Commonwealth of Pennsylvania CAMPAIGN FINANCE REPORT

PAGE 1 OF (COVER PAGE)

Filer Identification	Rep	oort	CANDIDATE 1.		3.
Number: Name of Filing Committee, Candidate or Lobbylat: ,		d By:			
Friends of Mark LE	evy				
Street Address: PO Box 176					
Chy Norristown			State: PA	Zip Code: 1940	4-0176
TYPE OF THE COMP.	SE PRIDAY	2 <u> </u>	30 DAY 3.	AVENSERY?	* *
A.	PO FRIDAY	5.	SO DAY 6.	TERMINATION METORITA	***
(place X to the right of report type)	YEAR		FILING METHOD		× Olek File
Name of Office Sought by Candidate:			DATE OF ELECTION	District Office	Party County Code Code
Prothonotary			MO. DAY YEAR 5 17 2011	N/A OTH	
				EOR OF	ICE TISE TOWN
Summary of Receipts and Expenditures from:	1 2011	То	5 2 1/		
A. Amount Brought Forward From Last Report	t	\$ /	2509.65		
B. Total Monetary Contributions and Receipts	(From Schedule	1) 8 2	7266.		~ ()
C. Total Funds Available (Sum of Lines A and	8)	\$ 3	9775,65		- []
D. Total Expenditures (From Schedule III)		\$ 4	6491.78	_	abla
E. Ending Cash Balance (Subtract Line D from	Line C)	\$ 3	3283,87	RICE OF SERVICE G. CO. PA	NED
F. Value of In-Kind Contributions Received (F	rom Schedule	11) \$	0		e U
G. Unpaid Debts and Obligations (From Schedu	le IV)	\$	0	√	
		DAVIT SE			
sweer (or affirm) that this report, including theory					
	RDON, Notary o. Montgomery	Public County	It lale	(
- land My Hadas			127 1 2 3 1 1	of Person Submitting	
Signature	2.6.4	- ۲		Printed Name	
My commission expires 15 MO. DAY	<i>30[[</i>]	<u> </u>	267 Area Code		325/ elephone Number
		loisepittes	, candidate shall sign		
I swear (or affirm) that to the best of my knowledg (P.L. 1333, No. 320) as amended.	e and belief this	political co	mmittee has not violated	any provisions of the	Act of June 3, 1937
Sworn to and subscribed before me this 3 day of May	20 //_	_] .	Man	1	
Socak M. Fordon		_ }	MACK	gnature of Candidate	
Signature My commission expires	2-07(- YR.		610 Area Code	Printed Name 238-9	5343 Telephone Number
SARAH M. GORDON, Notary Public	YR.		VISE COOL	∠sy ttme	
Norristown Boro, Montgomen County of Sta	të • TBuresu	of Comn	nissions, Elections and		

DSEB-502 (7-99)

SCHEDULE I PAGE 2 OF 18

CONTRIBUTIONS AND RECEIPTS

Reporting Per From/	1 / 1
PER CONT	RIBUTOR
(1)	\$ 3/0,-
8)	
· · · · · · · · · · · · · · · · · · ·	\$ 475
	s 2431.—
(2)	\$ 2906
	\$ 20500,-
	\$ 3550.
(3)	
	C FROM PART E
(4)	\$ 0
	\$ 27,266,-
	PER CONI (1) (1) (2) (3) (3)

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

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.

Friends of Mark L	ev	<i>Y</i>		From	1/1/1	11 to 5/2/11
				DATE		AMOUNT
Full Name of Contributing Committee Reinforced Ironworkers Rigg Mailing Address	PF=1	MachinerefAC	MO. 2	DAY 17	YEAR	\$ 250.
Meiling Address 2433 Reed St	121 30	gr warms give	MO.	DAY	YEAR	\$
Clip 10	State	Zip Code (Plus 4) 19146 -	MO.	DAY	YEAR.	\$
Full Name of Contributing Committee	1 /7	17/46	MO.	DAY	YEAR	
Friends of Bob Sass	<u>5/</u>		2	2.5	//	\$ 125.
Friends of Bob Sase Mailing Address Address Requested			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	PAY 18	YEAR	\$ 100
Mailing Address			MO.	DAY	YEAR	\$
FO BOX 60178	State	Zip Code (Plus 4)	MQ.	DAY	YEAR	
King of Prussia	PA	19406-				\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MQ.	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Melling Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	7
		_				\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Meiling Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	PAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
						\$
Full Name of Contributing Committee			MO	DAY	YIA	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	s
					_	PAGE TOTAL
Enter Grand Total of Part A on Scho	edule	1, Detailed Summer	y Page	, Sectio	on 2.	\$ 475
DSEB-502 (7-99)						

