CAMPAIGN FINANCE REPORT

PAGE 1 OF ________(COVER PAGE)

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A Amount Brought Forward From Last Report B. Total Monetary Contributions and Receipts (From Schedule II) \$ 2,000. C. Total Funds Available (Sum of Lines A and B) \$ 2,766,54 D. Total Expenditures (From Schedule III) \$ 2,600.58 E. Ending Cash Balance (Subtract Line D from Line C) \$ 105,98 E. Ending Cash Balance (Subtract Line D from Line C) \$ 105,98 G. Unpaid Debts and Obligations (From Schedule IV) \$ 0 AFFIDAVIT SECTION AFFIDAVIT SECTION AFFIDAVIT SECTION I swear for affirm that this report, including the attached achedules, on paper or computer diskatte, and to the best of my knowledge and belief true, correct and completes. Sworn to and subscribed before me this 30th day of Jamuary 20 12 AFFIDAVIT SECTION Frinted Name Printed Name 247 73-325/ Daytima Telephone Number That I swear for effirm that to the belief April MURRAN adge and belief (PL. 1335, No. 39) a smooth paper, and an approximate this political committee has not violated any provisions of the Act of June 3, 1937 Frinted Name That I swear for effirm that to the belief Notary Public Sworn to and subScribes (Notary Public) Sworn to and subscribe	Summary of Receipts	0//	12312011	4
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Bureau of Commissions, Elections and Legislation

LISA STATEMENTAL Office Building

Harrisburg, PA 17120-0029

(717) 787-5280

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

PAGE 2 OF _______

Detailed Summary Page

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Name of Filing Committee or Candidate Friends of Mark Levy	Reporting Peri	od /	/ то <u>/2/3//201</u> /
WHITE SHEET SON THIS LESS AND HECKET'S - \$40.00 OR FES	PER CONT	RIEN	TOR
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2. CONTRIBUTIONS SECON TO \$250.00 (FROM PART A AND PART	B)		
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All Other Contributions (Part B)		\$	
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All Other Contributions (Part D)		\$	2,000.
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A STANES NE BIRTS & REFUNDS INTEREST EARNED RETURNED	CHECKS) ET	C. íf	ROM PART E
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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.)		\$	2,000.

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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.

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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.)

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Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.							
	Enter Grand Total of Part B on Sch	nedule	, Detailed Summa	ary Pag	ge, Secti	on 2.	1 * <i>U</i>

DSEB-502 (7-99)

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.

riends of Mark		<u>, , , , , , , , , , , , , , , , , , , </u>		DATE		AMOUNT
			· MO	DAY	YEAR	\$
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ling Address			MO.	DAY	YEAR	\$
		Zip Code (Plus 4)	MD.	DAY	YEAR	
	State					\$
			MO.	DAY	YEAR	\$
Name of Contributing Committee			<u> </u>			
iling Address			MO.	DAY	YEAR	\$
	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
У	3(8)					\$
Commission			MO.	DAY	YEAR	\$
I Name of Contributing Committee			MO.	DAY	YEAR	· · · · · · · · · · · · · · · · · · ·
siling Address			: ::::::::::::::::::::::::::::::::::::			\$
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ull Name of Contributing Committee			MO.	DAY	YEAR	4 \$
			- NO	DAY	YEAR	
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••••						
Full Name of Contributing Committee			∴ MO	DAY	YEAR	\$
			⊕ MC). DAY	YEAR	
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Full Name of Contributing Committee			SCINIC	EAST OF DATE	50.50 (0000 5.50)	\$
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Minimia Linniane						
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		_	1			PAGE TOTAL

DSEB-502 (7-99)

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.)

(Exclude contributions			Ret	orting Pe	rigd /	//
Friends of Mark L	(()	W.		rom		<u> то 12/31/2011</u>
Friends of views		/		DATE		AMOUNT
			10.00	BAY OF	YEAR	\$
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nployer Mailing Address/Principal Place of Business						
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			MO	POAY	YEAR	\$
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Mailing Address			мо.	DAY	YEAR	\$
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Employer Mailing Address/Principal Place of Business						
						In or total
				- C4i	0	PAGE TOTAL

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

Part D All Other Contributions over \$250

Name of the Filing Committee Friends of Mark Levy

Reporting Period

From 11/29/11 to 12/31/11

Date

Name

Address

Amount Employer

yer Employers Address 3494 Progress Drive Occupation

12/7/2011 Mike Hinkson

1908 Midfield Ave Feasterville PA 19053 \$2,000.00 PSI

Bensalem PA 19020

Owner

Page Total

\$2,000.00

p.70+14

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.

	ark Levy		From	11/29/11	то 12/31/2
riends of Ma	/				
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SCHEDULE II

