| (NOTE: This report must be clear and   |   | NCE REPORI                                | (COVER PAGE)  |
|--|---|---|---|
| Filer Identification   | Report<br>Filed By:   |   |   |
| Number:<br>Name of Filing Committee, Candidate or Lobbyist<br>COMMITTIE TO ELEC. 7<br>Street Address:  |   | nt DURAN                                  | NTE   |
| STREET ADDRESS U. BROWN ST<br>City: NORRISTOWN   |   | State:                                    | Zip Code:<br>/940/ -  |
| TYPE OF<br>REPORT STH TUESDAN 1. 2ND TRUM<br>FRE FRIMARY 4. 2ND FRIM   | аяч X<br>су 5.  | 20 DAY 3.<br>POST FRIMARY 6.<br>20 DAY 6. | AMERCIMENT YES NO<br>REPORT? YES NO<br>TERMINATION YES NO   |
| (place X to<br>the right of<br>report type) ANNUAL 7. YEAR<br>2011<br>Name of Office Sought by Candidate:  |   |   | PAPER DISKETTE  |
| SHERIFF MONTGOMENY CO  | EXN7 J  | arc, day team<br>5 /17 20/1               | Number Code Code Code<br>OTH REP 46<br>(SEE INSTRUCTIONS FOR CODE   |
| Summary of Receipts and Expenditures from:   | то<br>// то   | MO DAY YEAR<br>5 2 20/1                   |   |
| A. Amount Brought Forward From Last Report   | \$  | -0-                                       |   |
| B. Total Monetary Contributions and Receipts (From Sch   | edule I) \$   | 13 905,00                                 |   |
| C. Total Funds Available (Sum of Lines A and B)  | \$  | 13 905.00                                 |   |
| D. Total Expenditures (From Schedule III)  | \$  | 891922                                    |   |
| E Ending Cash Balance (Subtract Line D from Line C)  | \$  | 4 975.77                                  |   |
| F. Value of In-Kind Contributions Received (From Scher   | dule II) \$   | 1200.00                                   |   |
| G. Unpaid Debts and Obligations (From Schedule IV)   | \$  | 6255.49                                   | 6   |
|  | AFFIDAVIT SE  |   |   |
| PART - If this is a Committee report transitier star<br>1 swear (or affirm) that this report, including the attached sched   |   |   |   |
| I swear (or affirm) that this report, including the attached sched<br>correct and complete.<br>Sworn to and subscribe<br>do of the two sets and activities set<br>do of the two sets activities and activities of the set<br>of the two sets activities of the sets activities of the<br>My commission expires 10 2.5 2.0<br>Mo. DAY YR.   | 3   | aunt A.C                                  | of Person Submitting Report<br>Printed Name<br><u>375-8740</u><br>Daytime Telephone Number                                      |
| PART B - If this is a support of its Candidate's Authors   |   |   |   |
| I swear (or affirm) that to the best of my knowledge and belie<br>(P.L. 1333, No. 320) as amended.<br>Sworn to and subscribe<br>day of ETTA JSUAD ACL MELCHER<br>day of ETTA JSUAD ACL MELCHER<br>NOTATING AND ACL MELCHER<br>NOTATING AND ACL A | $ \begin{array}{c} & \\ & \\ & \\ & \\ & \\ & \\ & \\ & \\ & \\ & $ | No  | any provisions of the Act of June 3, 1937<br>gnature of Candidate<br>Printed Name<br><u>29-7672</u><br>Daytime Telephone Number |

Department of State 

Bureau of Commissions, Elections and Legislation
303 North Office Building

Harrisburg, PA 17120-0029

(717) 787-5280

## CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate Reporting Per<br>COMMITIEE TO ELECT ROBERT DINANTE From L-   | iod<br>1-11 то <u>5-2-11</u>                      |
|--|---|
| COMMITTER IN ELECTIONS (VILNNIE)   |   |
| 1 UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONT   | RIBUTOR   |
| TOTAL for the Reporting Period (1)   | \$ 995.00   |
|  |   |
| 2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART & AND PART B)  |   |
| Contributions Received from Political Committees (Part A)  | \$ 250.00   |
| All Other Contributions (Part B)   | \$ 3680,00  |
| TOTAL for the Reporting Period (2)   | \$ <u>3680,00</u><br>\$ 3930.00                   |
|  |   |
| 3 CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)   |   |
| Contributions Received from Political Committees (Part C)  | \$ 1500.00  |
| All Other Contributions (Part D)   | \$ <u>1500.00</u><br>\$ <u>3 100.00</u>           |
| TOTAL for the Reporting Period (3)   | \$ 4 600.00                                       |
|  |   |
| 4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC   |   |
| TOTAL for the Reporting Period (4)   | \$ 4380.00  |
| TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING<br>THIS REPORTING PERIOD (Add and enter amount totals from<br>Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report<br>Cover Page, Item 8.) | \$ 13,905.00                                      |
|  | <u>پ</u> ېر د د د د د د د د د د د د د د د د د د د |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |
|  |   |

•

# CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

20

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

| Name of Filing Committee or Candidate         |          |                        | 1               | Reporting P |              |                  |
|---|----------|------------------------|-----------------|-------------|--------------|------------------|
| Name of Filing Committee or Candidate         | SCT      | RORENT MINA            | NTE             | From /      | <u>-[-][</u> | то <u>5-2-11</u> |
| CUMMITIME IN COM                              |          |                        |                 | DATE        |              | AMOUNT           |
| UII Name of Contributing Committee            | TATE     | Re                     | <b>MEC</b><br>4 | 04X<br>14   |              | \$ 250.00        |
| AA COUNTINE TAHALCH / MCON<br>Aailing Address | 1112 1   |                        | MO.             | QAY         | MEAN         | \$               |
| 30 SKYLINE DRIVÉ                              | State    | Zip Code (Plus 4)      | NSO.            | DAY         | YEAR         | <u> </u>         |
| AUDUBON                                       | PA       | 19403 -                |                 |             |              | \$               |
| full Name of Contributing Committee           |          |                        | <b>MC</b>       | DAY         | YEAR         | \$               |
| Mailing Address                               |          |                        |                 | DAY         | YEAR         | \$               |
| City  | State    | Zip Code (Plus 4)      | MO              | DAY         | YEAH         | \$               |
|   |          |                        |                 | DAY         | YEAR         | ·                |
| Full Name of Contributing Committee           |          |                        |                 |             |              | \$               |
| Mailing Address                               |          |                        | CMC.            | DAY         | YEAR         | \$               |
| City  | State    | Zip Code (Plus 4)<br>— | MO.             | DAY         | YEAR         | \$               |
| Full Name of Contributing Committee           |          |                        | CBR.            | CAY         | YEAR         | \$               |
| Mailing Address                               |          |                        |                 | DAY         | YEAR         | \$               |
|   | State    | Zip Code (Plus 4)      |                 | DAY         |              | ₩<br>            |
| City  | Jule     | -                      |                 |             |              | \$               |
| Full Name of Contributing Committee           |          |                        | CINE:           | S SAN       | NEAS         | \$               |
| Mailing Address                               | <u></u>  | <u> </u>               |                 | DAY         | YEAR         | \$               |
| City  | State    | Zip Code (Plus 4)      |                 |             |              | \$               |
|   |          | 1                      |                 |             |              |                  |
| Full Name of Contributing Committee           |          |                        |                 |             |              | \$               |
| Mailing Address                               |          |                        | PACT            |             | <b>NYEAR</b> | \$               |
| City  | State    | Zip Code (Plus 4)<br>- | NO.             | DAY         | YEAR         | \$               |
| Full Name of Contributing Committee           | !        | <u>l</u>               | - MD            | DAY         |              | \$               |
| Mailing Address                               |          |                        |                 |             |              | \$               |
| City  | State    | Zip Code (Plus 4)      |                 | DAY         | YEAR         | \$               |
|   | <u> </u> | -                      |                 |             |              |                  |
| Full Name of Contributing Committee           |          |                        |                 |             |              | \$               |
| Mailing Address                               |          |                        |                 |             |              | \$               |
| City  | State    | Zip Code (Plus 4)<br>— |                 | DAY         | MEAH.        | \$               |
|   |          |                        |                 |             |              | PAGE TOTAL       |
| Enter Grand Total of Part A on S              | chedule  | i, Detailed Summa      | ry Pag          | ge, Sectio  | on 2.        | \$ 250.00        |