\$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 Peri	iod , / /
Friends of Mark Levy		From//	1/11 To 5/2/11
		DATE	AMOUNT
Full Name of Contributor	ZEMO!	M MDAY W MY	
Manan Trivedi Malling Address	S TWO	24 /	XR 88
2212 38 TH ST NW			\$
	2ip Code (Plus 4)	E DAYE W	ARIMI \$
Full Name of Contributor Bridget Sudal/ Mailing Address		Z ZOXYE SY	- 175W)
Mailing Address		2.5 pay	11 \$ 105.—
7 Harvard Rd		E PARE J. A DESERVE BALL N	\$
Plymouth Meeting PA 19	2ip Code (Plus 4)	E DIVER EX	S S
Full Name of Contributor	ZIMO:	E SEDAYES EY	3.1.2
Mariorie Berling hot Mailing Address	2	25 /	\$ 200.
11/100 // // // -00 - /////			\$
State	Zip Code (Plus 4) 1025 -	SEDAVE SY	\$
Full Name of Contributor			Alian _
Sarah John Mailing Address	2	25 /	* 70. —
2325 Welsh Rd	Edwir LA Thi	e edvare my	\$
City	Zip Code (Plus 4) (MO)	E SEPAVASI ESZ⊟	\$
Full Name of Contributor			Alien
Vincent Parziale Malling Address	2	25 /	
534 Bell Lane			\$
Man la Al-	Zip Code (Plus 4)	ENTRY EYE	
Man/e g/en PA 19 Full Name of Contributor	2002-		\$
Kobert Kempfer Malling Address	2	25 /	* 70 -
	ÆMO\€	Y DAY WE	
city, State	Zip Code (Plus 4)	NESTAVEE INTE	
Plymouth Meeting PA 19	1462-		\$
	Z MOR	MUAYE SYE	\$ 70.—
Mailing Address	$\frac{2}{2}$	25 //	No.
4603 Perkiomen Creekk	d		¬ \$
	2ip Code (Flus 4)	13DAYA 8417	\$
full Name of Contributor	MAXIO SA	EQUIP EV	\$**\£33
Bonnie Okane Mailing Address	2	25 /	* 210. —
508 Evans Circle			\$
Willow Grove PA 190	190 - Mio	EAVYEM EST?	\$
		•	PAGE TOTAL
Enter Grand Total of Part B on Schedule I, Det	alled Summary Page,	Section 2.	\$ 1026.
SEB-502 (7-99)	_		, ,

\$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	-/ /
Friends of Mark Levy	From _///_///	_ то <u>5/2/11</u>
	DATE	AMOUNT
Full Name of Contributor Ange ina Salamone Mailing/Address	2 25 11	70. —
Mailing/Address	MOVE STOAY STEARING	
2101 Coles Blud	le (Plus 4)	·
Norristown PA 1940		
Full Name of Contributor	and More allowater leaves and	
Marc Alfarano Mailing Address	2 25 // 3	75. —
115 Mariel Ln	Processing and Burns and Processing	;
Norristown PA 19401	• (Plus 4)	
Full Name of Contributor	MANDED MADAYAS GUELDES	2/-
Full Name of Contributor Equara 15e ++ Meiling Address	2 25 // \$	35.
615 Turf Ln. City State Zip Cod	3 24 1/ \$	25 -
City State Zip Cod Conshohocken PA 19428	e (Plus 4)	
Full Name of Contributor	GAIGGI RAZANA EMANE	
Mailing Address	EMORE SDAY & SYEAR	700,
1260 Holstein C+	(Plus 4) 2344712247122471224	
Blue Bell PA 19422		
Full Name of Contributor	LESAIGA BERTANEK ITALIA	
Vason Salus Mailing Address	3 24 // S	100
210 Maple St	\$	
City State Zin Code		
Conshohocken PA 19428		
Full Name of Contributor BEVER V Hahn Mailing Address	3 24 1/ \$	100.
Mailing Address	MOW MOAY WEARS	, 0
1621 Winchester Dr. Clty State Zip Code		
Blue Bell State Zip Code PA 19422		•
Full Name of Contributor	SEMOTE MADAGE SYETHER	
Mailing Address 400drich	3 24 // \$	100.
200 W. Elm St	\$	
City Consholocken PA 19428	在1994年11年,11日本,11日本,11日本 11日本 11日本 11日本 11日本 11日本	
Full Name of Contributor	S 24 // \$	100
Mailing Address	3 24 // **	100.
11 West Avenue	\$	
Wayne State 21p Code PA 19087		
,	PA	GE TOTAL
Enter Grand Total of Part B on Schedule I, Detailed	Summary Page, Section 2. \$	705
SEB-502 (7-99)	<u>. </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.)

Friends of Mark L	, P1/1	/		Heporting From	,	1/ To 5/2/11
				DATE		AMOUNT
Full Name of Contributor			MO.	DAY	YEAR	
Raymon Staley Mailing/Address			<i>4</i> ∕ M0.	28	YEAR	\$ 100.
22 Galie Way						 \$
Roversford	State		MO.	DAY	YEAR	
			MC,	DAY	YEAR	\$
Full Name of Contributor Margaret Phiambo Malling Address	7//5	5	3	3/	1/	\$ 100. —
1012 Bethlehem F	1/2 1/2	n Box 356	MO.	DAY	YEAR	\$
	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
Spring House	State	1 / / / /				 \$
Full Name of Contributor Stradley Ronon Stev Mailing Address	nac	20/1/ 00/10	MO,	DAY	YEAR	\$ 2.50 -
Mailing Address	erisa	una roungear	3 Mo.	24 DAY	YEAR	\$ 250
2005 Market St.					1100	\$
Phila	State	Zip Code (Plus 4) 19103 -	MO.	DAY	YEAR	
		19/03 -			<u> </u>	\$
Feldman Shepherd Work	1ge	leinter Tanner	MO.	PAY	YEAR	\$ 250,-
Mailing Addrass			MO.	DAY	YEAR	\$
1845 Walnut St	State	Zip Code (Plus 4)	1 140	-		*
Phila	PA	19103 -	MO.	DAY	YEAR	\$
Full Name of Contributor			MO.	PAY	YEAR	_
Melling Address			MO.	DAY	VEAR	\$
•			m.g.		YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		_				\$
Full Name of Contributor			MO.	DAY	YEAR	\$
Malling Address			MQ.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)			/	*
	3.2.1		MO.	DAY	YEAR	\$
Full Name of Contributor			MO.	DAY	YSAR	
Mailing Address	•		<u> </u>			\$
			HO.	DAY	YEAR	\$
City	State	Zip Cade (Plus 4)	MO.	DAY	YEAR	
	<u> </u>	<u> </u>				\$
Full Name of Contributor			MO.	DAY	YEAR	\$
Malling Address			MO.	DAY.	YEAR	
City	State	Zip Code (Pius 4)			8	\$
	State	Lip Code (Figs 4)	MO.	DAY	YEAR	\$
	_					PAGE TOTAL
Enter Grand Total of Part B on Sche	dule I	, Detailed Summary	Page.	Section	n 2.	\$ 7.00.
SEB-502 (7-99)	******	,	3-1			

