### CAMPAIGN FINANCE REPORT

PAGE 1 OF (COVER PAGE)

Filer Identification Number:	2011185	Report Filed By:		EA-A-	BATE !	cok	ANTEE I	2. X 1.6	anyisti 3.
Name of Filing Com	nittee, Candidate or Lobbyist:		-		758Ppppppep	#11016#15#			
Street Address:	Friends	of Jenny B	rown						
	РО ВОх 80	00							
City:	10 BOX 80	00		State:		Zip Co	de:	·	
		ohocken		PA			19428	- n:	800
TYPE OF		nie AY     2.		7AV	3.	AMEND	MENT		
REPORT	4. 117.00	BINARY 5.		ST PHIM	CONTRACTOR OF THE PARTY OF THE	HEPORT			X
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the right of report type)	ANNIEAL 7. YEAR	1	Hcji	VG MET CHECK	ilod II		#MAN		
Name of Office Soug			10000	Control of the Contro	- 一一一一一一一一	PAP			KETTE
Traine of Office Body	in by Candidate:		D 数据	ATE OF	ELECTION	District Number	Office Code	Party Code	County
Montgomery (	County Commissioner		1					REP	46
<del>-</del>	. ,			. 00	2011		(SEE INST		FOR CODE
<b>.</b>									ONCYHUL
Summary of R and Expenditur	eceipts								-11.039 881 83-71
· · · · · · · · · · · · · · · · · · ·		2011 To	<u> </u>	28	2011		_	<u>~3</u>	<del></del>
	t Forward From Last Report	\$		1,597.	.52		Ò		
	Contributions and Receipts (From S	Schedule I) \$	14:	3,885.	.00	$\geq$	교유	DEC	
C. Total Funds Ava	ilable (Sum of Lines A and B)	\$	145	5,482.	.52	G	NEW TO	1	
D. Total Expenditu	es (From Schedule III)	\$		2,000.		C		σ.	=
E. Ending Cash Bal	ance (Subtract Line D from Line C)	) \$		3,482.	.52		" Y 1	<u> </u>	RECEIVEI
. Value of In-Kin	d Contributions Received (From Sc	hedule II) \$		0.	00	ز آ		) -6 A II: 03	$\bigcirc$
G. Unpaid Debts an	d Obligations (From Schedule IV)	\$	110	99000	000	<b>√</b>		w	
		AFFIDAVIT S	SECTIO	N					
283年[[]][[]][[]][[]]		an exercise of the first	18 4 (	Lindralit	a estate				
l swear (or affirm) th correct and complete.	at this report, including the attached sci	hedules, on paper	or comp	outer disk	ette, are to t	he best of	my knowle	dge end	elief true,
Sworn to and subser	bed before me this		1	(			/ //		
5th day of	December	20 //		1					
	. (1/				Signature of	Person St	bmitting R	eport	/
- A	Signature NOTARIAL SEAL	<del></del>		R	oss Weis				
My commission expi					,	rinted Nam 2.1		2261	
	MO. Notary Public YR.			Area Cod	le .	D:	0-941- lytime Tele	2301 phone Nur	nber
NGA WALES	CLAL ASSESSMENT AND PARTY OF THE PARTY AND		HUSSA LEGIST	December 1	1 FILLEWING PARKET				
swear (or affirm) the	it to the best of my knowledge and beli	11111	committee	lidate si	Alk alon he				
	• • •	<b>F</b>	***************************************		- Violated an	y provision	is of the A	ct of June	3, 1937
Sworn to and subscri	bed pergre me this			( )	17/	B			
day of	~ nunuu	20_//_		$\rightarrow \not$	<i>7001</i>	1/1	11		
	worknocke	ļ			Signate enny Bro	ure of Can	didate		
	NOTARIAL SEAL		*			wii rinted Nan	10		
()	- TALLER OF ME								
My commission expi		<b>^</b> [.]					0-526-1		
My commission expi	MO. DA NONORK. W CONSHOHOCKEN BORD, MON	TOMERY CATT	-	Area Cod	•		0-526-] ytime Tele		ber