| ALL OTHER | <b>CONTRIBUTIONS</b> |
|-----------|----------------------|

4

20

\$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  | 2  | Reporting Period      |                  |
|--|--|-----------------------|------------------|
| COMMITTEE TO ELECT ROBE  | RTHURAME   | From <u>/-/-/</u>     | то <u>5-2-11</u> |
|  |  | DATE                  | AMOUNT           |
| Full Name of Contributor   |  | MC DAY YEAR           | \$ 150.00        |
| <u>GRORE J. MOCCIO</u><br>Mailing Address                                      | <u> </u>   | ME DAY YEAR           | 150.00           |
| 813 POPLAR CT  |  |                       | \$               |
| AMBLER F   | $\frac{19002}{4} = \frac{19002}{1}$  | BIO DAY YEAR          | \$               |
|  |  | MO. DAY               |                  |
| Full Name of Contributor<br><u>MARGARET</u> <u>MCMULLEN</u><br>Mailing Address | <u></u>  | 3 14 11               | \$ 70.00         |
| 115 MAPLE ST   |  |                       | \$               |
| City St  | ate Zip Code (Plus 4)  | MO DAY YEAR           |                  |
| CONSHOHOCKEN TA  | 1 19428 -  |                       | \$               |
| Full Name of Contributor   |  | 3 24 11               | \$ 70.00         |
| SUSAN WEINHOLTZ<br>Mailing Address   |  | MO DAY YEAR           | \$               |
| 10 TANGLEWOOD COURT  | ate Zip Code (Plus 4)  | BAD DAY YEAR          | <b>▼</b>         |
| FAST NOPRITON TA T   | A 14401 -  |                       | \$               |
| Full Name of Contributor   |  | MO DAY MEAR           | \$ 71 (0)        |
| DOLORES M. FIDLER<br>Mailing Address   | · · · · · · · · · · · · · · · · · · ·  | 3 26 //               | \$ 70.00         |
| 183 DEACON DRIVE   |  |                       | \$               |
| City   | Zip Code (Plus 4)  | SHO. DAY YEAR         | \$               |
| NARRISTOUN /   | 4 19403 -  | MO. DAN VEAR          | Ð                |
| Full Name of Contributor<br><u>ARMAND</u> F. DAR<br>Mailing Address            |  | 3 26 11               | \$ 100.00        |
| Mailing Address /  | Pap  | SHO. DAY YEAR         | \$               |
| City   | KOAD<br>Zip Code (Plus 4)  | MO DAY YEAR           |                  |
| WEST CHESTER 1   | 4 19380 -1830  |                       | \$               |
| Full Name of Contributor   |  | 3 2 2 11              | \$ 70.00         |
| Full Name of Contributor<br>JASEPH P. ADORNETTO<br>Mailing Address             |  | 32211<br>MG. DAY YEAR | 10.00            |
| 30 BRIMFIELD ROAD  |  |                       | \$               |
| City _   | $\frac{1}{4} = \frac{1}{4} $ | BAC CAY VEAR          | \$               |
| EAGLEVILLE /   |  | MC. DAX MEAR          |                  |
| ETTA GUNDLACH MELCHER<br>Mailing Address                                       | <u></u>  | 3 24 11               | \$ 35.00         |
| 122 ERLEN ROAD   |  | MO CAY YEAR           | \$               |
| City St  | A ICII 7 2112 9  | BRO. CAY MEAR         | ¢                |
| PLYMOUTH MEETING   | 1 19462 - 2429   | MG. DAY YEAR          | \$               |
| CAROL TORNETTA   |  | 3 25 11               | \$ 100.00        |
| Mailing Address PRIVE  |  | BEG. DAY YEAR         | \$               |
| 15   | ate Zip Code (Plus 4)  | MO DAY YEAR           | · ·              |
| EAST NORRITON F  | A 19403 -  |                       | \$               |
|  |  |                       | PAGE TOTAL       |
| Enter Grand Total of Part B on Schedul   | e I, Detailed Summar   | y Page, Section 2.    | \$ 665.00        |

DSEB-502 (7-99)

#### PART C 5 CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

20

OVER \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value over \$250.00 in the reporting period.

| Name of Filing Committee or Candidate                       |          | 7)          |              |                   | Reporting    | Period |                         |
|---|----------|-------------|--------------|-------------------|--------------|--------|-------------------------|
| Committee Totlert   | REN      | 7 Done      | 4NTE         |                   | From         | 1-1-11 | <u>то <u>5-2-11</u></u> |
|   |          |             |              |                   | DATE         |        | AMOUNT                  |
| Full Name of Contributing Committee                         |          |             |              | MO                |              | YEAR   | \$ 1 00 00              |
| AMERICAN'S OF ITALIAN AUNTACE                               |          |             | <u></u>      |                   | DAY          | YEAR   | 1,300,00                |
| CIA DIRENT DIGENNIARD 26                                    | 50 Å     | WOUBON.     | KOAD         |                   |              |        | \$                      |
| Address<br><u>CIO ALBERT DIGENMPRO</u> 26<br>OTY<br>AUDUBON | State    | Zip Code    | (Plus 4)     |                   | GAY          | теля   | \$                      |
|   | PH       | 17903       |              |                   | DAY          |        |                         |
| Full Name of Contributing Committee                         |          |             |              | 2002/06-4 - 7 A P |              |        | \$                      |
| Mailing Address   |          |             | <u> </u>     | . MO              | DAY          | YEAR   | \$                      |
| City  | State    | Zip Code    | (Pius 4)     | MO                |              | YEAH   |                         |
|   |          |             | <u> </u>     |                   |              |        | \$                      |
| Full Name of Contributing Committee                         | 1        |             |              | BIG.              |              | YEAR   | \$                      |
|   |          |             |              |                   | DAY          |        | ₽                       |
| Mailing Address   |          |             |              |                   |              |        | \$                      |
| City  | State    | Zip Code    | (Plus 4)     | BAG.              |              |        | •                       |
|   |          |             | -            |                   |              |        | \$                      |
| Full Name of Contributing Committee                         |          |             |              |                   | DAY          | YEAR   | \$                      |
| Mailing Address   |          |             | <u> </u>     | NAC.              | DAN          |        |                         |
|   |          |             |              |                   |              |        | \$                      |
| City  | State    | Zip Code    | (Plus 4)<br> |                   | DAY          | NEAR   | \$                      |
| Full Name of Contributing Committee                         |          |             |              |                   | DAY          |        |                         |
| Put Name of Contributing Constitute                         |          |             |              |                   |              |        | \$                      |
| Mailing Address   |          |             |              | MO                | DAY          | Усая   | \$                      |
| City  | State    | Zip Code    | (Plus 4)     |                   | DAY          |        |                         |
|   |          |             | -            |                   |              |        | \$                      |
| Full Name of Contributing Committee                         |          |             |              | (e., )            | iii indayiii | NEAR   | \$                      |
|   |          |             | <u> </u>     |                   | CAY          |        | <b>*</b>                |
| Mailing Address   |          |             |              |                   |              |        | \$                      |
| City  | State    | Zip Code    | (Plus 4)     |                   |              | YEAR   | \$                      |
|   | 1        |             |              |                   |              |        |                         |
| Full Name of Contributing Committee                         |          |             |              |                   | DAY          | TEAH   | \$                      |
| Mailing Address   | -        |             |              |                   |              |        | \$                      |
|   | State    | Zip Code    | (Plus 4)     |                   |              |        | 1                       |
| City  | - and te |             | -            |                   |              |        | \$                      |
| Full Name of Contributing Committee                         |          |             |              |                   | DAY          |        | \$                      |
|   |          |             |              |                   | CAY          |        |                         |
| Mailing Address   |          |             |              |                   |              |        | \$                      |
| City  | State    | Zip Code    | (Plus 4)     |                   | DAY.         | YEAR   | \$                      |
|   | }        |             |              |                   |              | 1      | 1                       |
|   |          |             | _            | _                 | <b>—</b> –   | -      | PAGE TOTAL              |
| Enter Grand Total of Part C on Sche                         | edule    | l, Detailed | Summar       | ry Pag            | e, Sectio    | on 3.  | \$ 1,500.00             |

