Commonwealth of Pennsylvania CAMPAIGN FINANCE REPORT

(NOTE: This report must be typed or printed in blue or black ink.) PAGE 1 OF Filer Identification (cover page) Report Number: ---> CANDIDATE 1. Filed By: -> COMMITTEE Name of Filing Committee, Candidate or Lobbyist LOBBYIST Friends of Risa Ferman Street Address 300 E. Moreland Avenue Citv State Zip Code **Hatboro** PA 19040 TYPE OF 6th Tuesday 11 2nd Friday 2 30 Day 3. Amendment REPORT Pre-Primary Pre-Primary YES Post Primary NO X Report? 5.**x** 6th Tuesday 4 2nd Friday 30 Day (place X to 6. Termination Pre-Election Pre-Election Post Election YES the right of Report? NO Х Annual Year report type) Filing Method Report 2012 Paper X Check One --> Diskette Name of Office Sought by Candidate Date of Election District Office Partv County Number Month-Day-Year Code Code **District Attorney** Code OTH REP 46 11-06-12 (see instructions for codes) FOR OFFICE USE ONLY Summary of Receipts Month-Day-Year Month-Day-Year and Expenditures from: > 05-15-12 To 10-22-12 A. Amount Brought Forward From Last Report \$189,540.89 B. Total Monetary Contributions and Receipts (From Schedule I) \$155.53 C. Total Funds Available (Sum of Lines A and B) \$189,696,42 D. Total Expenditures (From Schedule III) \$8,628,69 E. Ending Cash Balance (Subtract Line D from Line C) \$181.067.73 F. Value of In-Kind Contributions Received (From Schedule II) -- 0 -G. Unpaid Debts and Obligations (From Schedule IV) ο. 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, 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 24th day of of Person Submitting Report
Alfred F/ Zollers Signature/ Netarial S Printed Name My commissioned in New L 215 674-2784 tight TWB., Mentgomery Mun 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 20 *[2* Signature of Candidate Risa Vetri Ferman COMMONWEALTH OF THINSY Printed Name commission expuss 215 219-3622 Judith A VICCIO, Notan Audito Area Code Daytime Telephone Number

House March, notary county

Hy Commission Spling and 23/28/5 State - Bureau of Commissions. Elections and Legislation

303 North Office Building - Harrisburg, PA 17120-0029 - (717) 787-5280

Commonwealth of Pennsylvania CAMPAIGN FINANCE REPORT

PAGE 1 OF

(NOTE: This report must be typed or printed in blue or black ink.) (cover page) Filer Identification Report Number: ---> **CANDIDATE** Filed By: -> COMMITTEE LOBBYIST Name of Filing Committee, Candidate or Lobbyist Friends of Risa Ferman Street Address 300 E. Moreland Avenue City State Zip Code Hatboro PA 19040 TYPE OF 6th Tuesday 1. 2nd Friday 2. 30 Day 3. Amendment REPORT Pre-Primary YES Pre-Primary Post Primary NO X Report? 6th Tuesday 4. 5.**x** 2nd Friday 30 Day (place X to 6. Termination Pre-Election Pre-Election YES Post Election NO X the right of Report? Annual Year report type) Filing Method Report Paper 2012 X Diskette Check One --> Name of Office Sought by Candidate Date of Election District Office Partv County Number Month-Day-Year Code Code Code² **District Attorney** OTH REP 46 11-06-12 see instructions for codes) FOR OFFICE USE ONLY Summary of Receipts Month-Day-Year Month-Day-Year and Expenditures from: 05-15-12 10-22-12 To A. Amount Brought Forward From Last Report \$189,540,89 B. Total Monetary Contributions and Receipts (From Schedule I) \$155.53 C. Total Funds Available (Sum of Lines A and B) \$189,696.42 D. Total Expenditures (From Schedule III) \$8,628.69 E. Ending Cash Balance (Subtract Line D from Line C) \$181,067.73 F. Value of In-Kind Contributions Received (From Schedule II) -- 0 --G. Unpaid Debts and Obligations (From Schedule IV) -- 0 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, 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 Signature of Person Submitting Report
Alfred F/Zollers Printed Name My commissiones 215 674-2784 the Harm TWB., Mentgomery bolan 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 Signature of Candidate Risa Vetri Ferman COMMONWEALTH OF THE NEW YOR Printed Name commission exputes: 215 219-3622 Judith A PRECIO, Notary Public. Area Code Daytime Telephone Number - Bureau of Commissions. Elections and Legislation 303 North Office Building - Harrisburg, PA 17120-0029 - (717) 787-5280