Campaign Finance Report (NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat Number :	ion	201118	35			Report		CANDI	DATE	CO	MMITTEE	✓	LOE	BYIST	
Name of Filing (	Committee, C	andidate	e or Lob	byist:			<del></del>	nny Brow	'n		77.54 7.54	· <u>J</u>			<u> </u>
Street Address:	РО Вох	800			<b>-</b>			·							
City:	West Co	onshohoo	cken					State:	PA		Zip Co	de:	19428-	-800	·
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR	Y 1. Y		ND FRIDA RE-PRIMA		2.	30 D POST	AY -PRIMARY		3.	AMEND REPORT		Yes	No	Y
(place X to the right of	6TH TUESDA PRE-ELECTIO	N .	₽	nd frida Re-elect		5.	30 D POST	AY ;:ELECTION	V	5. X	TERMIN REPORT		Yes	No	~
report type)	ANNUAL RE	PORT 7	. <b>Y</b>	еаг 2011				NG METHO CHECK O			PARER		<b>\</b>	DISKE	TTE
Name of Office S	Sought by Ca	ndidate:	:					DATE O	F ELEC	TION	District Numbe			rty Code	County Code
								MO	DAY	YEAR	-2		RE	Р	46
	•							11	8	3 20	11	(SEE	INSTRUCT	IONS FOR C	ODES)
Summary of Expenditures		nd	MO .	DAY	YEAR	· ·	_	МО	DAY	YEAR	, E	OR OF	ICE US	E ONLY	
A. Amount Bro		d From I	10	<u> </u>	201	1 <b>T</b>	·	11	21	4					
B. Total Monet					n Schedu	ule I)	\$			1597.5 143885.0					
C. Total Funds		·	<u> </u>				\$			45482.5	52				
D. Total Expen	ditures (Froi	m Sched	ule III)				\$		1	42000.0	0				
E. Ending Cash	Balance (Su	btract L	ine D Fr	om Line	C)		\$			3482.5	2				
F. Value Of In-	Kind Contrib	utions R	eceived	(From S	chedule	II)	\$			0.0	0				
G. Unpaid Debi	ts And Obliga	ations (F	rom Sch	nedule IV	<b>'</b> )		\$		1	10000.0	0				
					•			CTION							
PART I - If this is	and the second s	A.c. b. o. San intropi	Resemble 1	Charles of The Constitution	St. T wide. 424.7	areac.	Ambigant.		i kana wastanbari				eth the	A Section of A	₹¥#
I swear (or affirm) correct and comple	) that this repo ete.	ort, includi	ing the al	tached sci	hedules fi	iled on 1	paper	or by electi	ronic med	lium, are i	o the best o	of my ki	10wledge	and belie	of , true
Sworn to and subs	cribed before of day of	me this	2	0						Signat	ure of Perso	on Subm	itting Re	port	
	- s	ignature					-				Pri	nted Na	me		
My Commission Ex	kpires						_	•			Ema	əil			
	МО		DAY		YR				Area	Code	Daytir	ne Tele	phone N	umber	
Part II- If this is	ari (operivo)	à cạndlờ	atels au	thorized	Commit	tee, C	ndid	ate shall	sign her			Majoryan Majoryan	4,000	inmediate, or y	
I swear (or affirm) No 320) as amende		st of my i	knowledg	e and beli	ef this po	olitical	comm	ittee has n	ot violate	d any pro	visions of th	ne act o	f June 3,:	1937 (P.L.	. 1333,
Sworn to and subsc	ribed before m day of	e this	2	0							Signature	of Cand	lidate		
	<del></del>						•				Print	ed Nam	e		
My Commission Exp	_	ature					-				Ema	ail		<del></del>	
	P	10	DAY		YR		•		Area C	ode		aytime	Telepho	ne Numbe	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period					
Friends of Jenny Brown	From:	10/25/2	<u>011</u> To:	11/28/2011			
JUnitemized Contributions Received - \$ 50.00 or Less Per Contributor							
TOTAL for the Reporting	Period	(1)	\$	0.00			
·· Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)		To facilities I designed a second	A STANDARD COMMAND A STANDARD COMMAND				
Contributions Received From Political Committees (Part A)			\$	0.00			
All Other Contributions (Part B)			\$	635.00			
TOTAL for the Reporting	Period	(2)	\$	635.00			
Contributions Received Over \$250.00 (From Part C and Part D)		and the state of t					
Contributions Received From Political Committees (Part C)			\$	0.00			
All Other Contributions (Part D)			\$	143250.00			
TOTAL for the Reporting	Period	(3)	\$	143250.00			
Cother Receipts, Refunds, Interest Earned, Returned Checks); Etc. (From Part E)							
TOTAL for the Reporting	Period	(4)	\$	0.00			
Total Monetary Contributions and Receipts During this Reporting Period (Add and totals from Boxes 1,2,3 and 4; also enter this amount on Page 1, Report Cover Page 1, Report Cover Page 2, Report Cover Page 3, Report Cove	d enter an ge, Item B	nount .)	\$	143885.00			