DSEB-502 (7-99)

|  | \$50.01 TO \$250.00                                       |                        | alue from            |
|--|---|------------------------|----------------------|
| \$50                                     | ze all other contributions<br>.01 to \$250.00 in the repo | rting period.          |                      |
|  | ions from political comm                                  |                        |                      |
| ame of Filing Committee or Candidate     | Der Din   | Reporting Period       | <u> 11 то 5-2-11</u> |
| COMMITTEE TO ELECT                       | AOBERT DURKN,   |                        | AMOUNT               |
| I Name of Contributor                    |   | MO. DAY YEAR           |                      |
| DONALD C. ZAJICK                         |   | 3 28 11<br>MD DAY YEAR |                      |
| 300 E. RIDGE PIKE                        |   |                        | \$                   |
| PLYMOUTH MEETING                         | State Zip Code (Plus 4)                                   | BAD DAY YEAR           | \$                   |
| I Name of Contributor                    |   | MO DAY YEAR            | \$ 50.00             |
| JOHN IN. TALONE                          |   | 3 25 1)<br>MG DAY YEAR |                      |
| 3953 KIDUE TIKE                          | State Zip Code (Plus 4)                                   | MO DAY YEAR            | \$                   |
| POLLEGEVILLE                             | State Zip Code (Plus 4)<br>PA 19426 -                     |                        | \$                   |
| I Name of Contributor                    |   | MO DAY YEAR            | \$ 70.00             |
| RCNALD H. ADAMS                          |   | MO DAY YEAR            |                      |
| 328 MANOR KOAD_                          | State Zip Code (Plus 4)                                   | MO DAY YEAR            |                      |
| HATBORD                                  | 1A 19040 -  |                        | \$                   |
| I Name of Contributor Dr. 10             |   | 3 25 11                | \$ 100.00            |
| illing Address                           |   | INC. DAN YEAR          |                      |
| 8 LOCUST KANE                            | State Zip Code (Plus 4)                                   | BAC DAY YEAR           |                      |
| PLYMOUTH MEETING                         | 1A 19462 -  |                        | \$                   |
| Name of Contributor                      |   | 3 30 //                | \$ 70.00             |
| M/CHILE SCHLOTTER                        | <u></u>   | MO. DAY YEAR           | s                    |
| 1696 BROOK LANE                          | State Zip Code (Plus 4)                                   | BRO DAY YEAR           |                      |
| JAMISON                                  | State Zip Code (Plus 4)<br>7/1 18929 -                    |                        | \$                   |
| 1 Name of Contributor                    | (BUTILLOS)  | MC DAY TEAM<br>4 / //  | \$ 175.00            |
| iling Address                            |   | 13 11 Miles            | \$ 140.00            |
| 56 GREEN VIEW D                          | RIVE<br>State Zip Code (Plus 4)<br>DA 1911 (4 - 2)(1)     | 4 13 11<br>MG DAY YEAR |                      |
| POTTSTOUN                                | PA 19464 -1501  | MG                     | \$                   |
| Name of Contributor<br>MICHALL L. ALTIER | /   | 4 5 11                 | \$ 70.00             |
| 2 FEATHERBED KAN                         | 1.15  | MIG DAY YEAR           | S                    |
| a printer of the                         | State Zip Code (Plus 4)                                   | DAG CAY NEA            | \$                   |
| I Name of Contributor                    | 11 17703 -  | MG DAY YEAL            |                      |
| FAMES MARYALICE                          | LEBER   | 4611                   | \$ 105.00            |
| 1032 HARTRONFT                           | AVE   | BIG. DAY YEA           | \$                   |
| FORT WASHINGTON                          | State Zip Code (Plus 4)                                   | MO DAY YEA             | \$                   |
| FORI WASHINGTON                          |   |                        | PAGE TOTAL           |
| nter Grand Total of Part B on So         | chedule I. Detailed Summa                                 | ry Page, Section 2.    | \$ 1030.00           |

6

20

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

•

.

•

|   | \$50.01 TO \$250.00                   |                       |               |
|---|---------------------------------------|-----------------------|---------------|
| Use this Part to itemize a<br>\$50.01 t | <u>a coen no la me renori</u>         |                       |               |
| (Exclude contributions                  | s from political commit               | tees reported in Far  |               |
| ame of Filing Committee or Candidate    | 1 ROBERT DINA                         | NTE From              | -11 To 5-2 11 |
| COMMITTER 10 LLEL                       | 1 10 Style + 01.                      | DATE                  | AMOUNT        |
| ANDREW A CAPONE                         |                                       | MG DAY YEAR           | \$ 70.00      |
| ANDREW A CAPONE<br>ailing Address       |                                       | BRO DAY YEAR          |               |
| 301 WWWS DATE                           | State Zip Code (Plus 4)               | MO CAY YEAR           |               |
| PLYMOUTH MEETINE                        | PA 19462 -                            | MO DAY YEAR           | \$            |
| LORETTA A. LEADER                       | ?                                     | 4311                  | \$ 100.00     |
| 542 W. GLENSIDE /.                      | THE                                   |                       | \$            |
| ity                                     | State Zip Code (Plus 4)               | MO DAY YEAR           | \$            |
| OLENSIDE<br>Il Name of Contributor      |                                       | MG DAY YEAR           | \$ 70 M       |
| KATHRYN S. WEGNER                       |                                       | MO DAY YEAR           | 10.00         |
| 66 WASHINGTON BE                        | State   Zip Code (Plus 4)             |                       |               |
| FAGLEVILLE                              | State Zip Code (Plus 4)<br>PA 19908 - |                       | \$            |
| IN Name of Contributor                  |                                       | H X //                | \$ 70.00      |
| alling Address<br>2525 SPRING-VIEW RO   | AD                                    | MO. DAY YEAR          | \$            |
| 2525 STAING-VIEW NO                     | State Zip Code (Plus 4)               | MO DAY YEAR           |               |
| NORRISTOWN                              | PA 19461 - 1810                       | MO. DAY YEAR          | \$            |
| ADAM T. BERRY                           |                                       | 4611                  | \$ 30.00      |
| Address PACER LANE                      |                                       | MO DAT YEAR           | <b>\$</b>     |
| ity .                                   | State Zip Code (Plus 4)               | NO DAY YEAR           | \$            |
|   | 11. 11.0/                             | MIC. DAY MEAR         |               |
| All Name of Contribution (Castello)     |                                       | H H //                | 100,00        |
| 150 ELM AVENUE                          | State Zip Code (Plus 4)               | MQ CAT YEAR           | \$            |
| TOCKLEDOE                               | State Zip Code (Plus 4)               |                       | \$            |
| Name of Contributor                     |                                       | MC DAY YEAR           | \$ 70.00      |
| lailing Address                         | <u> </u>                              | MG DAY YEAR           |               |
| 139 KNOLL DRIVE                         | State Zip Code (Plus 4)               | MAG CAY NEAD          | \$            |
| COLLEGEVILLE                            | PA 19428 -                            | MG. DAY SEAT          |               |
| KEVIN & MELNICK                         | ×                                     | 4 9 //<br>MG DAY YEAU | \$ 150.00     |
| 1417 ROTAL DAK DK                       | WE                                    |                       | <b>\$</b>     |
| BLUE BELL                               | State Zip Code (Plus 4)               | MO. DAY YEA           | \$            |
|   |                                       |                       | PAGE TOTAL    |
| Enter Grand Total of Part B on Sched    | ule I, Detailed Summar                | y Page, Section 2.    | \$ 680.00     |

/

 $\mathcal{A}\mathcal{O}$ 

DSEB-502 (7-99)

.

