

CAMPAIGN FINANCE REPORT

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

Filer Identification Number: 2011185		Report Filed By: CANDIDATE 1.		COMMITTEE 2. X		LOBBYIST 3.	
Name of Filing Committee, Candidate or Lobbyist: Friends of Jenny Brown							
Street Address: PO Box 800							
City: W. Conshohocken				State: PA		Zip Code: 19428 - 0800	
TYPE OF REPORT (place X to the right of report type)	1. 1st WEDNESDAY PRE-PRIMARY	2. 2ND FRIDAY PRE-PRIMARY	3. 30 DAY POST-PRIMARY	AMENDMENT REPORT?	YES	NO	X
	4. 1st WEDNESDAY PRE-ELECTION	5. 2ND FRIDAY PRE-ELECTION	6. 30 DAY POST-ELECTION	TERMINATION REPORT?	YES	NO	X
	7. ANNUAL REPORT	YEAR: YEAR		FILING METHOD (CHECK ONE)	PAPER <input type="checkbox"/> DISKETTE <input type="checkbox"/>		
Name of Office Sought by Candidate: Montgomery County Commissioner				DATE OF ELECTION MO: 11 DAY: 08 YEAR: 2011		District Number	Office Code
						Party Code REP	County Code 46
(SEE INSTRUCTIONS FOR CODES)							
Summary of Receipts and Expenditures from:			MO: 10 DAY: 25 YEAR: 2011	To	MO: 11 DAY: 28 YEAR: 2011	FOR OFFICE USE ONLY	
A. Amount Brought Forward From Last Report		\$		1,597.52			
B. Total Monetary Contributions and Receipts (From Schedule I)		\$		143,885.00			
C. Total Funds Available (Sum of Lines A and B)		\$		145,482.52			
D. Total Expenditures (From Schedule III)		\$		142,000.00			
E. Ending Cash Balance (Subtract Line D from Line C)		\$		3,482.52			
F. Value of In-Kind Contributions Received (From Schedule II)		\$		0.00			
G. Unpaid Debts and Obligations (From Schedule IV)		\$		1100000000			

AFFIDAVIT SECTION

I swear (or affirm) that this report, including the attached schedules, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 5th day of December 2011

Joann Konopka
Signature
NOTARIAL SEAL
JOANN KONOPKA
MO. _____ Notary Public YR. _____
W CONSHOHOCKEN BORO, MONTGOMERY CNTY

Ross Weiss
Signature of Person Submitting Report
Printed Name
610-941-2361
Area Code Daytime Telephone Number

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, No. 320) as amended.

Sworn to and subscribed before me this 5th day of December 2011

Joann Konopka
Signature
NOTARIAL SEAL
JOANN KONOPKA
MO. _____ Notary Public YR. _____
W CONSHOHOCKEN BORO, MONTGOMERY CNTY
My Commission Expires Jul 8, 2012

Jenny Brown
Signature of Candidate
Printed Name
610-526-1614
Area Code Daytime Telephone Number

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

Commonwealth of Pennsylvania

Campaign Finance Report

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

Filer Identification Number : 2011185		Report Filed By :	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST					
Name of Filing Committee, Candidate or Lobbyist: Friends of Jenny Brown										
Street Address: PO Box 800										
City: West Conshohocken			State: PA	Zip Code: 19428--800						
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2011	FILING METHOD () CHECK ONE		PAPER	<input checked="" type="checkbox"/>	DISKETTE		
Name of Office Sought by Candidate:			DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
			MO	DAY	YEAR	-2		REP	46	
			11	8	2011	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:			MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY
			10	25	2011		11	28	2011	
A. Amount Brought Forward From Last Report						\$	1597.52			
B. Total Monetary Contributions And Receipts (From Schedule I)						\$	143885.00			
C. Total Funds Available (Sum Of Lines A and B)						\$	145482.52			
D. Total Expenditures (From Schedule III)						\$	142000.00			
E. Ending Cash Balance (Subtract Line D From Line C)						\$	3482.52			
F. Value Of In-Kind Contributions Received (From Schedule II)						\$	0.00			
G. Unpaid Debts And Obligations (From Schedule IV)						\$	110000.00			

AFFIDAVIT SECTION**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

_____ day of _____ 20 _____

Signature

My Commission Expires

MO DAY YR

Signature of Person Submitting Report

Printed Name

Email

Area Code Daytime Telephone Number

PART II - If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

_____ day of _____ 20 _____

Signature

My Commission Expires

MO DAY YR

Signature of Candidate

Printed Name

Email

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
Friends of Jenny Brown	From: <u>10/25/2011</u> To: <u>11/28/2011</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor		
TOTAL for the Reporting Period	(1)	\$ 0.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)		
Contributions Received From Political Committees (Part A)		\$ 0.00
All Other Contributions (Part B)		\$ 635.00
TOTAL for the Reporting Period	(2)	\$ 635.00

3. Contributions Received Over \$250.00 (From Part C and Part D)		
Contributions Received From Political Committees (Part C)		\$ 0.00
All Other Contributions (Part D)		\$ 143250.00
TOTAL for the Reporting Period	(3)	\$ 143250.00

4. Other 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 enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)		\$ 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 or Candidate	Reporting Period	
	From:	To:
		DATE
		AMOUNT

Full Name of Contributing Committee	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

PART B
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 Committee or Candidate Friends of Jenny Brown	Reporting Period From: <u>10/25/2011</u> To: <u>11/28/2011</u>
--	--

