

Delaware County
Bureau fo Elections

MAY 15 2009

This a correction to the previous statement that I made in reference to the statement "That there were no withdraw-als from the Heilmann For Commissioner Account, nor any deposits. It was a error on my part and not intended to mislead anyone or persons. Iapologise for this inco-
correct entry. There was a deposit made of \$ 100.00 from a contribution from John A. Giuliani Jr. of 928 Haverford Rd. , Bryn Mawr, Pa. 19010. Also, there was total of 9 Service Fees @ ^{\$}9,00 each, equaling \$81.00 for the year of 2008.

Richard E. Houseworth
Richard E. Houseworth

Treasurer
Heilmann For Commissioner

COUNTY OF DELAWARE
BUREAU OF ELECTIONS
2009 MAY 15 PM 4: 19

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: LOCAL DEL. COUNTY | | Report Filed By: | CANDIDATE <input type="checkbox"/> | COMMITTEE <input checked="" type="checkbox"/> | LOBBYIST <input type="checkbox"/> | | | | | |
| Name of Filing Committee, Candidate or Lobbyist: HELLMANN FOR COMMISSIONER | | | | | | | | | | |
| Street Address: 129 LLANDOVER ROAD | | | | | | | | | | |
| City: BRYN MAWR | | | State: PA. | Zip Code: 19010 | | | | | | |
| TYPE OF REPORT (place X to the right of report type) | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRE-PRIMARY | 2. | 30-DAY POST-PRIMARY | 3. | AMENDMENT REPORT? | YES | NO | |
| | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY PRE-ELECTION | 5. | 30-DAY POST-ELECTION | 6. | TERMINATION REPORT? | YES | NO | |
| | ANNUAL REPORT | 7. | YEAR | FILING METHOD () CHECK ONE | | PAPER | | <input checked="" type="checkbox"/> | DISKETTE | |
| Name of Office Sought by Candidate: HAVRECORD TWP 5TH WARD COMMISSIONER | | | DATE OF ELECTION MO. DAY YEAR | | District Number | Office Code | Party Code | County Code | | |
| | | | | | | OTH REP | 23 | (SEE INSTRUCTIONS FOR CODES) | | |
| Summary of Receipts and Expenditures from: | | | MO. DAY YEAR | | MO. DAY YEAR | | FOR OFFICE USE ONLY | | | |
| | | | 12 07 2007 | | To 12 31 2008 | | COUNTY OF DELAWARE BUREAU OF ELECTIONS 2009 MAY 15 PM 4:18 | | | |
| A. Amount Brought Forward From Last Report | | | \$ | | 305.01 | | | | | |
| B. Total Monetary Contributions and Receipts (From Schedule I) | | | \$ | | 100.00 | | | | | |
| C. Total Funds Available (Sum of Lines A and B) | | | \$ | | 405.01 | | | | | |
| D. Total Expenditures (From Schedule III) | | | \$ | | 81.00 | | | | | |
| E. Ending Cash Balance (Subtract Line D from Line C) | | | \$ | | 324.01 | | | | | |
| F. Value of In-Kind Contributions Received (From Schedule II) | | | \$ | | | | | | | |
| G. Unpaid Debts and Obligations (From Schedule IV) | | | \$ | | | | | | | |

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 15 day of May 2009

[Signature]
 COMMONWEALTH OF PENNSYLVANIA
 Notarial Seal
 Signature: **Anne Lunger, Notary Public**
 Radnor Twp., Delaware County
 My Commission Expires **Oct. 30, 2012**
 Member, Pennsylvania Association of Notaries

[Signature: Richard E. Houseworth]
 Signature of Person Submitting Report
RICHARD E. HOUSEWORTH
 Printed Name

610 Area Code **527 1495** Daytime Telephone Number

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 _____ day of _____ 20____

 Signature

My commission expires _____ MO. _____ DAY _____ YR.

 Signature of Candidate

 Printed Name

 Area Code _____ Daytime Telephone Number

Department of State • Bureau of Commissions, Elections and Legislation
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