Commonwealth of Pennsylvania

CAMPAIGN FINANCE REPORT PAGE 1 OF (NOTE: This report must be typed or printed in blue or black ink.) cover page) Filer Identification Report 1. CANDIDATE COMMITTEE LOBBYIST Number: ---> Filed By: -> Name of Filing Committee, Candidate or Lobbyist Friends of Risa Ferman Street Address 300 E. Moreland Avenue City State Zip Code Hatboro PA 19040 6th Tuesday TYPE OF 11. 2nd Friday 2. 30 Day 3. Amendment YES NO X Pre-Primary Pre-Primary Post Primary REPORT Report? 6. **x** 6th Tuesday 4. 2nd Friday 5. 30 Day Termination (place X to YES NO X Pre-Election Pre-Election Report? Post Election the right of Year Annual Filina Method report type) Paper X Diskette 2010 Report Check One --> Name of Office Sought by Candidate District Date of Election Office Party County Code Code Number Code Month-Day-Year **District Attorney** OTH REP 46 11-02-10 (see instructions for codes) FOR OFFICE USE ONLY Month-Day-Year Month-Day-Year Summary of Receipts 10-19-10 and Expenditures from: 11-22-10 Tο A. Amount Brought Forward From Last Report \$51,007.8**\$**P B. Total Monetary Contributions and Receipts (From Schedule I) -- 0 --C. Total Funds Available (Sum of Lines A and B) \$51.007.85 D. Total Expenditures (From Schedule III) \$702.86 E. Ending Cash Balance (Subtract Line D from Line C) \$50,304,99 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 30 day of Novem. Signature of Person Submitting Report COMMENWEALTH OF PENNSYLVANIA Alfred F/ Zollers TARIAL BEAL Printed Name HEPSCHAPPEL - NOTARY PUBLIC 674-2784 215 Norristown Boro Montgomery County My commission expires Area Code 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. 329) as amended Sworn to and subscribed before me this 30 day of 2 C 20 / O Signature of Candidate ARLKL SEAL Risa Vetri Ferman Signature HAPPEL - NUTARY PUBLIC Norristown Boro., Montgomery County Printed Name My commission expires

215

Area Code

219-3622

Daytime Telephone Number

PAGE	2 OF	4

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

ame of Filing Committee or Candidate Reporting Period		od
Friends of Risa Ferman	10 To 11-22-10	
1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS \$50.00 OR LE	ESS PER CONT	RIBUTOR
TOTAL for the Reporting	ng Period (1)	0
2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART	ГВ)	
Contributions Received from Political Committees (Part A)		0
All Other Contributions (Part B)		0
TOTAL for the Reporting	ng 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	ng Period (3)	0
4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNE	D CHECKS, ET	C. (FROM PART E)
TOTAL for the Reporting	ng Period (4)	0
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, It		0

SCHEDULE II

PAGE 3 OF 4

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	Reportir	ng Period		
Friends of Risa Ferman	From_	10-19-10	_ To	11-22-10
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE of	\$50.00 o	r LESS PE	R CC	NTRIBUTO
TOTAL for the Reporti	ng Period	I (1)		0
			,	
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE of \$50.01 TO \$25	50.00 (FF	ROM PAR	ΓF)	
TOTAL for the Reporti	ng Period	i (2)		0
3. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OVER \$250.00 (FROM P	ART G)		
TOTAL for the Reporti	ng Period	d (3)		0
		•		
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2 and 3; also enter on Page 1, Report Cover Page, Item F.)	,			0

Schedule III STATEMENT OF EXPENDITURES

PAGE	4	OF	4
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Name of Filing Committee or Candidate			Reportin	g Period		
Friends of Risa Ferman			From_	<u> 10-19-10</u>	To 11-22-10	
			· · · · · · · · · · · · · · · · · · ·			
To Whom Paid Office Max				h-Day-Year - 20-2010	Amount \$2.86	
Mailing Address Easston Road			Descr	iption of Exp Copi		
City Willow Grove	State PA	Zip Code (Plus 4	4)			
To Whom Paid Risa Vetri Ferman				n-Day-Year - 18-2010	Amount \$700.00	
Mailing Address 1157 Wrack Road				Description of Expenditure Event Tickets		
City Meadowbrook	State PA	Zip Code (Plus 4 19046	4)			
To Whom Paid	<u> </u>		Monti	h-Day-Year	Amount	
Mailing Address			Descr	iption of Exp	penditure	
City	State	Zip Code (Plus	4)	<u> </u>		
To Whom Paid			Montl	h-Day-Year	Amount	
Mailing Address	22/2/	•	Descr	iption of Exp	penditure	
City	State	Zip Code (Plus	4)	<u> </u>		
To Whom Paid	<u></u>		Montl	h-Day-Year	Amount	
Mailing Address			Descr	iption of Exp	enditure	
City	State	Zip Code (Plus	4)			
To Whom Paid			Monti	h-Day-Year	Amount	
Mailing Address			Desci	ription of Exp	penditure	
City	State	Zip Code (Plus	4)			
To Whom Paid			Mont	h-Day-Year	Amount	
Mailing Address			Desci	ription of Ex	penditure	
City	State	Zip Code (Plus	4)			
To Whom Paid			Mont	h-Day-Year	Amount	
Mailing Address			Desci	ription of Exp	penditure	
City	State	Zip Code (Plus	4)			

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

PageTotal \$702.86