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Isabel P. Johnson							\$ 35.00
Mailing Address 202 Yorktown Place				11	16	2011	
City Berwyne	State PA	Zip Code (Plus 4) 19312					
Full Name of Contributor				MO	DAY	YEAR	
Nelson J. Brown							\$ 100.00
Mailing Address 6 Dover Circle				11	3	2011	
City Plymouth	State MA	Zip Code (Plus 4) 02360					
Full Name of Contributor				MO	DAY	YEAR	
Thomas A. Allen							\$ 250.00
Mailing Address 1433 Waverly Road				11	3	2011	
City Gladwyne	State PA	Zip Code (Plus 4) 19035					
Full Name of Contributor				MO	DAY	YEAR	
Howard A. Cohen							\$ 250.00
Mailing Address 34 Derwen Road				10	26	2011	
City Bala Cynwyd	State PA	Zip Code (Plus 4) 19004					

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 or Candidate	Reporting Period
	From: To:

Full Name of Contributing Committee	DATE			AMOUNT
	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

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 Friends of Jenny Brown	Reporting Period From: <u>10/25/2011</u> To: <u>11/28/2011</u>
--	--

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Richard N. Brown							
Mailing Address 2 Gunning Lane				11	3	2011	\$ 10000.00
City Gladwyne	State PA	Zip Code (Plus 4) 19035					
Employer Name Northwestern Mutual				Occupation Wealth Management Advisor			
Employer Mailing Address/Principal Place of Business 1818 Market Street, Suite 3010			City Philadelphia	State PA	Zip Code (Plus 4) 19103		
Full Name of Contributor				MO	DAY	YEAR	
Richard N. Brown							
Mailing Address 2 Gunning Lane				11	3	2011	\$ 10000.00
City Gladwyne	State PA	Zip Code (Plus 4) 19035					
Employer Name Northwestern Mutual				Occupation Wealth Management Advisor			
Employer Mailing Address/Principal Place of Business 1818 Market Street, Suite 3010			City Philadelphia	State PA	Zip Code (Plus 4) 19103		
Full Name of Contributor				MO	DAY	YEAR	
William A. Graham IV							
Mailing Address 828 Conshohocken State Road				11	3	2011	\$ 5000.00
City Gladwyne	State PA	Zip Code (Plus 4) 19035					
Employer Name The Graham Company				Occupation Insurance			
Employer Mailing Address/Principal Place of Business One Penn Square			City Philadelphia	State PA	Zip Code (Plus 4) 19102		

Full Name of Contributor Joseph Zebrowitz			MO	DAY	YEAR	\$ 2250.00
Mailing Address 510 N. Latches Lane			10	28	2011	
City Merion Station	State PA	Zip Code (Plus 4) 19066				
Employer Name Self			Occupation Physician			
Employer Mailing Address/Principal Place of Business 510 N. Latches Lane		City Merion Station	State PA	Zip Code (Plus 4) 19066		

Full Name of Contributor Harry R. Halloran, Jr.			MO	DAY	YEAR	\$ 500.00
Mailing Address 100 Four Falls Corporate Center			10	26	2011	
City West Conshohocken	State PA	Zip Code (Plus 4) 19428				
Employer Name American Refinancing Group			Occupation Executive			
Employer Mailing Address/Principal Place of Business 100 Four Falls Corporate Center		City West Conshohocken	State PA	Zip Code (Plus 4) 19428		

Full Name of Contributor Allan M. Collaunt			MO	DAY	YEAR	\$ 500.00
Mailing Address 907 Great Springs Road			10	26	2011	
City Rosemont	State PA	Zip Code (Plus 4) 19010				
Employer Name Allan Coullaunt Associates			Occupation Executive			
Employer Mailing Address/Principal Place of Business 907 Great Springs Road		City Rosemont	State PA	Zip Code (Plus 4) 19010		

Full Name of Contributor John S. Middleton			MO	DAY	YEAR	\$ 25000.00
Mailing Address 343 Avon Road			11	4	2011	
City Bryn Mawr	State PA	Zip Code (Plus 4) 19010				
Employer Name Vertigo Entertainment			Occupation Partner			
Employer Mailing Address/Principal Place of Business 9348 Civic Center Drive		City Beverly Hills	State PA	Zip Code (Plus 4) 90210		

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

PAGE TOTAL

\$ 143250.00

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	Reporting Period	
	From:	To:

Full Name	DATE			AMOUNT
	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Receipt Description				

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

PAGE 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 Friends of Jenny Brown	Reporting Period From: <u>10/25/2011</u> To: <u>11/28/2011</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$ 0.00
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, Reports 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	Reporting Period
	From: _____ To: _____

Full Name of Contributor	DATE			AMOUNT
	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Description of Contribution:				
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.				PAGE TOTAL \$ 0.00

**SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00**

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Friends of Jenny Brown	Reporting Period From <u>10/25/2011</u> To: <u>11/28/2011</u>
--	---

To Whom Paid			DATE			AMOUNT
To Whom Paid	MO	DAY	YEAR			
Brown-Castor '11						
Mailing Address PO Box 800			11	3	2011	\$ 112000.00
City West Conshohocken	State PA	Zip Code (Plus 4) 19428	Description of Expenditure Contribution			
To Whom Paid Brown-Castor '11						
Mailing Address PO Box 800			11	4	2011	\$ 30000.00
City West Conshohocken	State PA	Zip Code (Plus 4) 19428	Description of Expenditure Contribution			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 142000.00

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

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