Commonwealth of Pennsylvania
CAMPAIGN FINANCE REPORT
PAGE 1 OF 5
(NOTE: This report must be typed or printed in blue or black ink.) (cover page)

Filer Identifi Number:	iler Identification umber:> Report Filed By: -> CANDIDATE 1. COMMITTEE 2. x LOBBYIST					3.								
Name of Filing Committee, Candidate or Lobbyist									<u>_</u>	<u>- L -</u>		= *		
Friends of	Risa Ferman													
Street Addr PO Box 10														
City	710					State			Zip C	ode		 .		
Norristow	n						Ά		Zip Ci	oue 194	104			
TYPE OF REPORT	6th Tuesdav Pre-Primary	1.	2nd Fridav Pre-Prima	/ 2		30 Dav Post Prin	narv	³ . x	Amen Repor	dment	YES		NO	х
(place X to	6th Tuesday	4.	2nd Friday Pre-Election	/ 5		30 Day Post Elec		6.		nation	YES		NO	х
the riaht of report type)	A	7.	Year >	201	0	Filing I Check	Meth			per	х	Disk	ette	
Name of Of	ffice Sought by	Can	didate		_	ate of Ele			istrict	Offic	e	Partv	Co	inty
	District At					lonth-Day	-Yea		ımber	Code OTH		Code REP	C	nde' 16
		•		·		05-18-1	0			(see i				
Summary o and Expend	f Receipts litures from:		Month-Da 05-04	_	ar	To N		-Day - 07- 1	-Year 0	FOI	R OF	FICE 23	USE	ONLY
A. Amount	Brought Forwa	rd Fro	om Last Re	port				\$27	,048.1	7			J	
B. Total Mo	netary Contrib	utions	and Recei	pts (l	ror	n Schedu	ıle i)	-	\$9.82	_		<u> </u>	RECEN	
C. Total Fu	nds Available (Sum	of Lines A	and E	3)			\$27	,057.99	9			宣	
D. Total Exp	penditures (Fr	om So	chedule III)					;	\$110.00	0	. '	مناذ		
E. Ending C	Cash Balance (Subtr	act Line D f	rom	Line	e C)		\$26	,947.9	9		.p	Θ	
F. Value of	In-Kind Contri	bution	s Received	(Fro	m S	Schedule	II)		0 -	-		C1		
G. Unpaid [Debts and Obli	gatior	ns (From So	chedu	ile	V)			0 -	- 🗸		<u></u>	···	
,			A	FFID	ΑV	IT SECTI	ON							
	his is a Comm													
I swear (or a the best of a	affirm) that this my knowledge	repo and b	rt, including belief true, d	the correc	atta ct a	iched sch nd comple	edule ete.	es, or	n papei	or cor	nput	er disl	kette,	are to
Sworn to	and subscribed	d befo	re me this					1.	11	[]				
day	rof Jupe			20 \	Q.	<u> </u>	Cian	The	St	Juli	$\mathcal{N}_{\mathcal{V}}$	~ : D		
Mas	10200	OF	ata.				Signa		of Pers Alfred			ing R	ероп	
	Sign	"	9 1	Δ			15		Priňt	ed Nar	me 574-2	794		
My comm	ission expires	MO.	DAY	YR.	_		Coc	le	Day	ytime 1			Numb	er
PART II _ If	this is a report	ofa	Candidate's	· Auth	ori	zed Com	mitte	2 62	ndidate	chall	cian i	horo		
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														
· *	and subscribed		•		•	1								
day of sune 2010] _ <i>[hi</i> i	30	V	<u> </u>	- (6		•				
All a son strill heats				1 /			mature Risa Ve			te				
My comm	Signation Signation	ature	1 8	4	_		15	V	Print	ed Nar 2	ne 219-3			
		MO.	<u> </u>	YŔ.		Area	a Coc	le	Day	ytime 1	elep	hone	Numb	er

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		_	_	\sim		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

,	Reporting Period
Friends of Risa Ferman	From 05-04-10 To 06-07-10

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS \$50.00 OR LESS PER C	CONT	RIBUTOR
TOTAL for the Reporting Period	(1)	0

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)		
Contributions Received from Political Committees (Part A)	0	
All Other Contributions (Part B)	0	
TOTAL for the Reporting Period	(2)	0

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	0
All Other Contributions (Part D)	0
TOTAL for the Reporting Period (3)	0