PAGE 9 OF 14

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

	NINIBUTIONS RECEIVED VALUE OF \$50	00 OR (ESS.		
	TOTAL for the Reporting Period	(1)	\$	0	
SANDANIA SA	RECEIVED - VALUE OF \$50.01 TO \$250.	oo (FRON	PA	(if i	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
VWW 102 (2) 3.7.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	TOTAL for the Reporting Period	(2)	\$	0	
			1		
SAME AND A SOUTH HERE SIGN I	RECEIVED - VALUE OVER \$250.00 (FROM	I PART C	1		
	TOTAL for the Reporting Period	(3)	\$	0	
			<u></u>		

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Friends of Mark	Lev	4	Fro	om/.	127/1	11 To 12/31/2011
				ATE		AMOUNT
II Name of Contributor			MANIOTH SIE	SAY	YEAR	\$
alling Address			Mo.	JAY S	YEAR	\$
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escription of Contribution:						
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City	State	Zip Code (Fids 4)	3 5)Q 102 (A.			\$
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ull Name of Contributor			MO	DAY	YEAR	*
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Mailing Address			MO.	DAY	YEAR	\$
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Description of Contribution:						
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Mailing Address			∞:MO: ○	DAY	YEAR	*
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City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
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Full Name of Contributor			Nº MO	DAY	SYLAN ?	
Full Name of Contributor						\$
Mailing Address			MO.≪	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MIG.	ÓAY	SYPAR &	\$
		-				
Description of Contribution:			·			
						PAGE TOTAL

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

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niling Address			-∴MØ.⊹	DAY	YEAR.	\$
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						PAGE TOTAL

DSEB-502 (7-99)

SCHEDULE III

STATEMENT OF EXPENDITURES

	PAGE TOTAL PAGE TOTAL
City State Zip Code (Plus	
Mailing Address City State Zip Code (Plus	
To Whom Paid	Description of Expenditure
	Amount
City State Zip Code (Plus	4)
Mailing Address	Description of Expenditure
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Friends of Mark Levy	
me of Filing Committee or Candidate	From 11/29/11 To 12/31/201

Schedule III Statement of Expenditures

Name of the Filing Committee	Reporting Period
Friends of Mark Levy	From 11/2 \$\frac{9}{11}\$ to 12/31/11

Date To Whom Paid 12/12/2011 Redstone 12/13/2011 Courthouse Diner 12/14/2011 Tony A's Pizza 12/16/2011 Redstone 12/17/2011 Lukoil 12/20/2011 Great American Pub 12/20/2011 Petty Cash 12/31/2011 First Niagara	Address Description of 512 W Germantown Pk Plym Mtg PA 19462 Meeting Expens 36 E. Main Street Norristown PA 19401 Meeting Expens 200 W. Ridge Pike Conshohoclen, PA 19428 Meeting Expens 512 W Germantown Pk Plym Mtg PA 19462 Meeting Expens 199 W Germantown Pk Plym Mtg PA 19462 Fuel for politica 123 Fayette Street Conshohocken PA 19428 Annual Holiday 123 Fayette Street Conshohocken PA 19428 Gratuity for Hol 401 Plymouth Rd Plymouth Meeting PA 1946 Bank Fee	se -53.46 se -32.77 se -17.88 se -76.50 al event -19.97 Party -2,300.00
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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			Reporting	Period	/. /.
Friends of Mark Levy			From _	1//29/	11 To 12/31/2011
Name of Creditor					Outstanding Balance of Debt
N / ,4	DATE	138.832.2			\$
Mailing Address	DEBT INCURRED	MO.	DAY	YEAR	
City	THEOMED	State	Zip Code	(Plus 4)	
			_		
Description of Debt					
Name of Creditor					Outstanding Balance of Debt
Tallia of Craditor					\$
Mailing Address	DATE DEBT	MO.	DAY	YEAR	
	INCURRED	State	Zip Code	/Plus 4)	
City		State	Zip Code		
Description of Debt	<u> </u>	l	<u> </u>		
Name of Creditor					Outstanding Balance of Debt
		300000000	agga myskomerodycae		\$
Mailing Address	DATE DEBT	MO.	DAY	YEAR	
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			_		
Description of Debt					
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Name of Creditor					\$
Mailing Address	DATE	MO.	DAY	YEAR	.
	DEBT INCURRED				
City		State	Zip Code	(Plus 4)	
Description of Debt		1	<u> </u>		
Name of Creditor					Outstanding Balance of Debt
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Mailing Address	DATE DEBT	MO	DAY	YEAR	
City	INCURRED	State	Zip Code	(Plus 4)	
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Description of Debt					
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