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\$155.53

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

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Name of Filing Committee or Candidate	Reporting f	Period	
Friends of Risa Ferman		5-15-12 To 10-22	2-12
1 LINUTENIZED CONTENTS			
1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS \$50.00 OR LE	ESS PER CO	ONTRIBUTOR	<u> </u>
TOTAL for the Reporting	ng Period	(1) 0	
2 CONTRIBUTIONS \$50.04 TO \$550.00 (FROM			
2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART	ГВ)		
Contributions Received from Political Committees (Part A)		0	
All Other Contributions (Part B)		0	
TOTAL for the Reporting	g Period ((2) 0	
3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	<u> </u>		<u> </u>
Contributions Received from Political Committees (Part C)		0	
All Other Contributions (Part D)		0	
TOTAL for the Reporting	g Period ((3) 0	
4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNEI	D CHECKS	ETC (FROM PAR	T E)
TOTAL for the Reporting		(4) \$155.53	<u>- L/</u>

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.)

PART E OTHER RECEIPTS

PAGE	3	OF	6	

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

Name of Filing Committee or Candidate		ļſ	Reporting Period	
Friends of Risa Ferman			From <u>05-15-12</u>	To
Full Name				
Wells Fargo Bank				
Mailing Address Blair Mill & Moreland				
City Horsham	State PA	Zip Code (Plus 4) 19044	Month-Day-Year 06-30-2012	Amount \$30.79
Receipt Description Money Maket Acct Interest			<u> </u>	Ψονιιο
Full Name Wells Fargo Bank				
Mailing Address Blair Mill & Moreland			<u></u>	
City Horsham	State PA	Zip Code (Plus 4) 19044	Month-Day-Year 05-31-2012	Amount \$31.95
Receipt Description Money Maket Acct Interest			<u> </u>	Ψο 1.00
Full Name Wells Fargo Bank				
Mailing Address Blair Mill & Moreland				
City Horsham	State PA	Zip Code (Plus 4) 19044	Month-Day-Year 07-30-2012	Amount \$31.52
Receipt Description Money Maket Acct Interest				
Full Name Wells Fargo Bank				**************************************
Mailing Address Blair Mill & Moreland				
City Horsham	State PA	Zip Code (Plus 4) 19044	Month-Day-Year 08-31-2012	Amount \$31.52
Receipt Description Money Maket Acct Interest				*****
Full Name Wells Fargo Bank			·	
Mailing Address Blair Mill & Moreland				
City Horsham	State PA	Zip Code (Plus 4) 19044	Month-Day-Year 09-28-2012	Amount \$29.75
Receipt Description Money Maket Acct Interest				
Full Name				
Mailing Address		W		
City	State	Zip Code (Plus 4)	Month-Day-Year	Amount
Receipt Description				
Enter Grand Total of Part E on Schedule I, De	tailed Su	ummary Page, Sec	tion 4.	PageTotal \$155.53

SCHEDULE II

PAGE 4 OF 6

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	Reporti	ng Period	
Friends of Risa Ferman	From_	05-15-12	To 10-22-12
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE of	\$50.00 o	r LESS P	ER CONTRIBUTO
TOTAL for the Reporting	ng Period	(1)	0
	<u>, " • • • • • • • • • • • • • • • • • • </u>		
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE of \$50.01 TO \$25	0.00 (FF	OM PAR	TF)
TOTAL for the Reportin	g Period	(2)	0
3. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OVER \$250.00 (F	ROM PA	ART G)	
TOTAL for the Reportin			0
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, Report Cover Page, Item F.)			0

