(NOTE: This report must be clear and legible.	it may be typed or printed in blue or black ink.
Filer Identification 45-06 78927 Report Filed B	
Name of Filing Committee, Candidate or Lobbyist ENIEWAS OF MOON	AHN
Street Address: 142 E MAIN STR	CEFT
1/2 /2 ////	State: Zip Code:
CANSDALK	PA 19446 -2519
TYPE OF STATE SUBSECTION 1. SHEET PROPERTY.	X POSTORIO 3. AMERICANIA PER NO X
STOCKE SHAPE	5. SECTION 5. SECTION YES NO.
(place X to the right of ANNEXAL 7. YEAR	FRANCISCO PAPER X DISKETTE
report type) REPORT 20//	SA SEECK CHES
Name of Office Sought by Candidate:	Number Code Code Code
CLRAK OF COURT	4 17 2011 MONT SEE INSTRUCTIONS FOR CODES
Summary of Receipts	SHO DOM: SCHOOL COME.
and Expenditures from: 3 1/7 201/	To 5 2 2011
A. Amount Brought Forward From Last Report	\$ _6
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ //12.5,00 ES B
C. Total Funds Available (Sum of Lines A and B)	\$ 11125,00 \$ 9709,60 \$ 1416,00 \$ -
D. Total Expenditures (From Schedule III)	\$ 9709,60
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 1416,00 B
F. Value of In-Kind Contributions Received (From Schedule II)	
G. Unpaid Debts and Obligations (From Schedule IV)	s & PO = V
	VIT SECTION
PARC I this is a Committee report humanes and rest	paper or computer diskette, are to the best of my knowledge and belief true,
I swear (or affirm) that this report, including the attached schedules, or correct and complete.	paper of computer diameter, and to the best of the minimum of the best of the
Sworn to and subscribed before me this	2 Rould Db Ot
5th day of May 2011	Signature of Person Submitting Report
NOMBIAL SEAL	ROWALD HOLT
My commission ex montesta for Montesta Commission	(267) 847-0506
My Commission Supired Dec 18, 2011	Area Code Daytime Telephone Number
page if the graph and a control of the control of t	nation continues and agreement
I swear (or affirm) that to the best of my knowledge and belief this poly. 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	litical committee has not violated any provisions of the Act of June 3, 1937
Sworn to and subscribed before me this	. //47
5th day of May 2011	
Zu Cin	Signature of Candidate A 1/9/20 Huy
Signature NOTARIAL SEAL	Printed Name
My commission expires DAY Notific Bullion	Area Code Daytime Telephose Number
THE PROPERTY OF THE PROPERTY O	IRY COUNTY MUNICONERY CONTRY COURT HUUSE
Department of State Bureau 303 North Office Building Harrist	A Control of Control o
303 North Office building • Railist	ADE WELL for the later

SCHEDULE I

PAGE 2 OF ______

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate FNIENDS OF MOON ALL From 3/1	1/2011 to 5/2/2011
THE STREET SECTION OF THE PROPERTY AND THE PERFORMANCE OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PERFORMANCE OF TH	REUTOR
TOTAL for the Reporting Period (1)	\$ 25.00
2 CONTRIBUTIONS \$5000 TO \$250.00 FROM PARE A AND PARE B	
Contributions Received from Political Committees (Part A)	\$
All Other Contributions (Part B)	\$ 100,00
TOTAL for the Reporting Period (2)	\$ 100,00
3 CONTROL INSTRUCTORS FROM PART CAMP PART D	I
Contributions Received from Political Committees (Part C)	\$
All Other Contributions (Part D)	\$ \$1000,00
TOTAL for the Reporting Period (3)	\$ 11000,00
4. GHER HETETTS - HELDOS (NECTES) EARNED HERBOED (NETS) EN	AFROM PART (E)
TOTAL for the Reporting Period (4)	\$ 11125,00
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.)	\$ 11125