PART C

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

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	Re	porting		//
Friends of Mark Levy		From /	////	<u> то 5/2/11</u>
U	•	DATE		AMOUNT
Full Name of Contributing Committee UOE 542 PAC Fund Mailing Address	MQ.	DAY	YEAR	\$ 500
Mailing Address	A MO.	DAY	YEAR	♥ .900.
1375 Virginia Drive	NIO.	7.0.1	15.01	\$
City Signal Sip Code into 4)	MQ.	DAY	YEAR	\$
Ft. Washington PA 19034-	112			Y
Local 98 IBEW Com on Political Education	MO.	DAY 2/	YEAR	\$ 1000
Mailing Address	MO.	DAY	YEAR	s
1719 Spring Garden St				•
Phila State Zip Code (Plus 4) Phila PA 19130 -	MC.	DAY	YEAR	\$
	MO.	DAY	YEAR	\$ 10000 -
Full Name of Contributing Committee Friends of Vince Gillen Mailing Address	3 MO.	2/	YEAR	\$ 10000
103 Red Rambler Dr	MU. 4/	20	//	\$ 1000 -
City State I Zip Code (Plus 4)	MO.	DAY	YEAR	
	4	28	11	\$ 1000.
Full Name of Contributing Committee	MO.	DAY	YEAR	\$ 1000.
Plumbers Union 690 PAC Mailing Address	2 MO.	25 Day	YKAR	· /000.
2791 Southampton Rd City State Zip Code (Plus 4)				\$
Phila State Zip Code (Plus 4) PA 19154-	MO.	DAY	YEAR	\$
	MO.	DAY	YEAR	
Sprinkler Fitters Local 692 PAC Mapling Address	3	/	//	\$ 500.
Majfing Address	MQ.	DAY	YEAR	s
14002 McNulty Rd City State Zip Code (Plus 4)				•
Phila 19154- [MO.	DAY	YEAR	\$
Full Name of Contributing Committee Cement Masons Local 592 PAC Mailing Address	MQ.	DAY	YEAR	\$ 500 -
Cement Masons Local 392 PAC	3	7	//	\$ 300.
2843 Snyder Ave	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Phila State Zip Code (Plus 4) Phila PA 19145-				
Full Name of Contributing Committee Laborers District Council PAC Mailing Address	MO.		YEAR	\$ 2500.
Malling Address	MO.	DAY	YEAR	
665 11 Brand St				\$
Phila PA 19123 -	MO.	DAY	YEAR	\$
Full Name of Contribution Committee	MO.	DAY	YEAR	• 0 (00 -
Friends of the 37" Word	4	29	//	\$ 2500.
3810 Dartmouth Pl.	MO.	DAY	YEAR	\$
City State Zip Code (Plus 4)	MO.	DAY	YEAR	s
Phila VA 19136-				-
				PAGE TOTAL
Enter Grand Total of Part C on Schedule I, Detailed Summary P	age,	Section	n 3.	\$20,500 -

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PART D

PAGE 8 OF 18

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	Reporting Period	11
Friends of Mark Levy	From	<u>//</u> To <u>5/2///</u>
Therias of the	DATE	AMOUNT
Full Name of Contributor 0 / h /// 1/0	H5 11-725 163-73/42 163/15/163	\$ 500
Full Name of Contributor Oper Meyer Rebmann Maxwell Hippel 1.4	2 /0 //	\$500.—
Malling Address C / 1/17 IEV C/	The second of th	\$
One Penn Center, 16/7 JFK B/Vd State Zip Code (Plus 4)		
City 101112		\$
111100	Occupation	
Employer Name		
LAW FIM Employer Mailing Address/Principal Place of Business	<u> </u>	
Same as above		
Full Name of Contributor	SERIORE FEDINE MYEAR	\$ 280. —
Christina Bellita	2 2 5 11	+ 2·0 O.
na 111 - Address	Am No American transfer and a supply	\$
1/3 W. Brown St State Zip Code (Plus 4)		
City,		\$
10011 10 10001	Occupation	<u> </u>
Employer Name, Monaton Mark II County	Clerk	
Montgomer / County Employer Mailing Address/Pringspal Place of Business On 194		
Employer Mailing Address/Pringspel Place of Business FO BOX3// Norristown PA 1940		
Full Name of Contributor.		\$ 500.
Michael Honkson	3 /5 // MO2 DAY WEAR	+000.
Mailing Address		\$
1908 Midfield Ave	4-110	
Feasterville PA 19053-		\$
Employer Name	Occupation	
DST	Owner	
Employer Mailing Address/Principal Place of Business		3
Employer Mailing Address Principal Place of Business 3494 10900055 Dr Bensalen	n FA 1902C	<u></u>
Full Name of Contributor		\$ 70.
James Lynch	Z 25 //	
Mailing Address	3 24 //	\$ 200.
68 N. Grange Ave City State Zip Code (Plus 4)		
Collegeville PA 19426		\$
Employer Name / O / / /	Occupation	
Law Offices of James K. Lynch Jr.	Attorney	<u>/</u>
Employer Mailing Address/Principal Place of Business	19401	
	FERNOLD AND AND AND AND AND AND AND AND AND AN	
Full Name of Contributor Albert Torcini	4 20 11	\$1000,-
Mailing Address	2300,22 137,X35 270,300	\$
1705 Osprey Dr		
Audokon State Zip Code (Plus 4) PA 19403 -		\$
Employer Name	Occupation	
Employer Mailing Address/Principal Piece of Busings	Owner -	
2014 Better PK Conshohocken t	H 19428	
Enter Grand Total of Part D on Schedule I, Detailed Summa	ry Page, Section 3.	\$ 2550
LING CININ IVAN TO THE WORLD TO THE TOTAL TO THE TAXABLE TO THE TA		■♥ ~ (八) (ノ)

