CAMPAIGN FINANCE REPORT

PAGE 1 OF

Filer Identification	legible. It	may be typed or printed	in blue or black	ink.)		
Number: $45 - 0678917$	Report Filed By:	A WENT		2 3.		
Name of Filing Committee, Candidate or Lobbyist: Fyilands of MOON H	101					
142 E. Main St		· · · · · · · · · · · · · · · · · · ·				
Carsdale Carsdale		State: PA	1944	- 2579		
TYPE OF COMPANY 1. AND PRIDA		POST PROMANY	ANEXO DE LA COMPANION DE LA CO	Yes N-		
place X to PRE-ELECTION PRE-ELECTION		30 DAY B. FOST BLECTION	TERMINATION BEPORTS			
the right of report type) ANNUAL 7. YEAR 2011		FILING METHOD		DISKETTE		
Name of Office Sought by Cendidate:		DATE OF ELECTION	Number Code	1 Rep 46		
	T for across	7 17 120 1	1020 11	STRUCTIONS FOR CODES		
Summary of Receipts and Expenditures from:	To	6 6 20]				
A. Amount Brought Forward From Last Report	8	1416.00		:		
B. Total Monetary Contributions and Receipts (From Sched	dule I) \$	2200 . 00	7 35	291		
C. Total Funds Available (Sum of Lines A and B)	\$	10216.00		 -		
D. Total Expenditures (From Schedule III)	\$	14-85.00				
E. Ending Cash Balance (Subtract Line D from Line C)	\$	8.731 .00		- ≘		
F. Value of In-Kind Contributions Received (From Schedul	le II) \$	-0,12 1 0(L	-	THOUSE A		
G. Unpaid Debts and Obligations (From Schedule IV)	\$	0		<u>.</u> O		
AF	FIDAVIT S	ECTION		0		
PART I THE SEA PROPERTY TO SEA TO SERVICE SHEET TO	FOE AT this					
I swear (or affirm) that this report, including the attached schedule correct and complete.	es, on paper i	or computer diskette, are to	the best of my know	vledge and belief true,		
Sworn to and subscribed before me this			. 2/0			
19y of June 20 M	CTARIA SI	ALKONET	100			
Whates	JOIGIN HAP	HN Low ignature	of Person Submitting	Report		
My commission expires Signature My Commission	P MONGO	MERY COUNTY	Printed Name			
MO. DAY YR.		Area Code	47-05			
				stephone Number		
I swear (or affirm) that to the best of my knowledge and belief thi (P.L. 1333, No. 320) as amended.	Committe	ne se decenta	1.34.34.1247.12			
	a pontice: co	ommittee has not violated	any provisions of the	Act of June 3, 1937		
Swarn to and subscribed before me this NOTARIAL STAL						
Notice and Signature of Condition						
Signature My COMMISSION MONTG PMERY COHMY 100 n Hm						
My commission expires 5	pires Dec	18. 30 62	Printed Name 222-84	17		
MO. DAY YR.		Area Code		ieplone Number		

Department of State

Bureau of Commissions, Elections and Legislation 210 North Office Building ● Harrisburg, PA 17120-0029 ● (717) 787-5280

en derenge gen, in die der Steine 2018. Die 1900 der 190

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Detailed Summary Page		
Name of Filing Committee or Candidate Friends of Moon Ahn	Reporting Per From5	1 /20 14. 6/6/20 11
1. University of the color of the same sources		
TOTAL for the Reporting Period		
2. CONTRIBUTIONS SUCCETO \$250.00 FROM PART A AND PART		
Contributions Received from Political Committees (Part A)		
All Other Contributions (Part B)		s
TOTAL for the Reporting Period	j (2)	\$
3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		
Contributions Received from Political Committees (Part C)	i de air aguil (1.1.2.4 da da da	\$
All Other Contributions (Part D)	,	\$ 8800
TOTAL for the Reporting Period	l (3)	\$ 8800
是一个人,我们就是一个人的人,我们就是一个人的人的人,我们就是一个人的人。 第一个人的人们是一个人的人们是一个人的人们是一个人们的人们的人们的人们的人们的人们们们的人们们们们们们们们们们们们们们们们们		
TOTAL for the Reporting Period		\$
TOTAL MONETARY CONTRIBUTIONS AND TECHNICAL		
TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)		\$ 8800