PAGE S OF

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

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

Name of Filing Committee or Candidate		4 / / 41	Re	porting i	eriod	11 -12/21
FRIBNOS OF MOE	N	AHO	ļ	From_\$/	17/201	1/ 105/2/2011
				DATE		AMOUNT
Full Name of Contributor			4	DAY	77	\$ 100,00
Phailing Address			of Serio	DAY!	SOEAR	
2506 CREEKSIDE	Di	<u> </u>				\$
Full Name of Contributor FARDACK HIM Mailing Address 2506 CNEEKS DE City LANSDALE	State	Zip Code (Plus 4)	340	C.A.T	WEAR.	\$
Full Name of Contributor	[1]	77970		DAY.	YEAR.	
						\$
Mailing Address			200 1.0	888 1 A S	XEAS	\$
City	State	Zip Code (Plus 4)				
		_			<u> </u>	\$
Full Name of Contributor		- · · · · · · · · · · · · · · · · · · ·	160	0.4	YEAR	\$
Mailing Address	<u></u>					•
	****					\$
City	State	Zip Code (Plus 4)	84. 3		CEAR.	\$
Full Name of Contributor			200 XXX	DECT.		
			00.000	***************************************		<u> </u>
Mailing Address					EAS	\$
City	State	Zip Code (Plus 4)	200			
		-				\$
Full Name of Contributor			MC.	DAY.	######################################	\$
Mailing Address				Dest	O'ENE	•
	State	Zip Code (Plus 4)				\$
City	State	Zip Code (Flus 4)		124.6	000 E45	s
Full Name of Contributor	<u> </u>	· · · · · · · · · · · · · · · · · · ·	222 00 2422		286 G. C. C.	
						\$
Mailing Address						\$
City	State	Zip Code (Plus 4)			STEAR S	
						\$
Full Name of Contributor			*** C			\$
Mailing Address		****	12.0			s
City	State	Zip Code (Pius 4)				
						\$
Full Name of Contributor			2000	W.S.A.W.		s
Mailing Address			No.		2 E 83	
						\$
City	State	Zip Code (Plus 4)	M 450	(HEAR	s
<u> </u>	<u> </u>			.l. <u></u>	, 	DACE TOTAL

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

\$ 100,00

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.

Attributions from political committees reported in Part C.)

TRIBUOS OF MOON AHM	Reporting (3/17/11	то <u>\$ / Д</u>
	DATE		AMOUNT
Hame of Contributor	3	11 3	1000,00
1345 WEST CHESTER PIACE State Zip Code (Plus 4)		\$	•
State Zip Code (Plus 4)	MC DAY	YEAR S	
	Decupation	3	
Hibong Lee (Dwner of Business)			
Bost Jewelry, 1345 West Chester Pike, Havertou	un, PA 1	9083	
Name of Contributor APA MINAME	2	YEAR \$	500,00
		\$	
State Zip Code Plus 4)	(2.00 to 10.00 to 10.	NEAR.	
State Zip Code (Plus 4) Pit 1959-		\$	
Pe-fred	Occupation		
ployer Mailing Address/Principal Place of Business			
N/A		(MARKET)	
SUK WOON CHO!	3	YEAR 3	1000,00
ailing Address 4// TOWNS/H/H LIWE RA RY State Zip Code (Plus 4)		1	3
State Zip Code (Plus 4)		9	5
nolover Name	Occupation	<u>}</u>	
Natural Green Cleaners (Owner) mployer Mailing Address/Principal Place of Business			
411 Township Line Rd., Elkins Park PA 19	1027		
JONG SOOK JANG	2	111	
ailing Address 409 S, 60Th STREET	MED 0.095	100	\$
State Zip Code Plus 4/		YEAG	 \$
PH12A PA 19148	Occupation		-
Owner of A-Z Family Hardware	3400p8((4))		
unployer Mailing Address/Principal Place of Business 489-411 S. 60th St., Philodelphia, PA	1914		
ull Name of Contributor	200	Z ZZ ZZ NA ZZ	\$
Asiling Address			\$
City State Zip Code (Plus 4)	Marc DAX	MEAR.	
State Zip Code (Plus 4)			\$
Employer Name	Occupation		
Employer Mailing Address/Principal Place of Business	<u> </u>		

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

\$3000000

PAGE 5 0F'17

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.)