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHEC	KS, ET	C. (FROM PART I
TOTAL for the Reporting Period	(4)	\$9.82

Ì	TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	\$9.82
1	1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	

PART E OTHER RECEIPTS

PAGE	3	OF	5	

Reporting Period

Refunds, Interest Income, Returned Checks, Etc.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate

Friends of Risa Ferman			From <u>05-04-10</u>	го <u>06-07-10</u>
Full Name Verizon				
Mailing Address PO Box 660720				
City Dallas	State TX	Zip Code (Plus 4) 75266	Month-Day-Year 06-04-2010	Amount \$4.88
Receipt Description Refund				
Full Name Wachovia Bank				
Mailing Address Main Street				
City Norristown	State PA	Zip Code (Plus 4) 19401	Month-Day-Year 05-28-2010	Amount \$4.94
Receipt Description Money Maket Acct Interest				
Full Name				
Mailing Address	-			
City	State	Zip Code (Plus 4)	Month-Day-Year	Amount
Receipt Description				
Full Name				
Mailing Address				
City	State	Zip Code (Plus 4)	Month-Day-Year	Amount
Receipt Description				
Full Name				
Mailing Address				
City	State	Zip Code (Plus 4	Month-Day-Year	Amount
Receipt Description				
Full Name				" "
Mailing Address				
City	State	Zip Code (Plus 4	Month-Day-Year	Amount
Receipt Description				
Enter Grand Total of Part E on Schedule I, De	etailed	Summary Page, S	ection 4.	PageTotal \$9.82

SCHEDULE II

PAGE 4 OF 5

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

Use this Schedule to report all In-Kind Contributions of Valuable Things during the Reporting Period

Detailed Summary Page

Name of Filing Committee or Candidate	R	Reporting F	eriod	
Friends of Risa Ferman From 05-0				o <u>06-07-10</u>
1. UNITEMIZED IN-KIND CONTRIBUTION	ONS RECEIVED - VALUE of	\$50.00 or	LESS PE	R CONTRIBUT
	TOTAL for the Reporting	g Period	(1)	0

2. IN-KIND CONTRIBUTIONS RECEIVE	D - VALUE of \$50.01 TO \$25	0.00 (FRC	OM PART	F)
	TOTAL for the Reporting	Period	(2)	0
3. IN-KIND CONTRIBUTIONS RECEIVE	D - VALUE OVER \$250.00 (F	ROM PAI	RT G)	
	TOTAL for the Reporting	g Period	(3)	0
			I.	
TOTAL VALUE OF IN-KIND CONTRIBU REPORTING PERIOD (Add and enter ar and 3; also enter on Page 1, Report Cove	mount totals from Boxes 1, 2,			0

Schedule III STATEMENT OF EXPENDITURES

PAGE_	5	OF _	5

Name of Filing Committee or Candidate			Reporting	•		
			From	05-04-10 T	o <u>06-07-10</u>	
To Whom Paid			Month	n-Day-Year	Amount	
To Whom Paid ATRO			05-	18-2010	\$110.00	
Mailing Address P.O. Box 615				Description of Expenditure Ad Book Ad		
City Abington	State PA	Zip Code (Plus 19001	4)			
To Whom Paid			Month	n-Day-Year	Amount	
Mailing Address			Descr	Description of Expenditure		
City	State	Zip Code (Plus	4)			
To Whom Paid			Month	n-Day-Year	Amount	
Mailing Address			Descr	Description of Expenditure		
City	State	Zip Code (Plus	4)			
To Whom Paid			Monti	n-Day-Year	Amount	
Mailing Address			Descr	iption of Ex	penditure	
City	State	Zip Code (Plus	4)			
To Whom Paid			Montl	h-Day-Year	Amount	
Mailing Address			Descr	Description of Expenditure		
City	State	Zip Code (Plus	4)			
To Whom Paid			Mont	h-Day-Year	Amount	
lailing Address			Desci	Description of Expenditure		
City	State	Zip Code (Plus	4)			
To Whom Paid			Mont	h-Day-Year	Amount	
Mailing Address			Desc	Description of Expenditure		
City	State	Zip Code (Plus	(4)			
To Whom Paid			Mont	h-Day-Year	Amount	
Mailing Address			Desc	Description of Expenditure		
City	State	Zip Code (Plus	3 4)			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item					PageTotal \$110.00	