DSE8-502 (7-99)

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				Reporting Period	-//
Friends of Mark L	e(/	V		From	
		,		DATE	AMOUNT
Full Name of Contributor					
Jonathan Samel			4	6 / /	\$500.
1700 Tuckerstown.	L	1	Salta Gas	が <u> </u>	\$
City	State	Zip Code (Plus 4)	## NO#	eom etm	
Dresher	PA	19025			\$
Employer Name Hamburg Rubin Mullin Ma.	Ywe	1/ALUPINR	Occupe	Horney	
Employer Mailing Address/Principal Place of Business 375 Morris Rd PO Box			lale	PA 194	146
Full Name of Contributor			TEM OF		\$ 500-
Steven Darrett Mailing Address			4	2///	000.
501 Clothier Pd	1		25.00		\$
City	State	Zip Code (Plus 4)	7.5M 6 70	EDVA FIELE	_
Wynne wood	14	14096-			\$
Employer Name	//	10/ minte	Occupat	Horne W	
Employer Mailipg Address/Principg Place of Business	we//	acopini -	17/	DA	
375 Morris Rd PO BO	x /	479 Lansa	lale	PA 1949	46
Full Name of Contributor					\$
Malling Address			EAMO	e-mare areas	\$
City	State	Zip Code (Plus 4)		3 E 7 N E 1 7 N E	. •
only	G(0				\$
Employer Name		· · · · · · · · · · · · · · · · · · ·	Occupat	lion	
Employer Mailing Address/Principal Place of Business		<u> </u>	<u> </u>		· · · · · · · · · · · · · · · · · · ·
Full Name of Contributor			MON.	e na anna e na casa	\$
Mailing Address			200	FOUND ENTONIA	
Mailing Address					\$
City	State	Zip Code (Plus 4)	2000		\$
Employer Name	i		Occupat	ion	
Employer Mailing Address/Principal Place of Business					
Employer manny records the part of the par					
Full Name of Contributor			STATE	a managanggantan na sang gapan Basasan basasan	\$
Mailing Address					\$
City	State	Zip Code (Plus 4)			
					\$
Employer Name			Occupa	tion	
Employer Mailing Address/Principal Place of Business			·		
					PAGE TOTAL
Enter Grand Total of Part D on Sched	lule I,	, Detailed Summary	/ Page	, Section 3.	\$ 1000 -

DSEB-502 (7-99)

PART E 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.

Name of Filing Committee or Candidate Friends of Mark Le	evi	/	ł	porting F	Period	/ To 5/2/11
					-	
Full Name						
Mailing Address						**************************************
Mailling Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
						\$
Receipt Description						
Full Name						
Mailing Address	8.6					
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$
Receipt Description			-			
Full Name						
Mailing Address						· · · · · · · · · · · · · · · · · · ·
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$
Receipt Description					1	
Full Name	··					
Mailing Address						
City	State	Zip Code (Plus 4) —	MO.	DAY	YEAR	Amount \$
Receipt Description						
Full Name						
Mailing Address			0 0.800			
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$
Receipt Description			•	<u> </u>		
Full Name			***			
Mailing Address						
City	State	Zip Code (Plus 4)	MQ.	DAY	YEAR	Amount \$
Receipt Description	<u>.l</u>				<u> </u>	
						PAGE TOTAL
Enter Grand Total of Part E on Sche	dule !	, Detailed Summary	Page,	Section	n 4.	\$ 0.00

PAGE // OF /8

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate Friends of Mark Levy	Reporting Per	iod ////	то <u>5/2///</u>
UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF S		T T	ER CONTRIBUTOR
2 IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$2			A
TOTAL for the Reporting Perio		s	Ö
2 N KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FRO		\$	0
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)		\$	0.00

SCHEDULE II PART F

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	/		Repo	rting Pe	riod /	-/-/11
Name of Filing Committee or Candidate Friends of Mark	Le u	14	Fro	m	[[[/ To <u>5/2///</u>
		7		ATE		AMOUNT
Full Name of Contributor			MO. D	AY Y	/EAR	\$
Mailing Address			MO. D	AY.	YEAR	<u> </u>
						\$
City	State	Zip Code (Plus 4)	MO. C	PAY	YEAR	\$
Description of Contribution:	<u> </u>		<u> </u>			
Full Name of Contributor		_	MO. C	MY	YEAR	\$
Mailing Address			MO. E	DAY	YEAR	
						\$
City	State	Zip Code (Plus 4)	MQ.	YAY	YEAR	\$
Description of Contribution:					<u>.</u>	
Description of Contribution:						
Full Name of Contributor			MO.	YAC	YEAR	\$
			<u> </u>		UE AB	
Mailing Address			MO.	DAY .	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	PAY	YEAR	6
						\$
Description of Contribution:						
Full Name of Contributor			MO.	PAY	YEAR	
<u></u>						\$
Mailing Address			MQ.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR "	
City					***************************************	\$
Description of Contribution:	_1					
			T ma I	DAY . L	UALB II	
Full Name of Contributor			MO.	VA C. S. A.	1507	\$
Mailing Address		<u> </u>	MQ.	DAY	YEAR	•
416.	T Cana	Zip Code (Plus 4)	110	DAY	VEAD	
City	State	Zip Code (Flus 4/	MO.	YAT.	VEAR	\$
Description of Contribution:	_1			I		
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address		<u> </u>	MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Description of Contribution:		<u> </u>	1			
Enter Grand Total of Part F on Sche	dula II	I. In-Kind Contribu	itions Deta	iled		PAGE TOTAL
Summary Page, Section 2.				-		\$ ().00