| \$50.01 TO \$250.00  |                        |           |
|--|------------------------|-----------|
| Use this Part to itemize all other contributions w                                 | rith an aggregate valu | le from   |
| \$50.01 to \$250.00 in the reporti<br>(Exclude contributions from political commit | ees reported in Part   | A.)       |
| i filles Compittos or Condidate  | Reporting Period       |           |
| COMMITTEE TO ELECT ROBERT DURANT   | E From <u></u>         | то 5-2-11 |
| Willing the for the start of the   |                        | AMOUNT    |
| Full Name of Contributor   | MO. DAY YEAR           | \$ 25.00  |
| MARYANN VITELLI<br>Mailing Address   | MO DAY YEAR            |           |
| 141 STABLE KOAD  |                        | \$        |
| City State Zip Code (Plus 4)   | MCI. DAY YEAR          | \$        |
| //// X/3/00/0  | MO. DAY YEAR           | \$ 70.00  |
| SALVATORE DRADO  | 4 9 11<br>MG DAY YEAR  | 70,00     |
| Mailing Address<br>1459 BALBOA BEND  |                        | \$        |
| City State Zip Code (Plus 4)   | MO DAY YEAR            | \$        |
| BLUE BELL VA 19922-  | MO                     |           |
| Full Name of Contributor<br>NANCY T. MEFARLAND                                     | 4 11 11                | \$ 75.00  |
| Mailing Address<br>7/2 S. PARK AVENUE  | MO DAY YEAR            | \$        |
| City State Zip Code (Plus 4)   | MO DAY YEAR            |           |
| AUDUBON PA 19407 -   |                        | \$        |
| Full Name of Contributor T. CIACCIO  | 4 16 11                | \$ 200.00 |
| Mailing Address  | MO. DAY YEAR           | \$        |
| 3124 EISENHOWER KOAD   | BAD DAY YEAR           |           |
| NORRISTOWN PA 19403-4046   |                        | \$        |
|  | MO. DAY YEAR           | \$ 70.00  |
| CHARLES J. TORNETTA  | TATION DAY YEAR        |           |
| 1202 SUNNY AYRE WAY  | 4 16 11                | \$        |
| City State Zip Code (Plus 4)   | BACI DAY YEAR          | \$        |
|  | MO. NOAT               | e o a M   |
| TERFSA D. MURPHY   | 4 /6 //<br>MG DAY YEAR | \$ 80.00  |
| Mailing Address<br>212 STALLION LANE   |                        | \$        |
| City State Zip Code (Plus 4)   | BRO DAY YEAR           | \$        |
| SCHWENKSVILLE PA 19473 -   | DAY                    |           |
| Full Name of Contributor C. MARTELLA   | 4 16 11                | \$ 70.00  |
| Mailing Address  | MC DAY YEAR            | \$        |
| 1648 WILLIAMS WAY<br>City State Zip Code (Plus 4)                                  | MC CAY MEAR            |           |
| NORRISTOWN PA 19903 -  |                        | \$        |
| Full Name of Contributor<br>CHARLES I CONNERS                                      | 4 16 11                | \$ 70.00  |
| Mailing Address  | MG. DAY YEAR           | \$<br>    |
| 180 GLENWOOD AVE<br>City State Zig Code (Plus 4)                                   | BRO DAY YEAR           |           |
| City Colline VILLE A IA IAB -  |                        | \$        |

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

ð

20

| 7 | $\sigma$ | U |
|---|----------|---|
|---|----------|---|

\$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  | Reporting Period        |                                       |
|--|-------------------------|---------------------------------------|
| Name of Filing Committee or Candidate  | MENTE From 1 -1.        | то <u>5-2-11</u>                      |
| continuitien 10 per 100-170  | DATE                    | AMOUNT                                |
| Full Name of Contributor DDA/A   | MO. DAY YEAR<br>4 13 11 | \$ 100.00                             |
| Full Name of Contributor DRAGO<br>Mailing Address                                | MO DAY YEAR             | \$                                    |
| 237 BRANDON KOAD   | 4) BACO DAY WEAR        | ₽                                     |
| City<br>NORRISTOUN PA 19403  |                         | \$                                    |
|  | MO DAY YEAR             | \$ 70.00                              |
| Full Name of Contributor<br>BRE 11 SCIOLI<br>Mailing Address                     | 4 12 11<br>MG DAY YEAS  | 10,00                                 |
| INCI W. MAIN ST  |                         | \$                                    |
| City State Lip out a les   | 4) MO DAY YEAR          | \$                                    |
| MIKKDTOWNO   | MC. DAY WEAR            |                                       |
| Full Name of Contributor A. JAIMES SR<br>WILLIAM A. JAIMES SR<br>Mailing Address | 4 13 11                 | \$ 100.00                             |
| Mailing Address ROAD State Zip Code (Plus  | MD. DAY YEAS            | \$                                    |
| City   | 4 DAY YEAR              | \$                                    |
| HARLEYSVILLE PA 19438 -  | NEO DEC YEAR            |                                       |
| Full Name of Contributor PIZONKH   | 4 15 11                 | \$ 70.00                              |
| Mailing Address<br>144 E. DEKALB PIKE  | MO. DAY YEAR            | \$                                    |
|  | 4) BHO DAY YEAR         | •                                     |
| KING OF PRUSSIA PA 19406 -   |                         | \$                                    |
| Full Name of Contributor P. GALLIANO   | 4 /9 //                 | \$ 100.00                             |
| Mailing Address  | MO. DAY YEAR            | \$                                    |
| 128 AVONDALE ROAD  | 4) BACI DAY YEAR        |                                       |
| City FAULE State Zip Code (Plus<br>FAULE 19403 -2                                | 903                     | \$                                    |
|  | MO. DAY YEAR            | \$ 100.00                             |
| Full Name of Contributor PIAZZA  | BRO. DAX YEAR           | \$                                    |
| 401 S. SCHUYLKILL AVE  |                         | ₽<br>                                 |
| City NORRISTOWN State Zip Code (Pius<br>NORRISTOWN 14 19403 -                    |                         | \$                                    |
|  | BIG DAY YEAR            | \$ 105.00                             |
| DOMINIC FENTOR   | MIC                     |                                       |
| 166 F KUTLER HUE   |                         | \$                                    |
| City AMBLER TA 19002 -   | 4) DAY MEAS             | \$                                    |
| Full Name of Contributor   | MO. CAYS STEAR          | \$                                    |
|  | MIG. DAT YEAR           | · · · · · · · · · · · · · · · · · · · |
| Mailing Address  |                         | \$                                    |
| City State Zip Code (Plus  | 4) BIG DAY YEAR         | \$                                    |
|  |                         | PAGE TOTAL                            |
| Enter Grand Total of Part B on Schedule I, Detailed Sun                          | mary Page, Section 2.   | \$ 645.00                             |
| Cilci Gidine Loren of Land a dir admission of a service service                  | • •                     |                                       |

DSEB-502 (7-99)