#### 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.

Name of Filing Committee	Name of Filing Committee or Candidate Re			Reporting Period						
			From:		To:					
,				DATE			AMOUNT			
Full Name of Contributing Co	ommittee		Mo	DAY	YEAR					
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)								
	<u> </u>		<u>l</u>	<u> </u>	L					

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

PAGE TOTAL 0.00

### ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

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

(Exclude contributions from political committees reported in Part A)

Name of Filing Con	Name of Filing Committee or Candidate			Reporting Period						
Friends of Jenny B	rown			From:	10/25/	<u>′2011</u> T	0:	11/28/2011		
					DATE			AMOUNT		
Full Name of Contribu	utor			MO	DAY	YEAR				
				2007 2007 2007						
Mailing Address	202 Yorktown Place	•					\$	35.00		
City Berwyne		State	Zip Code (Plus 4)	11	16	2011				
		PA	19312							
Full Name of Contribu										
Nelson J. Brown		МО	DAY	YEAR						
Mailing Address 6	illing Address 6 Dover Circle						\$	100.00		
City Plymouth		State	Zip Code (Plus 4)	11	3	2011				
		MA	02360							
Full Name of Contribu	tor						-			
Thomas A. Allen				MO	DAY	YEAR				
Mailing Address 1	433 Waverly Road				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		\$	250.00		
City Gladwyne		State	Zip Code (Plus 4)	11	3	2011				
		PA	19035							
Full Name of Contribut	tor			Z - Landing ortho	The second secon					
Howard A. Cohen				MO	DAY	YEAR				
Mailing Address 34	4 Derwen Road			<u> </u>	<u></u>		\$	250.00		
City Bala Cynwyd	[1	State	Zip Code (Plus 4)	10	26	2011				
		PA	19004							
						<del>-</del>	-			

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

**PAGE TOTAL**\$ 635.00

#### 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 from Over \$250.00 in the reporting period.

Name of Filing Committee	me of Filing Committee or Candidate			Reporting Period							
			From:			То:					
				DA	\TE		A	MOUNT			
Full Name of Contributing	g Committee			МО	DAY	YEAR					
Mailing Address			****				\$	0.00			
City	State	Zip Code	(Plus 4)								
					<u> </u>		<u></u>	PAGE TOTAL			
Enter Grand Total of Pa	art C on Schedule I, Detaile	ed Summary Pa	ge, Secti	on 3.			\$	0.00			