The second state of the second second

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate			R	Reporting Períod			
Friends of Mark Levy				From	<i>///</i>	11 To 5/2/11	
				DATE		AMOUNT	
Full Name of Contributor			MO.	DAY	YEAR	\$	
Mailing Address			MO.	DAY	YEAR	\$	
СПУ	State	Zip Code (Plus 4)	MO.	DAY	YEAR		
		_				\$	
Employer of Contributor			Occupation				
Employer Mailing Address/Principal Place of Business			Descripti	on of Con	tribution		
Full Name of Contributor	***		MO.	DAY	: PASY:	\$	
Melling Address		<u></u>	MO.	DAY	YEAR	\$	
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
Employer of Contributor	\mathcal{L}	-	Occupation	on			
Employer Mailing Address/Principal Place of Business			Descripti	on of Con	tribution		
Full Name of Contributor			MO.	DAY	YEAR	\$	
Mailing Address			MO.	DAY	YEAR	\$	
City	State	Zip Code (Pfus 4)	MO.	DAY	YEAR	\$	
Employer of Contributor			Occupation	on			
Employer Mailing Address/Principal Place of Business			Description of Contribution				
				"1-44" 1	Lucia de la compansión de	· ·· ·	
Full Name of Contributor		MO.	DAY	YEAR	\$		
Mailing Address			MQ.	DAY	YEAR	\$	
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
Employer of Contributor	<u> </u>		Occupati	on			
Employer Mailing Address/Principal Place of Business			Description of Contribution				
Full Name of Contributor			MO.	DAY	YEAR		
						\$	
Mailing Address		MO.	DAY	YEAR	\$		
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
Employer of Contributor			Occupation				
Employer Mailing Address/Principal Place of Business		Description of Contribution					
						PAGE TOTAL	
Enter Grand Total of Part G on Sche	dule l	l, In-Kind Contrib	utions D	etailed		\$ 1700	
Summary Page, Section 3.							

OSEB-502 (7-99)

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate		Repor	ting Period	/ //
Friends of Mark Levy		Fro	m <u>////</u>	1 To 5/2/1/
To Whom Paid The Capita / Grille Mailing Address Mailing Addre	"	MO.	AY YEAR	Amount
The Capital Grille		Description of		\$ 160.
236 Mall Blvd.		1.00	ch M	beting
City			7.3	
King of Prussia PA	1 19406			
Cheltenham Printing		MO [DAY YEAR	\$ 103,88
Mailing Address		Description o	f Expenditure 🧻	
518 Kyers Ave	Zip Code (Plus 4)	Prin	<u>ting E</u>	xpenses
Cheltenham PH	19012-			
California Pizza Kitcher	_		DAY YEAR	Amount \$ 4/3.84
agaitian Address		Description o	f Expenditure	
38/ W. DeKalb Pike		Lun	ch /1/e	eeting
King of Prussia PA	zip Code (Plus 4) 19406-			
		MO.	DAY YEAR	Amount
To Whom faid Fingers Wings and Other T. Mailing Address	hings	1 2	28 11	\$ 184.02
Mailing Address		1	of Expenditure	nee ting
Mailing Address 107 West Ridge PK City State	e Zip Code (Plus 4)	Din	ner /	1ee 1111 g
Conshohocken Pr				<u> </u>
To Whom Paid			DAY YEAR	Amount 2,00
Stone Rose		Description (of Expenditure	\$ 52,
822 Fayette St.		Lune	ch Me	eeting
Conshohocken Ph				
	11.120	MO.	DAY YEAR	Amount
Philly Freedom Stars		2	9 11	\$ 100.
Mailing Address 25 TH and Diamond Sts			of Expenditure 12 10 2	2
City State	e Zip Code (Plus 4)	1,700	141100	<u></u>
Phila	1 1912/-			
To Whom Paid			DAY YEAR	Amount \$ 1500. —
MCDC			of Expenditure	3 / 3 ()(),
Meiling Address 21 E. Airy St			tripo:	tion
Norristown Pr				
he Henham Printing		the state of the s	DAY YEAR	\$ 169,60
Mailing Address		Description	of Expenditure	
3/8 Ryers /700	te Zip Code (Plus 4)	TIIN.	ting 1	xpenses
Cheltenham Pa	9 19012-			
				PAGE TOTAL
Enter Grand Total of Expenditures on Page	1, Report Cover P	age, Item	D.	\$ 2293.34