| ALL OTHER CONTRIBUTIONS 10 20  |                          |        |  |  |
|--|--------------------------|--------|--|--|
| OVER \$250.00  |                          |        |  |  |
| Use this Part to itemize all other contributions v<br>over \$250.00 in the reporting | perioa.                  |        |  |  |
| (Exclude contributions from political committee                                      | ees reported in Part C.) |        |  |  |
| Name of Filing Committee or Candidate  | Reporting Period         | 5.2.11 |  |  |
| COMMITTEE TO ELECT ROBERT DURGN  |                          |        |  |  |
|  |                          | MOUNT  |  |  |
| Full Name of Contributor<br>M.B. INVESTMENTS - J.P. MASCARD                          |                          | 00.00  |  |  |
| Hailing Address<br>2650 AUDUBON ROAD   | MO DAY YEAR \$           |        |  |  |
| City State Zip Code (Flus 4/   | BRG DAY YEAR             |        |  |  |
| HUDUBON 1A 19403 - 2406  | Occupation \$            |        |  |  |
| Employer Name  | EXEUNTINE                |        |  |  |
| Employer Mailing Address/Principal Place of Business                                 | 19403                    |        |  |  |
| 3650 AUDUBON KOAD HUDUBON PA   | DAY NEAT                 | 2.00   |  |  |
| ANTHONY J. MARJELLO  | 4 3 // 30                | 0.00   |  |  |
| Mailing Address /<br>335 MCCLURE DRIVE   | \$                       |        |  |  |
| City State Zip Code (Plus 4)   | S S                      | ļ      |  |  |
| BLVI BELL 1/67 11702   | Occupation               |        |  |  |
| COLLEX COLLISION   | OWNER                    |        |  |  |
| Employer Mailing Address/Principal Place of Business<br>1502 BUTHLEHEIM PIKE FLOUR   | TOWN PA 190              | 31     |  |  |
| Full Name of Contributor   | 4 2/ 1/ \$ 30            | 0.00   |  |  |
| PITILIP CALAMIA<br>Mailing Address D (-  | MC DAY YEAR S            |        |  |  |
| 516 E. ROBERTS ST.   | MO DAN YEAR              |        |  |  |
| City NORRISTOWN Po 19401 -   | \$                       |        |  |  |
| Employer Name  | Occupation               |        |  |  |
| Employer Mailing Address/Principal Place of Business                                 |                          |        |  |  |
|  |                          |        |  |  |
| Full Name of Contributor   | MIC. DAY MEAR            |        |  |  |
| Mailing Address  | Second Science S         |        |  |  |
| City State Zip Code (Plus 4)   | SHO. CAY YEAH            |        |  |  |
| City State Lip out (112 %  | S                        |        |  |  |
| Employer Name  | Occupation               |        |  |  |
| Employer Mailing Address/Principal Place of Business                                 | _ <u></u>                |        |  |  |
|  | MONIMDAY                 |        |  |  |
| Full Name of Contributor   | \$                       |        |  |  |
| Mailing Address  | S                        |        |  |  |
| City State Zip Code (Plus 4)   | MEC DAY S                |        |  |  |
| Employer Name  | Occupation               |        |  |  |
|  | <u> </u>                 |        |  |  |
| Employer Mailing Address/Principal Place of Business                                 |                          |        |  |  |

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

11 20

## **OTHER RECEIPTS**

### 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.

| ame of Filing Committee or Candidate  |          | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | Repor    | ting Period     |                      |
|---------------------------------------|----------|---|----------|-----------------|----------------------|
| me of Filing Committee or Candidate   | or Ko    | BERT Long                               | NIE From | n <u>/-/-//</u> |                      |
| Uninin the jurize                     | //0      |   |          |                 |                      |
| ROBERT J. DUR                         | ANTE     |   |          |                 |                      |
| ailing Address                        | 67       |   |          |                 |                      |
| Address<br>220 W. BROWN<br>NORRNSTOWN | State    | Zip Code (Plus 4)<br>19401 -            | MO D     |                 | Amount<br>\$ 4380.00 |
|                                       |          | MITTEE                                  |          |                 | ,                    |
| Il Name                               | CUIII.   | 11112                                   |          |                 |                      |
| ailing Address                        |          |   | <u> </u> |                 |                      |
|                                       | State    | Zip Code (Plus 4)                       | MC       | AY              | Amount               |
| ity                                   |          |   |          |                 | \$                   |
| eceipt Description                    |          |   |          |                 |                      |
| uil Name                              |          |   |          |                 |                      |
| failing Address                       |          |   |          |                 |                      |
| ity                                   | State    | Zip Code (Plus 4)                       | MO. D    | AY YEAR         | Amount               |
| •••                                   |          |   |          |                 | \$                   |
| eccipt Description                    |          |   |          |                 |                      |
| uli Name                              |          |   |          |                 |                      |
| failing Address                       | ······   | <u> </u>                                | <u></u>  | <u> </u>        |                      |
|                                       | State    | Zip Code (Plus 4)                       | NACO     | AX              | Amount               |
| lity                                  | State    |   |          |                 | \$                   |
| leceipt Description                   |          |   |          |                 |                      |
| ull Name                              |          |   |          |                 |                      |
| Mailing Address                       | <u></u>  |   |          |                 |                      |
| -                                     |          | Zip Code (Plus 4)                       |          | AY YEAR         | Amount               |
| City                                  | State    | 21p Code (Filds 4)                      |          |                 | \$                   |
| leceipt Description                   |          |   | -        |                 |                      |
| full Name                             | <u> </u> | <u></u>                                 |          |                 |                      |
| Aailing Address                       |          |   |          |                 |                      |
|                                       | State    | Zip Code (Plus 4)                       |          | JAN NEKR        | Amount               |
| Sity                                  | State    | Zip Code vrids 4                        |          |                 | \$                   |
|                                       | I        |   |          |                 |                      |

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

DSEB-502 (7-99)

-

SCHEDULE II

PAGE \_\_\_\_\_UF

## 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** 

Reporting Period Name of Filing Committee or Candidate TO ELECT ROBERT. 1 From 1-1-11 To 5-2-11 nmitte UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR. TOTAL for the Reporting Period (1) \$ - () 2 IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F) 100.00 (2)\$ TOTAL for the Reporting Period IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G (3) TOTAL for the Reporting Period \$ 1*00.0* 0 TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS \$ 1,200.00 REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)

# IN-KIND CONTRIBUTIONS RECEIVED

13 20

VALUE OF \$50.01 TO \$250.00

| lame of Filing Committee or Candidate   |             |                              | Rep        | orting Pe                                    | riod       | 1 ( 2 11         |
|---|-------------|------------------------------|------------|--|------------|------------------|
| ame of Filing Committee or Candidate  | T RA        | ZENT DIMA                    | NTE F      |  | -1-11      | To <u>5-2-11</u> |
| contrait 110 10 200   | //04        | act of the second            |            |  |            | AMOUNT           |
| ull Name of Contributor   | DALKAN      |                              | MG.<br>4   | DAY  | YEAS       | \$ 100.00        |
| ull Name of Contributor<br><u>CONSHOHOCKEN</u><br>Failing Address<br>79 JONES 57. | ALIN        | <u></u>                      |            | DAY  | YEAR       | <u> </u>         |
| 79 JONES ST.  |             |                              |            | DAY  |            | ·                |
| Post HOHOCKEN   | State       | Zip Code (Plus 4)<br>19428 - | BATCI,     |  |            | \$               |
| BAKED GOODS BEE   | FAND        | Bern                         |            | ور و و و و و و و و و و و و و و و و و و       |            |                  |
| Full Name of Contributor  |             |                              |            | DAY  |            | \$               |
| Mailing Address   |             |                              | MC.        | DAY  | YEAR       | \$               |
| City  | State       | Zip Code (Plus 4)            | Pro.       | DAY  | YEAB       | \$               |
| Description of Contribution:  |             |                              |            | <b></b>                                      |            |                  |
| Full Name of Contributor  |             |                              |            | UPAYO I                                      | 27EA3      | \$               |
| Mailing Address   |             |                              | MO         | COAY   |            | \$               |
| City  | State       | Zip Code (Plus 4)            | Marca A    | DAY  | YEAR       | \$               |
| Description of Contribution   |             |                              |            | l  | <b>I</b>   | <u>,</u>         |
| Full Name of Contributor  |             |                              |            | o da y                                       |            | \$               |
|   |             |                              | REC.       | CAY  |            | Ф<br>            |
| Mailing Address   |             |                              |            |  |            | \$               |
| City  | State       | Zip Code (Plus 4)            | AND A      | ×  | <b>XA</b>  | \$               |
| Description of Contribution:  |             |                              |            |  |            |                  |
| Full Name of Contributor  |             |                              |            |  | VEAR.      | \$               |
| Mailing Address   |             | <u></u>                      | 540        | DAY  |            | \$               |
| City  | State       | Zip Code (Plus 4)            |            | - pay  | INTEAL III | \$               |
| Description of Contribution:  | 11          | <u></u>                      |            |  | L          |                  |
| Full Name of Contributor  |             |                              | and C.     |  |            | \$               |
| Mailing Address   | <u> </u>    |                              | <b>M</b> O |  | TEAR       | \$               |
| City  | State       | Zip Code (Plus 4)            |            | <b>NOAY</b>                                  | YEAR       | \$               |
| Description of Contribution:  |             |                              |            | <u>                                     </u> | <u>}</u>   | L                |
|   |             |                              |            |  |            | PAGE TOTAL       |
| Enter Grand Total of Part F on  | Schedule li | , in-Kind Contrib            | utions De  | etailed                                      |            | \$ 100.00        |
| Summary Page, Section 2.  |             |                              |            |  |            |                  |