None of Files Committee or Condition	75	POILEG		. 0./
Name of Filing Committee or Candidate	, I ^R	eporting	Period	111 -111
FRENDS OF MOON FIHN	/ I	From 🚊	<i>\$[17]</i>	11/ 105/2/11
	·		<u> </u>	
Full Name of Contributor		DATE		AMOUNT
A IVA	MO.	DAY	YEAR	\$ 500,00
Melling Address	ZMD.	DAY	YEAR	23 6- 27 - 3
SO2 LAUN FALL 20 City State Zip Code (Plus 4)	· · · · · · · · · · · · · · · · · · ·		1,5-76	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	
DANGEROUSE MIPHOLIST DA JOHN IN	,	<u> </u>	rson .	s
City State Zip Code (Plus 4) Employer Name	Occupati	<u> </u>	L	
Self Employed CPA Employer Mailing Address/Principal Place of Business				
Employer Mailing Address/Principal Place of Business	<u> </u>		-	
1425 Old York Rd, #220, Elkins Park	ÞΑ	190	7ـدد	
Full Name of Contributor	MO	DAY	YEAR	
FULL HOUNG - HUNKIM	4		177	\$ 1000,00
	MO.	DAY	YEAR	
6254 BILLINGS BATE City State Zip Code (Plus 4)				\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	
MECHANICSBURG State Zip Code (Plus 4)				\$
Employes Name	Occupati	on .	4	
Student's Life, Inc / President				
Employer Mailing Address/Principal Place of Business	(5.5.6	/		
Employer Meiling Address/Principal Place of Business 6254 Brilingsgate, Mechanics burg, PA	1705	0		
Full Name of Contributor.	MO.	DAY	YEAR	
YOUNG NAM-HIM	4		11	\$ 1000,00
Mailing Address	MO.	DAY	YEAR	
SSOI OLD VORK RP	1			\$
SSOI OLD YORK RP CITY PHILA PA 1914 F	MO.	DAY	YEAR	_
PIFICIF PIF 1919 F				\$
Employer Name	Occupation	on.		
Albert Einstein Medical Center				
Albert Einstein Medical Center Employer Mailing Address/Principal Place of Business 5501 Old York Rd., Philadelphia, PA	191	1/1		
5301 or for E Ray phologetyma, 17	171	41		
MUN SEOK LEE	MO.	DAY	YEAR	\$ 102000000
Mailing Address	4			\$1000,00
100 AURICU DIUD	/ MO.	DAY	YEAR	s
Mailing Address 100 QUIBLEY BLUD City State Zip Code (Plus 4)				<u> </u>
	MO.	DAY	YEAR	s
Employer Name	Occupation			
Rising Sun Contractors	Occupation	311		
Employer Mailing Address/Principal Place of Business	<u> </u>			
100 Quigley Blud., New Costle, DE	1972	Ö		
Full Name of Contributor	MO.	DAY	YEAR	
SUN Y/ CHON	- MU	UNI	TEAN	\$ 500,00
Mailing Address	MD.	DAY	YEAR	
4943 GETTYSBURG RD				\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	_
MECHANICSBURG PAVIOSIS]	\$
Employer Name	Occupation	on		
(ountry Inn & Juites	<u> </u>			
Employer Mailing Address/Principal Place of Business	D	1 4	7055	•
4943 Gettysburg Rd, Mechanicsburg	1 Th	<u> </u>	7035	
Enter Grand Total of Part D on Schedule I, Detailed Summary	Page	Section	n 3	PAGE TOTAL
ners. 50 /7-00)	. 935,	350110	·· · · ·	\$ 4000,00

DSE8-502 (7-99)