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Friends of Mark Levy	From ///// To 5/2///
11101103 01 / 1001) 2-4/	
	Amount
To Whom Paid Great American Pub Mailing Address 44 54	2 25 11 \$ 1564.
Great filmerican for	Description of Expenditure
122 FALLS HO ST	Fundraiser Expenses
123 Fayette St City State Zip Code (Plus 4)	1011414180
Conshopocken PA 19428	ĺ ,
J. W. STOTION CO.	MO DAY MARE Amount
To Whom Peld	3 2 // \$ 50.
MCBLEOA	Description of Expenditure
Malling Address PO Box 123	Donation
City State Zip Code (Plus 4)	JUNE 1160 -1
1 / 1	
Di lage Doi	Amount
To Whom Paid	3 21 11 \$ 65,
ARDC	Description of Expenditure
Mailing Address PO BOX 132	Contribution
City State Zip Code (Plus 4)	
Abinaton State Zip Code (Plus 4)	
	Amount
To Whom Paid MCDC	3 22 11 s 75.
Mailing Address	Description of Expenditure
21 E Airy St.	Contribution
City State Zip Code (Plus 4)	
Norristown PA 19401-	
100111010011	
To Whom Paid	# Amount
To Whom Paid	3 10 11 \$ 257,23
To Whom Paid Heastone Mailing Address	3 10 1/ \$ 23 1, 25 Description of Expenditure
Mailing Address 5/2 W Secmon town Ok	3 10 11 \$ 25 1,25
Mailing Address 5/2 W. Berman town Pk. State Zip Code Plus 4)	3 10 1/ \$ 23 1, 25 Description of Expenditure
Mailing Address 5/2 W. Berman town Pk. State Zip Code Plus 4)	3 10 11 \$ 23 1,25 Description of Expanditure Lunch Meeting
Mailing Address 5/2 W. Berman town Pk. State Zip Code (Plus 4)	Description of Expanditure Lunch Meeting Amount
Mailing Address 5/2 N. Berman town Pk. City Plymouth Meeting PA 19462- To WKom Paid MCDC	Description of Expanditure Lunch Meeting Amount
Mailing Address 5/2 N. Berman town Pk. City Plymouth Meeting PA 19462- To WKom Paid MCDC Mailing Address	Description of Expenditure Lunch Meeting Amount 3 16 11 \$ 20, Description of Expenditure
Mailing Address 5/2 W. Berman town Pk. City Plymouth Meeting To Whom Paid MCDC Mailing Address 2/ E. Aicy St.	Description of Expanditure Lunch Meeting Amount
Mailing Address 5/2 W. Berman town Pk. City Plymouth Meeting To Whom Paid MCDC Mailing Address 2/E. Airy St. City State Zip Code (Plus 4)	Description of Expenditure Lunch Meeting Amount 3 /6 // \$ 20, — Description of Expenditure Reimbursement for
Mailing Address 3/2 W. Berman town Pk. City Plymouth Meeting PA 19462- To WKom Pald MCDC Mailing Address 2/ E. Airy St. City Norristown PA 19401-	Description of Expenditure Lunch Meeting Amount 3 16 11 \$ 20, - Description of Expenditure Reimbursement for Clerical Expenses
Mailing Address 5/2 W. Berman town Pk. City Plymouth Meeting To Whom Paid MCDC Mailing Address 2/ E. Airy St. City Norristown State Zip Code (Plus 4) PA 19462- State Zip Code (Plus 4) PA 1940/-	Description of Expenditure Lunch Meeting Amount 3 16 11 \$ 20, - Description of Expenditure Reimbursement for Clerical Expenses Amount
Mailing Address 5/2 W. Berman town Pk. City Plymouth Meeting P.4 19462- To Whom Paid MCDC Mailing Address 2/ E. Airy St. City Norristown To Whom Paid Friends of the 57th Ward	Description of Expenditure Lunch Meeting Amount 3 16 11 \$ 20, - Description of Expenditure Reimbursement for Clerical Expenses Amount 8 18 11 \$ 100
Mailing Address 5/2 W. Berman town Pk. City Pymouth Meeting PA 19462- To Whom Paid MCDC Mailing Address 2/ E. Airy St. City Vorristown PA 1940/- To Whom Paid Phase Of the 57th Ward Mailing Address Mailing Address	Description of Expenditure Lunch Meeting Amount 3 /6 \$ 20, - Description of Expenditure Reimbursement for Clerical Expenses Amount 8 /8 // \$ 100 Description of Expenditure
Mailing Address 5/2 W. Berman town Pk. City Plymouth Meeting P.4 19462- To Wisom Paid MCDC Mailing Address 2/1 E. Airy St. City Norristown To Whom Paid Friends of the 57th Ward Mailing Address 38/0 Dart mouth Pl	Description of Expenditure Lunch Meeting Amount 3 16 11 \$ 20, - Description of Expenditure Reimbursement for Clerical Expenses Amount 8 18 11 \$ 100
Mailing Address 5/2 W. Berman town Pk. City Plymouth Meeting PA 19462- To WKom Paid Phone St. City St. City State Zip Code (Plus 4) PA 19401 - To Whom Paid Friends of the 57th Ward Mailing Address 38/0 Dartmouth Pl City State Zip Code (Plus 4) City State Zip Code (Plus 4)	Description of Expenditure Lunch Meeting Amount 3 /6 \$ 20, - Description of Expenditure Reimbursement for Clerical Expenses Amount 8 /8 // \$ 100 Description of Expenditure
Mailing Address 3/2 W. Berman town Pk. City Plymouth Meeting PA 19462- To WKom Pald MCDC Mailing Address 2/ E. Airy St. City State Zip Code (Pius 4) Norristown PA 1940/- To Whom Paid PA 1940/- To Whom Paid Phila State Zip Code (Pius 4) Friends of the 57th Ward Mailing Address 38/0 Dart mouth P/ City Phila Zip Code (Pius 4) PA 19136-	Description of Expenditure Lunch Meeting Amount 3 /6 // \$ 20, - Description of Expenditure Reimbursement for Clerical Expenses Amount 8 /8 // \$ 100 Description of Expenditure Contribution
Mailing Address 3/2 W. Berman town Pk. City Plymouth Meeting PA 19462- To Whom Paid MCDC Mailing Address 2/ E. Airy St. City State Zip Code (Pius 4) Norristown PA 1940/- To Whom Paid Phess of the 57th Ward Mailing Address 38/0 Dartmouth Pl City State Zip Code (Pius 4) Phila Ig 136- To Whom Paid	Description of Expenditure Lunch Meeting Amount 3 /6 // \$ 20, - Description of Expenditure Reimbursement for Clerical Expenses Amount 8 /8 // \$ 100 Description of Expenditure Contribution
Mailing Address 3/2 W. Berman town Pk. City Plymouth Meeting PA 19462- To WKom Pald MCDC Mailing Address 2/ E. Airy St. City State Zip Code (Pius 4) Norristown PA 1940/- To Whom Paid PA 1940/- To Whom Paid Phila State Zip Code (Pius 4) Friends of the 57th Ward Mailing Address 38/0 Dart mouth P/ City Phila Zip Code (Pius 4) PA 19136-	Description of Expenditure Lunch Meeting Amount 3 /6 // \$ 20, - Description of Expenditure Reimbursement for Clerical Expenses Amount 8 /8 // \$ 100 Description of Expenditure Contribution Amount 3 /8 // \$ 100 Description of Expenditure Contribution Amount 3 /8 // \$ 100 Description of Expenditure Contribution Amount 3 // \$ 100
Mailing Address 5/2 W. Berman town Pk. City Plymouth Meeting P.4 19462- To WKom Paid MCDC Mailing Address 21 E. Airy St. City State Zip Code (Pius 4) Norristown Paid Friends of the 57th Ward Mailing Address 38/0 Dartmouth Pl City Phila State Zip Code (Pius 4) Phila I glass To Whom Paid To Whom Paid To Whom Paid Mailing Address	Description of Expenditure Lunch Meeting Amount 3 /6 // \$ 20, - Description of Expenditure Reimbursement for Clerical Expenses Amount 8 /8 // \$ 100 Description of Expenditure Contribution Amount 3 /8 // \$ 4,08
Mailing Address 5/2 W. Berman town Pk. City Plymouth Meeting P.4 19462- To Whom Paid Morris town To Whom Paid Plands of the 57th Ward Mailing Address 38/0 Dart mouth Pl City Phila	Description of Expenditure Lunch Meeting Amount 3 /6 // \$ 20, - Description of Expenditure Reimbursement for Clerical Expenses Amount 8 /8 // \$ 100 Description of Expenditure Contribution Amount 3 /8 // \$ 100 Description of Expenditure Contribution Amount 3 /8 // \$ 100 Description of Expenditure Contribution Amount 3 // \$ 100
Mailing Address 3/2 W. Berman town Pk. City Plymouth Meeting PA 19462- To Whom Paid MCDC Mailing Address 2/E. Airy St. City State Zip Code (Pius 4) Norristown PA 1940/- To Whom Paid Friends of the 57th Ward Mailing Address 38/O Dart mouth P/ City Phila State Zip Code (Pius 4) Phila Phila PA 19136- To Whom Paid Phila PA 19136- To Whom Paid Phila PA 19136-	Description of Expenditure Lunch Meeting Amount 3 16 1/ \$ 20, - Description of Expenditure Reimbursement for Clerical Expenses MO DESCRIPTION of Expenditure Contribution 3 18 1/ \$ 100 Description of Expenditure Contribution Amount 3 22 1/ \$ 44, 08 Description of Expenditure Lunch Meeting
Mailing Address 5/2 W. Berman town Pk. City Plymouth Meeting P.4 19462- To Whom Paid MCDC Mailing Address 2/ E. Airy St. City State Zip Code (Plus 4) Norristown PA 1940/- To Whom Paid Friends of the 57th Ward Mailing Address 38/0 Dartmouth P/ City State Zip Code (Plus 4) Phila Zip Code (Plus 4) Phila Zip Code (Plus 4) To Whom Paid Phila P	Description of Expenditure Lunch Meeting Amount 3 /6 // \$ 20, — Description of Expenditure Reimbursement for Clerical Expenses Amount 3 /8 // \$ 100.— Description of Expenditure Contribution Description of Expenditure Lunch Meeting Amount Amount Amount Amount Lunch Meeting PAGE TOTAL
Mailing Address 5/2 W. Berman town Pk. City Plymouth Meeting P.4 19462- To Whom Paid Morris town To Whom Paid Plands of the 57th Ward Mailing Address 38/0 Dart mouth Pl City Phila	Description of Expenditure Lunch Meeting Amount 3 /6 // \$ 20, - Description of Expenditure Reimbursement for Clerical Expenses Amount 8 /8 // \$ 100 Description of Expenditure Contribution Amount Amount 8 /8 // \$ 100 Description of Expenditure Lunch Meeting PAGE TOTAL