ć

÷

## IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate                                    |          | ~                            | R                | eporting P          | eriod                |                 |
|--|----------|------------------------------|------------------|---------------------|----------------------|-----------------|
| Name of Filing Committee or Candidate                                    | RA.      | ZERT DUARD                   | 17E              |                     | - <u> -</u> ]        | <u>/</u>        |
| CUMMITICE IN CLERCE  | r j v.L  |                              |                  | DATE                |                      | AMOUNT          |
| Full Name of Contributor   |          |                              |                  | DAY<br>2/           | MEAR<br>//           | \$ 500.00       |
| JOSEPH BUCCI<br>Mailing Address  |          |                              |                  | DAY                 | YEAR                 | \$              |
| 117 W RIDGE PIKE   |          |                              |                  | DAY                 |                      | ••              |
| City   | State    | Žip Code (Plus 4)<br>19428 - |                  |                     |                      | \$              |
| Employer of Contributor  | <u> </u> | // /0.0                      | Occupati         |                     |                      |                 |
| BUCCI JEWELENS<br>Employer Mailing Address/Principal Place of Business   | <u> </u> |                              |                  | NEN<br>ion of Contr | ibution              | Dean Dala       |
| Employer Mailing Address/Principal Place of Business                     | SHOH     | OCKEN /A 19428               | GIFT             | CENTIF              | 1 CATL               | I FOR POOR PARE |
| Full Name of Contributor   |          |                              | м <u>с</u><br>4  | 16                  | MEAR.                | \$ 600,00       |
| TOHN CALAMONE<br>Mailing Address /                                       |          |                              | 7                | DAY                 | YEAR                 |                 |
| 1738 NORTH HILLS MINE  |          |                              |                  |                     |                      | \$              |
| City   | State    | Zip Code (Plus 4)            |                  |                     |                      | \$              |
| MARNIS 70WN<br>Employer of Contributor                                   |          | 1/701                        | Occupat          |                     |                      |                 |
| DUCTORS OF MUSIC<br>Employer Mailing Address/Principal Place of Business | <u></u>  |                              | SEL1<br>Descript | F EMPL              | ribution             |                 |
| Employer Mailing Address/Principal Place of Business                     | 15700    | UN PA 19401                  | DJ.              | SERVICE             | s FOR                | BEEF 9 Birn     |
| Full Name of Contributor   |          |                              | Mini C.          | DAY                 | YEAR                 | \$              |
| Mailing Address  |          |                              |                  | D. D. A.Y           | NEAR                 | ¢               |
| ······································                                   |          |                              |                  |                     |                      | \$              |
| City   | State    | Zip Code (Plus 4)            |                  | DAY                 |                      | \$              |
| Employer of Contributor  | <u> </u> |                              | Occupat          | ion                 | <u>.</u>             |                 |
| This is a Resident   |          |                              | Descript         | tion of Cont        | ribution             |                 |
| Employer Mailing Address/Principal Place of Business                     |          |                              |                  |                     |                      |                 |
| Full Name of Contributor   |          |                              |                  | DAY                 | MITEAR (             | \$              |
| Mailing Address  | <u> </u> |                              | Mice             |                     | NIEAR.               | •               |
|  |          |                              |                  |                     |                      | \$              |
| City   | State    | Zip Code (Plus 4)<br>—       |                  | (DAY)               |                      | \$              |
| Employer of Contributor  | "I       | <u>i</u>                     | Occupa           | tion                |                      |                 |
|  |          |                              | Descrip          | tion of Con         | tribution            | <u></u>         |
| Employer Mailing Address/Principal Place of Business                     |          |                              |                  |                     |                      |                 |
| Full Name of Contributor   |          |                              |                  | DAY                 | 8007 <b>-0</b> 7.999 | \$              |
| Mailing Address  |          |                              |                  | PAY                 | NTEAR !!!            | •               |
|  |          |                              |                  | 0.00                |                      | \$              |
| City   | State    | Zip Code (Plus 4)<br>—       |                  |                     |                      | \$              |
| Employer of Contributor  |          | <u>k</u>                     | Occupt           | rtion               |                      |                 |
| Employer Mailing Address/Principal Place of Business                     |          |                              | Descri           | ption of Cor        | tribution            |                 |
| Employer maining Addressiftmental Flace of Casheso                       |          |                              |                  |                     |                      |                 |
|  | _        |                              |                  |                     |                      | PAGE TOTAL      |

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

\$ 1100.00

14

20

4

### SCHEDULE III STATEMENT OF EXPENDITURES

|  |                                       | Reporting Period   |                            |
|--|---------------------------------------|--|----------------------------|
| Name of Filing Committee or Candidate              | $\mathcal{D}$ $\mathcal{D}$           | heporting renou  | <u>11 то 5-2-11</u>        |
| PAMMITTER TA FLECT                                 | CRERT JUNAN                           | TE From  | 10 00000                   |
|  |                                       |  |                            |
| To When Drid                                       |                                       | RO. DAY MEAN   | Amount                     |
| U.S. POST OFFICE                                   |                                       | 3 24 11  | \$ 35.20                   |
| Mailing Address                                    |                                       | Description of Expenditure                               |                            |
| E. AIRY ST   |                                       | POSTAFE  |                            |
| City   | State Zip Code (Plus 4)               |  |                            |
| NORRISTOUN   | State Zip Code (Plus 4)               |  |                            |
|  |                                       | AND DAY MEAN   | Amount                     |
| To Whom Paid PRINTING                              |                                       | 3 24 11  | \$ 49.99                   |
| Mailing Address                                    |                                       | Description of Expenditure                               |                            |
| 95 HAYDEN HVE                                      |                                       | WINDOW SIGN  | <u> </u>                   |
| City   | State Zip Code (Plus 4)               |  |                            |
| LEXINETON  | MADaya1 -                             |  |                            |
|  |                                       | BED. DAY YEAR  | Amount                     |
| To Whom Paid<br>MARSELLA STUDIO<br>Mailing Address |                                       | 33/1/  | \$ 84.80                   |
| Mailing Address                                    |                                       | Description of Expenditure                               |                            |
| JOHNSON HIGHWAY                                    |                                       | PICTURES   | ······                     |
| City F . Il  | State Zip Code (Plus 4)               |  |                            |
| EAST NORMITON                                      | 19901 -                               |  |                            |
| To Whom Paid                                       |                                       | DAYS CAR   | Amount                     |
| SNG SIGNS  |                                       | <u>4</u> <u>4</u> <u>1</u><br>Description of Expenditure | \$ 1865,00                 |
|  |                                       | SIGNS  |                            |
| 1510 4TH AVE                                       | State Zip Code (Plus 4)               |  | ·                          |
|  | State Zip Code (Plus 4)<br>AL 35020 - |  |                            |
| BESSEMER   | AL 33020                              |  | Amount                     |
| To Whom Paid                                       |                                       | MO. DAY YEAR   | \$ 26.40                   |
| U.S. Post OFFICE                                   | ·····                                 | Understand Description of Expenditure                    | 3 20.70                    |
| Mailing Address                                    |                                       | POSTAGE  |                            |
| City E. AIRY ST.                                   | State Zip Code (Plus 4                | 10/1102  |                            |
| NORRISTOWN   | PA 19401 -                            |  |                            |
|  |                                       | MAG DAY MEAR   | & Amount                   |
| To Whom Paid<br>D T IIIIaa (ALC PLL)               |                                       |  | \$ 133 25                  |
| B. J WHOLISALE CLUB<br>Mailing Address             | 7                                     | Description of Expenditure                               |                            |
| Mailing Address<br>300 ALLAN WOOD                  | CAD                                   | SUPPLIES 1   | SPEFY BLER                 |
| City   | State   Zip Code (Plus 4              | 1  |                            |
| CONSHOHOCKEN                                       | PA 19428 -                            |  |                            |
|  |                                       | MOL CAY TEAR   | Amount                     |
| To Whom Paid PARTY CITY                            |                                       | 4911   | Amount<br>\$ <b>3</b> 6.35 |
| Mailing Address                                    |                                       | Description of Expenditure                               |                            |
| Mailing Address 2410 CHEMICAL KOAL                 |                                       | SUPPLIES P   | BEEF 9 BEIR                |
| City Print Manual                                  | State Zip Code (Plus 4                | "  |                            |
| PLYMONTH MEETING                                   | 1A 19462 -                            |  |                            |
|  | Martain                               | MAC CLAY MEAR  | Amount                     |
| To Whom Paid IN NOVATINE PRINT + /1                | EDHA INC                              | 4 11 11  | \$ 233.85                  |
| Mailing Address                                    |                                       | Description of Expenditure                               |                            |
| 500 SCHELL HANT                                    | State Zip Code (Plus                  | PRINTING   |                            |
| City 3   | State Zip Code Plus 4                 | "  |                            |
| PHOENIXVILLE                                       | VP /// 00 -                           |  |                            |
|  |                                       |  | PAGE TOTAL                 |