PART D **ALL OTHER CONTRIBUTIONS**

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	Reporting Period
Friends of Moon Ahn	From 5/3/201/To 6/6/20
Full Name of Contributor	DATE
Mailing Address Mailing Address	5 19 2011 \$ 500
Sty Hoover Rd	S
Blue Ball State Zip Code Plus 1	The second secon
Employer Name	Occupation
mployer Mailing Address/Principal Place of Business Inc.	
	la., PA 19123
Mailing Address In Chang	5 19 2011 \$ 500
7600 Tookany (veek Kwy	\$
Chetterkan State /Zip Code (Plus 4)	
1919/91 100119	Occupation
mplayer Mailing Address/Principal Place of Business 7600 Took any Creek Pkwy	Chairman & Board
Il Name of Contributor	, Chetenham, PA 19012
Wook H- Naw	5 11 2011 \$ 500
50/ Sherwood Mills Ct	\$
Sandy Spring State Zip Code (Pius 4) Dioyer Name State ND 20860	\$
FAIVURY FISHET COPURATION DIDOYER Mailing Address/Principal Place of Business	Occupation
414 Hanserfield DV. # 203, Roc	Vice fresidet
Name of Contributor	kville, MD 20850
ling Address	6 1 2011 \$ 3,000
(948 Mairemont Dr (110) + State Zip Code (Plus 4)	\$
Walnut CA 91789 -	\$
Lucky Pirture Frame Company, Inc.	General Manager
5207 Downey Rd. Wernon CA	
Name of Contributor Seung W/ Ahn	The same of the sa
ing Address	6 1 2011 \$ 4,000
13148 La Jolla Circle, # 303 A	S A S A S A S A S A S A S A S A S A S A
over Name ICA 90638-	Occupation \$
over Meiling Address/Principel Place of Business	Retired
er Grand Total of Part D on Schedule I, Detailed Summar	y Page, Section 3. PAGE TOTAL
502 (7-99)	S

ALL OTHER CONTRIBUTIONS

PAGE 4 OF 5

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.)

Friends of Moon Ahm	Reporting Period From 5/3/2011 To 6/6/20
Friends of rotton Ann	
Full Name of Contributor	DATE AMOUNT
Duk Soo Kim	6 1 2011 \$ 300
8801 Marchall Rd	\$
State Zip Code (Pius 4)	WAR SOLVE STATE
mploye Name A DOY PH 4038 -	\$
Central Travel Agency Inc.	Occupation Medilen
1925 W. Cheltenham Ave. Elkins	Part, PA (9027
uli Name of Contributor	S S S S S S S S S S S S S S S S S S S
eiling Address	AND THE PARTY OF T
ity	\$
State Zip Code (Plus 4)	AMOTH SUCKYES SEVERAL
mployer Name	Occupation
Mallin Mallin Advantage	
mployer Mailing Address/Principal Place of Business	
ull Name of Contributor	機能で産業を行くて機能をより、速
	\$
lailing Address	MON POLY EVENT
State Zip Code (Plus 4)	
mployer Name	\$
	Occupation
mployer Mailing Address/Principal Place of Business	
III Name of Contributor	20 JUNE 20 V EN 20 S
eiling Address	AND A ROAD BY AND BY
ty State 7 in Code (2) at	\$
State Zip Code (Plus 4)	S S
nployer Name	Occupation
ployer Mailing Address/Principal Place of Business	
II Name of Contributor	老 ,秦朝《净报》引
	\$
iling Address	20 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
State Zip Code (Plus 4)	
-	\$
ployer Name	Occupation
ployer Mailing Address/Principal Place of Business	
nter Grand Total of Part D on Schedule I, Detailed Summar	PAGE TOTAL
NET UTANG LOTAL OF PART !} AN SCHAMMA L DAMANA C	

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period
Friends of Moon	Ah	1	From 5/3/2011 To 6/6/2011
Pliner Solution, Inc			Mo DAY YEAR Amount \$ 750
2300 Conjuter Ave, #	J-9	52	Description of Expenditure
Willaw CTrove	State	Zip Code (Plus 4) 1909 0 - 174	
Clows Advertising,	The		MO DAY YEAR Amount \$ 189
Mailing Address (92) Valley Forge Ro	ad		Description of Expenditure Mana 5 Card 5
Worcester	PA	Zip Code (Plus 4)	
Blue of America			5 19 (1 \$) 8
Mailing Address P-0, Box 25118 City			Description of Expanditure Check book
Tauna	State	Zip Code (Plus 4) 33622-5119	8
Mailing Address America			5 3 1 1 \$
City PO Box 25118			Marth & Minterage Fel
Tanga	State	33622 - 5118	
To Whom Paid			Mo. CAY YEAR Amount
Mailing Address			Description of Expenditure
City	State	Zip Code (Plus 4)	
To Whom Paid	•		4 no Amount
Mailing Address		······································	Description of Expenditure
City	State	Zip Code (Plus 4)	
To Whom Paid		_	Company of the compan
			Amount \$
Mailing Address			Description of Expenditure
City	State	Zip Code (Plus 4)	
To Whom Paid			M.O. C.
Mailing Address			Description of Expenditure
City	State	Zip Code (Plus 4)	
			PAGE TOTAL
Enter Grand Total of Expenditures on Pag	je 1, f	Report Cover Pa	age, Item D. \$ 1495