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period
Friends of Mark Lev	1/		From 1/1/11 To 5/2/11
FITENIUS OF THURN LEV	<u>Y</u>		
/			Amount 4.5
To Whom Paid Pub			3 24 1/ \$ 140 9 65
Great American Pub			Description of Expenditure
Mailing Address 123 Fayette St.			Fundraiser Expenses
	State	Zip Cade (Plus 4)	
Conshohocken	PA	19428	
To Whom Pald	التر المسائلة		3 26 1/ \$ 50. —
Municipality of Norrisa Mailing Address	tow.	n	3 26 // \$ 30.
Mailing Address		. - "	
233 E. AICY 37			Norristown Dicentennial
City	State	1940/-	Donation
Morristown			Amount
Cheltenham Democration	- 13	ommittee	3 28 11 \$ 00,
	<u> </u>		Description of Expenditure
Address Requested			Contribution
City	State	Zip Code (Plus 4)	
			N. A. C.
To Whom, Paid	/.	D.	4 / // \$ 65.
Colonial Area Democra	nc	Hinner_	The second Symposium
Mailing Address	_		Dinner Tickets
4025 Kattler Dr	State	Zip Code (Plus 4)	- VIIIICI III
City for atta Hill		19444-	
Lafayette Hill	V M	/ / / / /	Amount 21/62
To Whom Paid /			4 4 11 \$ 124,6
Kedstone Mailing Address	0.		Description of Evounditure
512 W. Germantown 1	K.		Lunch Meeting
City M			√
Plymouth Meeting	PA	19462-	
To Marie Bold			4 4 1/ \$ 14, 98
Dunkin Jonuts			Description of Expenditure
Malling Address			Break fast Meeting
108 W. Ridge Pk.	State	Zip Code (Plus 4)	+ CHECK / AST
City Lon		19428-	
Conshohocken	17.7	11.10	Amount Amount
To Whom Pald			4 16 11 \$ 67.61
Meiling Address			Description of Expenditure
417 Germantown PK	<u> </u>		Meeting Expense
City.	State		
Latayette H.11	PA	19444-	Amount
To Whom Paid			Mo Amount \$ 141, 75
Aramark			Description of Expenditure
One Citizens Bank h	lay	/	Moeting Expense
City?	1577	Zip Code (Plus 4)	
Phila	VA	19148	
/ //			PAGE TOTAL
Enter Grand Total of Expenditures on P	1	Report Cover	Page, Item D. \$ 1796, 67
	300		