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

page total \$ 2464.97

20

15



### SCHEDULE III STATEMENT OF EXPENDITURES

| ame of Filing Committee or Candidate                           | $\mathcal{D}$ $\mathcal{D}$        | Reporting Period           | то 5-2-11  |
|--|------------------------------------|----------------------------|--|
| COMMITTEE TO ELECT   | SORERT DUNG                        | VTL From //                |  |
|  |                                    |                            |  |
| O WHOM Paid<br>B.J. NHOLESALE CLL                              | 1/2                                | HO DAY YEAH AT             | 10000t   |
| Lalling Address  |                                    | Description of Expenditure |  |
| 300 ALLAN WOOD T   | 0.AD                               | SUPPLIES BLEF              | 9 BEER   |
|  | 10,000                             | s 4)                       |  |
| CONSHOHOCKEN   | PA 19428-                          |                            |  |
| TIMES HERALD FUBL  | ISHIAL TAIC                        | Ar Ar YEAH Ar              | 1624.50  |
| failing Address  |                                    | Description of Expenditure |  |
| 410 MARKLEY S.   | TREET                              | ADVERTISEMEN               | 175  |
| ity j/ j   | State Zip Code (Plu<br>PA 1940 ( - | s 4)                       |  |
| NORRISTONI   | //:* ///0/ -                       |                            |  |
| o Whom Paid<br>VENEZIA MEATS                                   |                                    | HE DAY YEAR AT             | 330,00   |
|  | <u> </u>                           | Description of Expenditure |  |
| GERMANTOWN PIK.  | É                                  | SUPPLIES BEEF              | 9 BEEN   |
| City 1   | State Zip Code (Plu<br>B 19462 -   | s 4)                       |  |
| PLYMOUTH MEETING   | 10 V196A -                         |                            |  |
| SOSEPH M GALLO FOUND   | a-in at                            | 4 16 11 S                  | 1000.00  |
| tailing Address  | <u>4710 /</u>                      | Description of Expenditure |  |
| E. MAIN (TREET   |                                    | HALL RENTAL                | BEEF 9 BUL                                       |
|  | State Zip Code (Pin                |                            |  |
| Nonnes Town  | PA 19401 -                         |                            |  |
| to Whom Paid   |                                    | MC BAY YEAR A              | 1615.08  |
| Hailing Address  |                                    | Description of Expenditure | // 0/ 0/ 0                                       |
| 333 N. BROAD ST.   |                                    | ADVENTISE MEN.             | 75   |
| City   | State Zip Code (P)                 | \$ 4)                      |  |
| POTLESTOWN   | PA 18901 -                         |                            |  |
| TIMS LIBENTY GAS   | COMP CONTIAN                       | 4 22 //                    | mount<br>3 <i>8.10</i>                           |
|  |                                    | Description of Expenditure |  |
| 190 E. Johnson H   | HIGHWAY                            | GASOLINE - SIG             | N Warkens  |
| City /   | State Zip Code (PI                 | is 4)                      |  |
| NORRAS TOWN  | PA 19401 -                         |                            | والمتحافظ والمتحد والمتحدث والمستعد المراجع والم |
| To Whom Paid   |                                    |                            | mount<br>\$ 40.05                                |
| WAWA<br>Mailing Address F17                                    |                                    | Description of Expenditure | • •  |
| 701 W. GERMANTOWN  | PIKE                               | GASOLINE - SIGN            | Workens  |
| City   | State Zip Code (P)                 |                            |  |
| EAST NORDITON  | 174 1990/-                         |                            |  |
| To Whom Paid   |                                    |                            | mount<br>\$ 10.13                                |
| WAWA<br>Mailing Address  |                                    | Description of Expenditure | 1 · · ·  |
| 701 W. GERMANTOWN  | PIPE                               | DRINKS - SIG               | N Workens  |
| Mailing Address<br>101 W. CENMONTOWN<br>City<br>Frest Norriton | State Zip Code (P)                 |                            |  |
| and the second   | PA 19401-                          | 1                          |  |
| TAST NOPRITON  | ////                               |                            | AGE TOTAL  |

•

, ·

STATEMENT OF EXPENDITURES

17 20

| Name of Filing Committee or Candidate                    |            | フ  |                | ting Period         | 11 _ 6.7.11                            |
|--|------------|--|----------------|---------------------|--|
| COMMITTLE TO FLE   | CI Kazen   | WRANT.   | € From         | π <u>/ -/ -/</u>    | <u>//то <u>5-2-//</u></u>              |
|  |            |  |                |                     |  |
| to Whom Paid<br>STATE STORE                              |            |  |                | AY YEAR             | Amount                                 |
|  |            | <u></u>  | Description of | Expenditure         | \$ 26.49                               |
| S WEDE SQUARE SHO  | SPPING CE. | NTER   |                |                     | NITTEE MELTING                         |
|  | State      | Zip Code (Plus 4)<br>1940/ -                   |                |                     |  |
| EAST NONNITON  | PA         | 19401 -  |                |                     |  |
| o Whom Paid  |            |  | ··· · ·        | AY YEAR             | Amount<br>\$ 9.47                      |
| WALMANT<br>Aailing Address                               |            |  | <u> </u>       | Expenditure         | \$ 9.9                                 |
| GENMANTOWN PIKE  |            |  |                | •                   |  |
|  | State      | Zip Code (Plus 4)                              |                |                     |  |
| EAST NONNITON PA   | 1 PA       | 19401 -  |                |                     |  |
| o Whom Paid  |            |  | MG. C.         |                     | Amount<br>\$ 370.98                    |
| ROBERT JUNANTE   |            |  | Description of | P //<br>Expenditure | <b>→</b> 5/0.10                        |
| ailing Address<br>220 W. BROWN ST                        | 7          |  |                |                     | SULLIVE FOOD                           |
| ity //   | State      | Zip Code (Plus 4)                              |                |                     | · · · · ·                              |
| NORDISTOUN   |            | 19401 -  | ENPEN          | 16J 5/6,            | N WORKERS                              |
| o Whom Paid<br><u>TIMES HENALD PU</u><br>tailing Address | DUICILIA   | 1 INC  | MC. C.         | AY NEAR             | Amount<br>\$ 1217.87                   |
| Tailing Address  | BUISHINC   | - INC  | Description of | Expenditure         |  |
| 410 MARKLEY S  | TORET      |  | ADVE           | NTISEM              | NEN7S                                  |
|  | State      | Zip Code (Plus 4)<br>19401 -                   | 1 11 11 11     |                     | ······································ |
| NORRISTOWN PA  | PA         | 19461 -  |                |                     |  |
| o Whom Paid  |            |  |                | AY YEAR             | Amount<br>\$ 96.84                     |
| AFFORDABLE BUT   |            | ···· <u>-</u> ································ | Description of | <u> </u>            |  |
| 3269 19TH ST N   | W SUIT     | 16   | CHIMPA         | 16N BC              | TTONS                                  |
|  | State      | Zip Code (Plus 4)                              |                |                     |  |
| ROCHESTER  | XIIN       | 5570/  |                |                     |  |
| o Whom Paid  |            |  |                | ANCO OVERS          | Amount<br>S                            |
| lailing Address  |            | <u> </u>                                       | Description of | Expenditure         | <u> </u>                               |
|  |            |  |                |                     |  |
| ity  | State      | Zip Code (Plus 4)                              |                |                     |  |
|  | 1          | -  |                |                     |  |
| o Whom Paid  |            |  | MC.            | AY                  |  |
| Aailing Address  |            | <u> </u>                                       | Description of | Expenditure         | \$                                     |
|  |            |  |                |                     |  |
| lity   | State      | Zip Code (Plus 4)                              |                |                     |  |
|  |            |  |                |                     |  |
| o Whom Paid  |            | _  |                | AY TEAR             | Amount<br>\$                           |
| failing Address  |            |  | Description of | Expenditure         |  |
| <b>-</b>   |            |  |                |                     |  |
| City   | State      | Zip Code (Plus 4)                              |                |                     |  |
|  |            | -  | 1              |                     |  |

