENT REPORT?</td><td>YES</td><td>NO</td><td><input checked="" type="checkbox"/></td></tr> <tr><td>TERMINATION REPORT?</td><td>YES</td><td>NO</td><td><input checked="" type="checkbox"/></td></tr> </table>		AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>	TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>	<b>FOR OFFICE USE ONLY</b> <b>RECEIVED</b> <b>2019 MAY -9 PM 12:33</b> <b>OFFICE OF VOTER SERVICES</b> <b>MONTG. CO. PA</b>	
6TH TUESDAY PRE-PRIMARY	1																										
2ND FRIDAY PRE-PRIMARY	2 <input checked="" type="checkbox"/>																										
30 DAY POST-PRIMARY	3																										
6TH TUESDAY PRE-ELECTION	4																										
2ND FRIDAY PRE-ELECTION	5																										
30 DAY POST-ELECTION	6																										
ANNUAL REPORT	7																										
AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>																								
TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>																								
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>5500</u>																											

**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 9 DAY OF May 2019

**COMMONWEALTH OF PENNSYLVANIA**  
**NOTARIAL SEAL**  
**THOMAS JOSEPH KOHLER, Notary Public**  
 Upper Merion Twp., Montgomery County  
 My Commission Expires September 7, 2021

\_\_\_\_\_  
 SIGNATURE OF PERSON SUBMITTING REPORT  
**Jeanne S**  
 PRINTED NAME

\_\_\_\_\_  
 AREA CODE 215 DAYTIME TELEPHONE NUMBER 290-9500

**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

\_\_\_\_\_  
 PRINTED NAME

MY COMMISSION EXPIRES \_\_\_\_\_ MO. \_\_\_\_\_ DAY \_\_\_\_\_ YR. \_\_\_\_\_ AREA CODE \_\_\_\_\_ DAYTIME TELEPHONE NUMBER \_\_\_\_\_