\$ 4000,00

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 FRIENDS OF MOON AIFN		From 3/17/20// To 5/2/20/				
The series of th		DATE		AMOUNT		
Full Name of Contributor	MO	DAY	YEAR	\$ 2000,00		
MICHABL HIM Mailing Address	Mo.	DAY	YEAR	\$		
2873 STENLING DRIVE State Zip Code (Plus 4)	MO.	DAY	YEAR	T		
HATFIELD PA 19440 -				\$		
Employer Name	Occupation	on				
Young fron, Inc Employer Mailing Address/Principal Place of Business 2873 Sterling Drive, Hotfreld, PA	194	40				
Full Name of Contributor	MO.	DAY	YEAR	\$ 500,00		
Jeone Sone	(MO.	DAY	VEAR			
2200 NORTH BROAD STREET				\$		
PH/CA State Zip Code (Plus 4) PA 19132 -	MO.	DAY	YEAR	\$		
Employer Name	Occupation	on	<u> </u>			
Dwner of Beer belt store	1					
Employer Mailing Address/Principal Place of Business 2200 North Broad St., Phyladelphia, P.	A 1	19132				
Full Name of Contributor	MO.	DAY	YEAR 1	\$ 500,00		
CHANG WOO Mailing Address	MO.	DAY	YEAR			
INOS CHIPPOPK PIKE		BAY .	\ <u>\</u>	\$		
BLUR BELL PA 19422	MO.	DAY	YEAR	\$		
Employer Name	Occupation	on				
Dwner of Gaya Restaurant Employer Mailing Address/Principal Place of Business	<u> </u>		<u> </u>			
1001 Skippack Prke, Blue Bell, PA		41				
Sail Name of Contributor > / ¿	MQ.	DAY	YEAR //	\$ 1000,00		
SONG H Mailing Address C+0 C-1	MO.	DAY	YEAR	\$		
Mailing Address 2047 CHRSTNUT STREET City State Zip Code (Plus 4)	MO.	DAY	YEAR			
PHILA FA-19103-				\$		
Employer Name Coloner Delt	Occupati	ion				
Employer Mailing Address/Principal Place of Business	101		<u> </u>			
	19/0		10.			
Full Name of Contributor	MO.	DAY	YEAR	\$		
Mailing Address	MO.	DAY	YEAR	\$		
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
	Occupat	ion	<u> </u>			
Employer Name	Compet					
Employer Mailing Address/Principal Place of Business						
				PAGE TOTAL		
Enter Grand Total of Part D on Schedule I, Detailed Summar	y Page,	, Sectio	วก 3.	& 4000.00		

DSEB-502 (7-99)

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period	/	-//-
FRIENDS OF MOON	1	HN		From _3/17/	20//	To 5/2/2011
10/2/20	/T			<u> </u>		
To Whom Paid				281 1168	Amo	unt
CEDANS ADV.			5	2/1/		228,00
			4 .	iption of Expenditure	e	
P.O. BOX 85	l Giria I	Zip Code (Plus 4		-NBBLS		
City City	State	19423-	"			
CEDANS	14	179 63	9200000		Amo	unt /
To Whom Paid CEDANS ANU.				iption of Expenditur	\$-	3461,00
Mailing Address			G estr			
Pio, BOX 85				SIGNS	<u>, </u>	
CEDANS	State	Zip Code (Plus	*			
To Whom Paid					a Amo	ount
Mailing Address				2 201	// \$	6000,60
Mailing Address			IZESCI	ription of Expenditur	LOK	vestes
Johnson Hwy	State	Zip Code (Plus	4)	t Q E	7/12	V -4 1.4.~
NERNISTOWN	PA	19404-				
TO WHOM Paid OUL EYPERSE	-		2000			20,00
Mailing Address			DESC	ription of Expenditů		
NA					·	
City	State	Zip Code Plus	4)			
		-			1000000 HAT-	ount
To Whom Paid				33.7 33.7 3.5	ŝ	Quare
Mailing Address			Desc	ription of Expenditu		
•						
City	State	Zip Code (Plus	4)			
		_	31000000			ount
To Whom Paid			2000		S	Orter
Mailing Address	·············		Desc	cription of Expenditu		
City	State	Zip Code (Plus	4)			
		_				
To Whom Paid					An S	nount
Mailing Address			Des	cription of Expendit		
menting Association				•		
City	State	Zip Code (Plus	4)			
To Whom Paid					S	nount
Mailing Address			Des	scription of Expendit		
City	State	Zip Code (Plus	. 4)			
					P/	GE TOTAL

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

DSEB-502 (7-99)

\$9709.00