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

PAGE TOTAL \$ 1741.65

-

. .

| -   |                          | <b>r</b>   |                    | •        |   |  |  |
|---|--------------------------|------------|--------------------|----------|---|--|--|
| STATEMENT OF UNPAID DEBTS   |                          |            |                    |          |   |  |  |
| Use this Secton to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period. |                          |            |                    |          |   |  |  |
| Name of Filing Committee or Candidate   | X                        |            | Reporting          | Period   |   |  |  |
| COMMITTEE TO ELECT KOB  | ENT UN                   | ANTE       | From _             | <u> </u> | <u>//</u> To <u>S-2-//</u>                |  |  |
| Name of Greditor  |                          |            |                    |          | Outstanding Balance of Deb                |  |  |
| KOBERT J. JUNANTE<br>Mailing Address  | DATE                     | SID        |                    | YEAR     | \$ 4380.00                                |  |  |
| City  | DEBT<br>INCURRED         | 03         | 31                 |          | 1   |  |  |
| NORRISTOWN PA 19401   |                          | State      | Zip Code<br>19904  |          |   |  |  |
| Description of Debt   | TTEE                     |            |                    |          |   |  |  |
| Name of Greditor J. DURANTE   |                          |            |                    |          | Outstanding Balance of Deb:<br>\$ 1875.49 |  |  |
| Mailing Address D. BROWN ST.  | DATE<br>DEBT             | <b>M</b> C | CAY                | УЕАЯ     |   |  |  |
| City NORRISTOWN PA 1940,  |                          | State      | Zip Code<br>/940/- |          |   |  |  |
| Description of Debt IN VOICES PAID BY CANDIDATE   | TO BE                    |            | //-                |          |   |  |  |
| BY COMMITTEE SEE ATT<br>Name of Creditor  | ACHED                    | [15]       |                    | <u> </u> | Outstanding Balance of Debi               |  |  |
| Mailing Address   | DATE                     | MG.        | CAY                |          | \$  |  |  |
|   | DEBT<br>INCURRED         |            |                    |          |   |  |  |
| City  |                          | State      | Zip Code           | (Plus 4) |   |  |  |
| Description of Debt   |                          | - <b>L</b> |                    |          |   |  |  |
| Name of Creditor  |                          | <u> </u>   | •                  |          | Outstanding Balance of Debi               |  |  |
| Mailing Address   | DATE                     | MC.        | DAY                | YEAR     | \$  |  |  |
| City  | DEBT<br>INCURRED         | State      | Zip Code           | (Plus 4) |   |  |  |
|   |                          |            |                    |          |   |  |  |
| Description of Debt   |                          |            |                    |          |   |  |  |
| Name of Creditor  |                          |            |                    |          | Outstanding Balance of Debt<br>\$         |  |  |
| Mailing Address   | DATE<br>DEBT             | MC         | DAY                | YEAR     | •   |  |  |
| City  | INCURRED                 | State      | Zip Code           | (Pius 4) |   |  |  |
| Description of Debt   |                          |            |                    |          |   |  |  |
| Name of Creditor  |                          |            |                    |          | Outstanding Balance of Deb                |  |  |
| Mailing Address   |                          |            |                    | *****    | \$  |  |  |
| Mailing Address   | DATE<br>DEBT<br>INCURRED | MC         | CAY                | YEAR     |   |  |  |
| Сіту  | ······                   | State      | Zip Code           | (Plus 4) |   |  |  |
| Description of Debt   |                          | <u></u>    |                    |          |   |  |  |

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

PAGE TOTAL \$6,255.49

:

Expenditures Paid by Robert J. Durante, 220 W. Brown Street, Norristown, PA 19401 To be reimbursed to Mr. Durante by the Committee to Elect Robert Durante

1/1/11 through 5/2/11

- 365.01 Affordable Buttons, 3269 19th St. NW, Rochester MN 55901- Buttons
- 367.00 US Post Office, E. Airy Street, Norristown, PA 19401 -Postage
- 13.53 Corropolese Bakery 2014 Old Arch Road East Norriton, PA 19401 Committee Meeting Food
- 11.50 Montgomery County Voter Services P O Box 311 Norristown, PA 19404 -Copies
- 25.50 US Post Office, E. Airy St. Norristown, PA 19401 Postage
- 12.99 Panera Bread Café 3959 Norristown, PA 19401 Committee Meeting Food
- 35.20 US Post Office, E. Airy Street, Norristown, PA 19401 Postage
- 159.95 Vista Print 95 Hayden Avenue, Lexington, MA Car Magnets
- 7.61 Staples Germantown Pike, East Norriton, PA 19401 stationery supplies
- 100.00 Montgomery County Board of Elections P O Box 311 Norristown, PA 19404 Filing fee
- 25.00 SNG Signs 1510 4th Ave. Bessemer, AL 35020 Sign Artwork
- 20.70 Wawa Germantown Pike East Norriton, Pa 19403 gasoline sign volunteers cars
- 21.20 Dollar General 2637 Ridge Pike Eagleville PA 19403 tablecloths Beef and Beef
- 38.20 Plymouth Produce 258 W Johnson Highway Norristown, PA 19401- food Beef and Beer
- 42.75 Walmart Germantown Pike East Norriton, PA 19401 supplies for Beef and Beer
- 57.84 Walmart Germantown Pike East Norriton, PA 19401 supplies for Beef and Beer
- 25.00 Philly Soft Pretzel Factory W. Main St Norristown, PA 19401 Beef and Beer food
- 77.81 Genuardi's Supermarket Germantown Pike East Norriton, Pa 19401 Supplies Beef and Beer
- 301.00 Tips for various servers Beef and Beer
- 167.70 Austin Beverage 3905 Ridge Pike Collegeville, PA 19426 beverages Beef and Beer
- \$1875.49 Total Advanced by R. Durante. To be repaid by the committee.

#### Statement

The Committee to Elect Robert Durante received and deposited a contribution of \$200.

Upon review, it was determined that this contribution was drawn on a corporate check.

On 5/1/11 the committee issued a check to Drafting by Design, P O Box 8062,

Newark, DE 19714 in the amount of \$200 in order to return the contribution.

Drafting by Design, Inc. P O Box 8062 Newark, DE 19714

May 1, 2011

Ladies and Gentlemen,

Thank you for your recent donation to the Committee to Elect Robert Durante. Under Pennsylvania law corporate checks cannot be accept for political donations. Therefore, we are returning your donation.

Sincerely,

un Joseph J Costello, Treasurer

cc. R. Durante

| COMMITTEE TO ELECT<br>ROBERT JOHN DURANTE  | 107<br>5/1/11 BEANCH SELAD                             |
|--|--|
| Two HUNDERD AND  | Date<br><u>INC</u> \$ 200,00<br><u>Dollars</u> 1 11111 |
| Wachovia Bank, a division of Week Progo Bank, NA.<br>For <u>REJURN OF DONISION</u> | WACHOVIA AT WORK                                       |
| 10310005031:1010314528351  | · · · · · · · · · · · · · · · · · · ·                  |