

LATE CONTRIBUTIONS - 24 HOUR REPORT

Name of Filing Committee or Candidate Friends of Jenny Brown	File Identification Number 2011185
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Full Name of Contributor	DATE RECEIVED		
	MO	DAY	YEAR
Harry R. Halloran, Jr.	10	26	2011
Mailing Address 100 Four Falls Corporate Center, Suite 215	Amount \$ 500.00		
City West Conshohocken State PA Zip Code (Plus 4) 19428			
Allan M. Collaunt	10	26	2011
Mailing Address 907 Great Springs Road	Amount \$ 500.00		
City Rosemont State PA Zip Code (Plus 4) 19018			
	Amount \$		
	Amount \$		
	Amount \$		
	Amount \$		
	Amount \$		
	Amount \$		
	Amount \$		
	Amount \$		

Name of Person Submitting Report: Ross Weiss
 Contact Phone Number: (610) 941-2361
 Email Address: rweiss@cozen.com

RECEIVED
 OCT 27 A 8:38
 OFFICE OF
 WATER SERVICES
 MONTG. CO. PA
 Date of Report: 10/26/2011

LATE CONTRIBUTIONS - 24 HOUR REPORT

Name of Filing Committee or Candidate <i>Friends of Jenny Brown</i>	Filer Identification Number <i>2011185</i>
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		DATE RECEIVED			
Full Name of Contributor		MO	DAY	YEAR	
<i>Richard M. Brown</i>		<i>11</i>	<i>3</i>	<i>11</i>	
Mailing Address <i>2 Gunning Lane</i>		Amount \$ <i>10,000-</i>			
City <i>Gladwyne</i> State <i>PA</i> Zip Code (Plus 4) <i>19035</i>					
<i>Richard M. Brown</i>		<i>11</i>	<i>3</i>	<i>11</i>	
Mailing Address <i>2 Gunning Lane</i>		Amount \$ <i>100,000-</i>			
City <i>Gladwyne</i> State <i>PA</i> Zip Code (Plus 4) <i>19035</i>					
<i>William A. Graham IV</i>		<i>11</i>	<i>3</i>	<i>11</i>	
Mailing Address <i>20 Conestogoken State Road</i>		Amount \$			
City <i>Gladwyne</i> State <i>PA</i> Zip Code (Plus 4) <i>19035</i>					
Full Name of Contributor					
Mailing Address		Amount \$			
City State Zip Code (Plus 4)					
Full Name of Contributor					
Mailing Address		Amount \$			
City State Zip Code (Plus 4)					
Full Name of Contributor					
Mailing Address		Amount \$			
City State Zip Code (Plus 4)					
Full Name of Contributor					
Mailing Address		Amount \$			
City State Zip Code (Plus 4)					
Full Name of Contributor					
Mailing Address		Amount \$			
City State Zip Code (Plus 4)					

Name of Person Submitting Report: *Ross Weiss*
 Contact Phone Number: *(610) 941-2361*
 Email Address: *rweiss@cozen.com*

RECEIVED
 2011 NOV - 3 P 4: 22
 OFFICE OF
 NOTER SERVICE
 MONTGOMERY COUNTY PA

Date of Report: *11-3-11*