### ALL OTHER CONTRIBUTIONS

**OVER \$250.00** 

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

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

lame of Filing Committee or Candidate										
Name of Filing Committee or Candidate				Rep	orting Pe	riod				
Friends of Jenny Brown				Fro	m:	10/25/2	<u>2011</u> T	o:	11	/28/2011
	- · · · · · · · · · · · · · · · · · · ·				D	ATE			AMOL	JNT
Full Name of Contributor					111. 1451.05 - 1. T.	det egglis-	7.5	T		
Richard N. Brown					MO	DAY	YEAR			
Mailing 2 Gunning Lane				· <u></u>		***************************************		4	<b>,</b>	10000.00
City Gladwyne	State	Zi	p Code (Plus	4)	11	3	201	ı İ		
	PA	PA 19035						i		
Employer Name Northwestern Mutual					Occupat		Vealth	Mana	gement	Advisor
Employer Mailing Address/Principal Plac Business	Employer Mailing Address/Principal Place of City Business					State		Zip	Code (P	lus 4)
1818 Market Street, Suite 3010 Philadelph					PA 19103					
Full Name of Contributor							2	1		
Richard N. Brown					МО	DAY-	YEAR			
Mailing 2 Gunning Lane								\$	•	100000.00
City Gladwyne	State	Ziį	Code (Plus	4)	11	3	2011			
	PA	19	035							
Employer Name Northwestern Mutual					Occupation Wealth Management Advisor					
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip	Code (P	lus 4)
1818 Market Street, Suite 3010			Philadelph	ia		PA		19	103	
Full Name of Contributor					- 1980 m. 1 3 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			T		
William A. Graham IV				!	МО	DAY	YEAR			
Mailing 828 Conshohocken St	ate Road						i .	\$		5000.00
City Gladwyne State Zip C			Code (Plus	4)	11	3	2011			
PA 19035			035							
Employer Name The Graham Company					Occupation Insurance					
Employer Mailing Address/Principal Place of City					State			Zip Code (Plus 4)		
ne Penn Square Philadel				phia PA 19102						

Full Name of Contributor  Joseph Zebrowitz		МО	DAY	YEAR	galaci Santa Santa Santa					
						1.00				
Mailing Address 510 N. Latches Lane							<b>_</b>	2250.00		
City Merion Station	State	Z	ip Code (Plus 4)	10	28	201	1	2230.00		
	PA	1	9066							
Employer Name Self				Occupa	ltion F	hysicia	 nn			
Employer Mailing Address/Principal Place Business	ce of		City	<u> </u>	State		Zip Code	(Plue 4)		
510 N. Latches Lane			Merion Station		PA		19066	(103 4)		
Full Name of Contributor			<u> </u>	ACTION OF A	On the section of the	Mark I and the same of	13000			
Harry R. Halloran, Jr.				МО	DAY	YEAR				
Mailing Address 100 Four Falls Corpor	rate Center				2.00		\$	500.00		
City West Conshohocken	State	Zi	p Code (Plus 4)	10	26	2011	1			
	PA	19	1428							
Employer Name American Refinancing Group					Occupation Executive					
Employer Mailing Address/Principal Place of City				<u> </u>	State	xccda	Zip Code (	Pius 4)		
Business 100 Four Falls Corporate Center			-					,,,,		
200 Foot Fulls Corporate Center			West Conshoho	ocken	PA		19428			
Full Name of Contributor										
Allan M. Collautt				MO	DAY	YEAR				
Mailing 907 Great Springs Ro	ad						\$	500.00		
City Rosemont	State	Zip	Code (Plus 4)	10	26	2011				
	PA	19	010							
Employer Name Allan Coullautt Associa	otes		· · · · · · · · · · · · · · · · · · ·	Occupat	ion Ex	kecutiv	_ <del></del>			
Employer Mailing Address/Principal Place Business	e of		City	<u> </u>	State		Zip Code (I	Plus 4)		
907 Great Springs Road			Rosemont		PA		19010			
Full Name of Contributor		-		day.	- Webster	E. 2047	7			
John S. Middleton				МО	DAY	YEAR				
Mailing 343 Avon Road Address		•	<u>-</u>		20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Late Comment	\$	25000.00		
City Bryn Mawr	State	Zip	Code (Plus 4)	11	4	2011				
PA 19010										
Employer Name Vertigo Entertainment				Occupati		rtner	<del>-1</del>			
mployer Mailing Address/Principal Place	mployer Mailing Address/Principal Place of City				State		Zip Code (F	Plus 4)		
siness  48 Civic Center Drive  Beverly Hills										

