

# 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: <input type="checkbox"/>		Report Filed By: <input type="checkbox"/>		CANDIDATE <sup>1</sup>	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST <sup>3</sup>
Name of Filing Committee, Candidate or Lobbyist: <i>Friends of Jenny Brown</i>						
Street Address: <i>2 Gunning Lane</i>						
City: <i>Gladwyne</i>				State: <i>PA</i>	Zip Code: <i>19035 -</i>	
TYPE OF REPORT  (place X to the right of report type)	8TH TUESDAY PRE-PRIMARY <sup>1</sup>	2ND FRIDAY PRE-PRIMARY <sup>2</sup>	30 DAY POST-PRIMARY <sup>3</sup>	AMENDMENT REPORT?	YES	NO
	6TH TUESDAY PRE-ELECTION <sup>4</sup>	2ND FRIDAY PRE-ELECTION <sup>5</sup>	30 DAY POST-ELECTION <sup>6</sup>	TERMINATION REPORT?	YES	NO
	ANNUAL REPORT <sup>7</sup>	YEAR	FILING METHOD ( ) CHECK ONE <input checked="" type="checkbox"/>	PAPER	<input checked="" type="checkbox"/>	DISKETTE

Name of Office Sought by Candidate: <i>County Commissioner</i>			DATE OF ELECTION			District Number	Office Code	Party Code	County Code
MO.	DAY	YEAR	MO.	DAY	YEAR		<i>0TH</i>	<i>REP</i>	<i>46</i>
<i>11</i>	<i>2</i>	<i>2010</i>							
(SEE INSTRUCTIONS FOR CODES)									

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY
	<i>10</i>	<i>19</i>	<i>2010</i>		<i>11</i>	<i>22</i>	<i>2010</i>	
A. Amount Brought Forward From Last Report	\$ <i>1,077.26</i>							RECEIVED 2010 DEC - 1 A 9 48 OFFICE OF VOTER SERVICES MONTG. CO. PA.
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ <i>11,000.00</i>							
C. Total Funds Available (Sum of Lines A and B)	\$ <i>12,077.26</i>							
D. Total Expenditures (From Schedule III)	\$ <i>2,440.00</i>							
E. Ending Cash Balance (Subtract Line D from Line C)	\$ <i>10,437.26</i>							
F. Value of In-Kind Contributions Received (From Schedule II)	\$ <i>0.00</i>							
G. Unpaid Debts and Obligations (From Schedule IV)	\$ <i>0.00</i>							

### 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 *29th* day of *November* 20 *10*

*Tiffany Markoski*  
 NOTARIAL SEAL  
 Tiffany Markoski, Notary Public  
 Upper Merion Twp., Montgomery County  
 My Commission Expires August 20, 2014

*Philip S. Rosenzweig Esq.*  
 Signature of Person Submitting Report  
 Printed Name  
 610 Area Code  
 610 263 0124 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, this report, including the attached schedules, do not violate any provisions of the Act of June 3, 1937 (P.L. 1333, No. 320) as amended.

Sworn to and subscribed before me this *29th* day of *November*

*Todd F. Silbergeld*  
 NOTARIAL SEAL  
 Todd F. Silbergeld, Notary Public  
 Bridgeport Boro., Montgomery County  
 My Commission Expires April 2, 2013

*Jenny Brown*  
 Signature of Candidate  
 Printed Name  
 610 Area Code  
 389-9475 Daytime Telephone Number

**CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends of Jenny Brown</i>	Reporting Period From <i>10-19-2010</i> to <i>11-22-2010</i>
--	---

<b>1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR</b>	
TOTAL for the Reporting Period (1)	\$ <i>0.00</i>

<b>2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)</b>	
Contributions Received from Political Committees (Part A)	\$ <i>0.00</i>
All Other Contributions (Part B)	\$ <i>0.00</i>
TOTAL for the Reporting Period (2)	\$ <i>0.00</i>

<b>3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)</b>	
Contributions Received from Political Committees (Part C)	\$ <i>0.00</i>
All Other Contributions (Part D)	\$ <i>11,000.<sup>00</sup></i>
TOTAL for the Reporting Period (3)	\$ <i>11,000.<sup>00</sup></i>

<b>4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)</b>	
TOTAL for the Reporting Period (4)	\$ <i>0.00</i>

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	\$ <i>11,000.<sup>00</sup></i>
--	--------------------------------

**PART D  
ALL OTHER CONTRIBUTIONS**

**OVER \$250.00**

Use this Part to itemize all other contributions with an aggregate value of  
over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate <b>Friends of Jenny Brown</b>	Reporting Period From <u>10/19/2010</u> To <u>11-22-2010</u>
--	---

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
<b>Karen Aydt</b>	11	12	2010	\$ 1,000. <sup>00</sup>
Mailing Address <b>1500 Sweetbriar Rd</b>				\$
City <b>Gladwyne</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19035 -</b>		\$
Employer Name <b>self employed - Legacy Photo</b>	Occupation <b>President</b>			
Employer Mailing Address/Principal Place of Business <b>408 E. Fourth Street, Ste. 307 Bldg next, PA 19405</b>				
<b>Vahan Gureghian</b>	11	11	2010	\$ 10,000. <sup>00</sup>
Mailing Address <b>841 Menon Square Rd</b>				\$
City <b>Gladwyne</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19035 -</b>		\$
Employer Name <b>Charter School Management</b>	Occupation <b>CEO - Charter Sch. Management</b>			
Employer Mailing Address/Principal Place of Business <b>214 E. Fifth St., Chester, PA 19013</b>				
Full Name of Contributor				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				
Full Name of Contributor				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				
Full Name of Contributor				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				

Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL  
**\$ 11,000.<sup>00</sup>**

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <b>Friends of Jenny Brown</b>	Reporting Period From 10-19-2010 To 11-22-2010
--	---

To Whom Paid <b>E3 Group, LLC</b>	MO. <b>11</b>	DAY <b>11</b>	YEAR <b>2010</b>	Amount <b>\$ 2,000.<sup>00</sup></b>
Mailing Address <b>PO Box 26517</b>	Description of Expenditure <b>Consulting</b>			
City <b>Collegedale</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19426-</b>		

To Whom Paid <b>US PS</b>	MO. <b>11</b>	DAY <b>15</b>	YEAR <b>2010</b>	Amount <b>\$ 440.<sup>00</sup></b>
Mailing Address	Description of Expenditure			
City <b>Gladwyne</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19035-</b>		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4) <b>-</b>		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4) <b>-</b>		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4) <b>-</b>		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4) <b>-</b>		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4) <b>-</b>		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4) <b>-</b>		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL  
**\$ 2,440.<sup>00</sup>**