STATEMENT OF EXPENDITURES

ame of Filing Committee or Candidate	 :	Reporting Period From //// To 5/2//
Friends of Mark Le	2VV	rion
		Amount 46
Whom Peid Dans to		4 19 11 \$ 16,11
alling Address		Breaktast Meeting
28 E. Kidge PK.	State Zip Code (Pi	
Conshohocken	PA 19428-	
Whom Peid		Amount 00
Capone's		Description of Expanditure
224 W. Germantown	At.	Lunch Meeting
ty.	Pitate Tib coos k	
Abristown	PA 1940/-	
o Whom Paid		4 11 11 \$ 150.00
Mission Kids	Description of Expenditure	
PO BOX 4/13	State Zip Code (P	Jus 4)
Ry Rua Ball	State Zip Gode (P	
o Whom Paid	V / · · · · · · · · · · · · · · · · · ·	Amount State Office of the Control o
6 Whole Land		Description of Expenditure
Mailing Address		
lity	State Zip Code (F	Plus 4)
	-	Amount
o Whom Paid		Amount \$
Mailing Address		Description of Expenditure
	State Zip Code 0	Direct Al
Sity	State Zip Code U	
		Amount
To Whom Paid		Description of Expenditure
Mailing Address		Description of Expanditure
City	State Zip Code (P(us 4)
		- I - I - I - I - I - I - I - I - I - I
To Whom Pald		Amount \$
		Description of Expenditure
Mailing Address		
Сну	State Zip Code	(Plus 4)
		Amount Amount
To Whom Pald		\$
Malling Address		Description of Expenditure
City	State Zip Code	(Plus 4)
Unit,		-
		PAGE TOTAL Sover Page, Item D. \$206.46
Enter Grand Total of Expenditures	on Page 1 Report C	lover Page, Item D. # \$ 7.06 46

SCHEDULE IV STATEMENT OF UNPAID DEBTS

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

ame of Filing Committee or Candidate		F	Reporting	Period	/ / /
Friends of Mark Levy			From _	1/1/1	/ To 5/2/1/
TIENOS OF THAT THE					
me of Creditor					Outstanding Balance of Debt
	DATE	MG.	DAY	YEAR	
ailing Address	DEBT INCURRED				
iy .		State	Zip Code	(Plus 4)	
ascription of Debt	<u>.</u>			·····	
eme of Creditor					Outstanding Balance of Debt \$
lailing Address	DATE	MO.	DAY	YEAR	
	DEBT INCURRED	Erasa I	7in Code	(Plus 4)	
ity		State	21p CO06	-	
Jescription of Debt				<u></u>	
					Outstanding Balance of Deb
lame of Creditor					S
Mailing Address	DATE DEBT	MO.	DAY	YEAR	
	INCURRED	State	Zin Code	e (Plus 4)	
Sity		3.2.0	2.,5 000	_	
Description of Debt					
				···	Outstanding Balance of Deb
ame of Creditor					\$
Mailing Address	DATE DEBT	MO.	DAY	YEAR	The second secon
Sity	INCURRED	State	Zip Cod	e (Plus 4)	
			<u> </u>		
Description of Debt					
Name of Creditor		-		$\overline{}$	Outstanding Balance of Deb
Canina or Gradico.		T	1		\$
Mailing Address	DATE DEBT	MO.	DAY	YEAR	
City	INCURRED	State	Zip Coo	ie (Plus 4)	
					Commence of the Commence of th
Description of Debt					
				<u>-</u> -	
Name of Creditor	DATE	. 100	may	VEAR	\$
Name of Creditor	DATE DEBT INCURRED	МО	, QAY	YEAR	s
Name of Creditor Mailing Address		- MO		YEAR	
Name of Creditor Mailing Address City	DEBT				
Name of Creditor	DEBT				
	DEBT	State	Zip Cod	de (Plus 4)	