PAGE 8

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

PAGE TOTAL

143250.00

### 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	me of Filing Committee or Candidate			Reporting Period							
			From	:		To:					
				D	ATE		АМ	OUNT			
Full Name				МО	DAY	YEAR	;				
Mailing Address							\$	0.00			
City	State	Zip Code (I	Plus 4)								
Receipt Description	- <u> </u>		<del></del>	<u></u>							
nter Grand Total of Part E o	on Schedule I, Detailed	d Summary Page,	Section	4.	······································		PAG	E TOTAL			
	•						\$ 	0.00			

#### SCHEDULE II

#### 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				<del></del>
•	Repor	ting Per	riod	
Friends of Jenny Brown	From:		10/25/2011 To:	11/28/201
UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS	PER CONT	RIBUTO		
TOTAL for the Reporting		(1)	\$	0.0
IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PA	RTP)			A Company of the Comp
TOTAL for the Reporting I	Period	(2)	\$	0.0
N-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)		\$ W		The second secon
TOTAL for the Reporting F	Period	(3)	\$	0.00
FOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,	(Add and e , Item F.)	enter	\$	0.00

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee	me of Filing Committee or Candidate					Reporting Period					
			From:			То:					
				DATE		АМ	DUNT				
Full Name of Contributor		-	МО	DAY	YEAR						
Mailing Address				15 mg/2		\$	0.00				
City	State	Zip Code (Plus 4)	†								
Description of Contribution	:			<u> </u>		<u> </u>	<del></del>				
Enter Grand Total of Part Section 2.	F on Schedule II, In-Kin	d Contributions Deta	iled Sumi	nary Pag	e,	PAGE	TOTAL				
					\$		0.00				

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or	e of Filing Committee or Candidate					Period			<del> </del>	
				F	rom:		To:			
Eall Name Co. 1						DATE			AMOUNT	
Full Name of Contributor					MO	DAY	YEAR			
Mailing Address		<del></del>						\$		0.00
City	State		Zip Code(Plus 4)							0.00
Employer of Contributor					Occupa	tion	]	<u></u>		
Employer Mailing Address/Prin Business	icipal Place of	City	State		Zip 4)	Code(Plus	Descri	ption of	Contributi	on
Enter Grand Total of Part ( Summary Page, Section 3.	on Schedule II,	In-Kind	Contributions De	etail	ed			<del></del> -	PAGE TO	<b>FAL</b> 0.00
Enter Grand Total of Part ( Summary Page, Section 3.	on Schedule II,	In-Kind	Contributions De	etaile	ed					PAGE TO

## STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate  Friends of Jenny Brown				Reporting Period					
				10/25/	<u> 2011</u>	To:	11/28/201		
To Whom Paid		AMOUNT							
Brown-Castor '11			МО	DAY	EAR.				
Mailing Address PO Box 800	11	3	2011	\$	112000.0				
City West Conshohocken	<b>State</b> PA	Zip Code (Plus 4) 19428	1 1 1						
<b>To Whom Paid</b> Brown-Castor '11		*	<b>医遗</b> 体 1		EAR	<del>- 1 - 1</del>	<del> </del>		
lailing Address PO Box 800			11	4	2011	\$	30000.00		
ity West Conshohocken	State PA	<b>Zip Code (Plus 4)</b> 19428	Description of Expenditure Contribution						
nter Grand Total of Expenditu	res on Page 1, Re	eport Cover Page, Item D		· · · · · ·			PAGE TOTAL		
						\$	142000.00		

### STATEMENT OF UNPAID DEBTS

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

Name of Filing Committee or Candidate Friends of Jenny Brown			Reporting Period						
			m: <u>1</u>	: <u>10/25/2011</u> To:			11/28/2011		
				DATE			Outstanding Balance of Debt		
Name of Creditor Richard N. Brown			MO	DAY	YEAR				
Mailing Address 2 Gunning	) Lane		11	3	2011	\$	110000.00		
<b>City</b> Gladwyne	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19035		Description of Debt Loan to Campaign					
Enter Grand Total of Unp	aid Debts on Page 1	, Report Cover Page, I	tem G.			\$	PAGE TOTAL 110000.00		