

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 ^{1.}	COMMITTEE ^{2.} <input checked="" type="checkbox"/>	LOBBYIST ^{3.}
Name of Filing Committee, Candidate or Lobbyist: <i>FRIENDS OF PETER AMUSO</i>				
Street Address: <i>P.O. Box 48</i>				
City: <i>FLORISSBURG</i>	State: <i>PA</i>	Zip Code: <i>19031</i>		

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.}		<input checked="" type="checkbox"/>	NO
	ANNUAL REPORT <input checked="" type="checkbox"/>	YEAR <i>2010</i>	FILING METHOD (✓) CHECK ONE <input checked="" type="checkbox"/>	PAPER	<input checked="" type="checkbox"/>	DISKETTE

Name of Office Sought by Candidate: <i>DISTRICT ATTORNEY</i>	DATE OF ELECTION	District Number	Office Code	Party Code	County Code
	MO. DAY YEAR <i>11 6 2007</i>		<i>OTH</i>	<i>D</i>	<i>46</i>
			(SEE INSTRUCTIONS FOR CODES)		

Summary of Receipts and Expenditures from:	MO. DAY YEAR	To	MO. DAY YEAR	FOR OFFICE USE ONLY <i>VT</i> OFFICE OF VOTER SERVICES MONTG. CO PA 2011 JAN 31 P 2:21 RECEIVED
	<i>10 19 2010</i>		<i>12 31 10</i>	
A. Amount Brought Forward From Last Report	\$ <i>1,587.32</i>			
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ <i>0</i>			
C. Total Funds Available (Sum of Lines A and B)	\$ <i>1,587.32</i>			
D. Total Expenditures (From Schedule III)	\$ <i>1,587.32</i>			
E. Ending Cash Balance (Subtract Line D from Line C)	\$ <i>0</i>			
F. Value of In-Kind Contributions Received (From Schedule II)	\$			
G. Unpaid Debts and Obligations (From Schedule IV)	\$ <i>0 BUT SEE PREVIOUS DEBT</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 *31ST* day of *January* 20 *11*

Patricia Walker
Signature

My commission expires *August 5, 2014*

Patricia Walker
Signature of Person Submitting Report

Peter C. Amuso
Printed Name

215 *805-4768*
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. 320) as amended.

Sworn to and subscribed before me this *31ST* day of *January* 20 *11*

Patricia Walker
Signature

My commission expires *August 5, 2014*

Peter C. Amuso
Signature of Candidate

Peter C. Amuso
Printed Name

215 *805-4768*
Area Code Daytime Telephone Number

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate FRIENDS OF PETER AMUSO	Reporting Period From <u>10/18/11</u> To <u>12/31/10</u>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
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)	\$
All Other Contributions (Part B)	\$
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)	\$
All Other Contributions (Part D)	\$
TOTAL for the Reporting Period (3)	\$ 0

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting 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, Item B.)	\$ 0
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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate FRIENDS OF PETER AMUSO	Reporting Period From <u>10/19/10</u> To <u>12/31/10</u>
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To Whom Paid	MO.	DAY	YEAR	Amount
CHARLES AMUSO	12	30	2010	\$ 1,587.32
Mailing Address 377 HARRINGTON WAY	Description of Expenditure PARTIAL PAYMENT OF DEBT			
City SOUBERTON	State PA	Zip Code (Plus 4) -		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
		-		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
		-		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
		-		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
		-		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
		-		
To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
		-		

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

PAGE TOTAL \$ 1,587.32

SCHEDULE IV STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations
which are outstanding at the end of the reporting period.

Name of Filing Committee or Candidate FRIENDS OF PETER AMUSO	Reporting Period From <u>10/18/10</u> To <u>12/31/10</u>
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Name of Creditor CHARLES AND PAULA AMUSO				Outstanding Balance of Debt \$ 0		
Mailing Address 377 HARRINGTON WAY	DATE DEBT INCURRED	MO. 9	DAY 1	YEAR 2007		
City SOUBERTON	State PA	Zip Code (Plus 4) 18964-				

Description of Debt
GENERAL CAMPAIGN DEBT *SEE ATTACHED LETTER OF FORTIENESS*

Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City	State	Zip Code (Plus 4)				

Description of Debt

Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City	State	Zip Code (Plus 4)				

Description of Debt

Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City	State	Zip Code (Plus 4)				

Description of Debt

Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City	State	Zip Code (Plus 4)				

Description of Debt

Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City	State	Zip Code (Plus 4)				

Description of Debt

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.	PAGE TOTAL \$ 0
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CHARLES AMUSO
377 HARRINGTON WAY
SOUDERTON, PENNSYLVANIA 18964

December 30, 2010

Friends of Peter Amuso
P.O. Box 48
Flourtown, PA 19031

Dear Sirs:

My wife Paula and I hereby for give any remaining campaign debt owed to us by
the Friends of Peter Amuso.

Sincerely,

A handwritten signature in black ink, appearing to read 'Charles Amuso', with a large, stylized initial 'C'.

Charles Amuso