Schedule III STATEMENT OF EXPENDITURES

2.5

Name of Filing Committee or Candidate

ш	PAGE	5	OF _	6	
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\$3,378.69

Reporting Period

Friends of Risa Ferman			From <u>05-15-12</u>	To 10-22-12	
To Whom Paid					
Authorize Net			Month-Day-Year 06-04-2012	Amount \$20.00	
Mailing Address			Description of Ex		
808 East Utah Valley Drive City	State	Tin Code (D) - 4)	Web Site S	ervice Fee	
American Fork	UT	Zip Code (Plus 4) 84003	']		
To Whom Paid Cybersource			Month-Day-Year	Amount	
Mailing Address			06-04-2012	\$59.95	
1295 Charleston Road			Description of Ex		
City Mountain View	State			<u> </u>	
To Whom Paid	CA	94043			
Montgomery Co. District Attorney's Office			Month-Day-Year 06-28-2012		
Mailing Address			Description of Ex	\$2,100.00 penditure	
PO Box 311			Cell Pho	one Bill	
City Norristown	State	Zip Code (Plus 4) 19404			
To Whom Paid		10.04	Month-Day-Year	Amount	
IPAC			07-01-2012	\$325.00	
Mailing Address 3769 Mill Road			Description of Expenditure Dues		
City	State	Zip Code (Plus 4)	Dut	<i>7</i> 3	
Collegeville	PA	19426			
To Whom Paid Pennsylvania Society			Month-Day-Year 07-02-2012	Amount \$50.00	
Mailing Address 808 Bethlehem Pike			Description of Exp	penditure	
City	State	Zip Code (Plus 4)	- Jul		
Erdenheim To Whom Paid	PA	19038			
Brian Miles			Month-Day-Year 07-09-2012	Amount \$263.79	
Mailing Address			Description of Exp		
1330 Longhorn Circle	T		Expense Rein		
City Blue Bell	State PA	Zip Code (Plus 4) 19422			
To Whom Paid	1 2 2 3	10-12.6	Month-Day-Year	Amount	
Cybersource			07-03-2012	\$59.95	
Mailing Address 1295 Charleston Road			Description of Exp Service		
City	State	Zip Code (Plus 4)			
Mountain View To Whom Paid	CA	94043	<u> </u>		
Pioneer Lodge 37			Month-Day-Year 08-06-2012	Amount \$500.00	
Mailing Address			Description of Exp		
PO Box 985 City	State	Zin Code (Div. 4)	Event Ti	ickets	
Bala Cynwyd	State PA	Zip Code (Plus 4) 19004			
Enter Grand Total of Expenditures on Page 1,	Report	Cover Page, Item D).	PageTotal	

Schedule III STATEMENT OF EXPENDITURES

PAGE	6	OF	6
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Name of Filing Committee or Candidate				
			Reporting Period	
Friends of Risa Ferman		ľ	From <u>05-15-12</u>	To <u>10-22-12</u>
To Whom Paid				
Whitpain Twp Republican Comm			Month-Day-Year	
Mailing Address			08-20-2012	\$250.00
Mailing Address 50 High Gate Lane			Description of Ex	
City	T-04-40	T	Event 1	lickets
Biue Beli	State		l)	
To Whom Paid	<u> </u>	19422		
David Freed For Atty Gen			Month-Day-Year	
Mailing Address			09-15-2012	\$5,000.00
P.O. Box 1105			Description of Ex	penditure
City	T 01-10	T=:	Candidate C	ontribution
Harrisburg	State)	
To Whom Paid	PA	17108		
To vynom Paid			Month-Day-Year	Amount
A A - III - A A A				
Mailing Address			Description of Ex	penditure
24	 			
City	State	Zip Code (Plus 4))	
	<u></u> '			
To Whom Paid			Month-Day-Year	Amount
Mailing Address	 -		Description of Ex	penditure
				porializa.
City	State	Zip Code (Plus 4))	
	<u> </u>		′	I
To Whom Paid			Month-Day-Year	Amount
	· 			/ unounc
Mailing Address			Description of Ex	oenditure
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City	State	Zip Code (Plus 4)		
-	l		']	ļ
To Whom Paid			Month-Day-Year	Amount
			Worth Day . Ca.	Amount
Mailing Address			Description of Exp	conditure
			D00011ptio1. 0	Jenailare
City	State	Zip Code (Plus 4)		
			' 【	
To Whom Paid	<u> </u>		Month-Day-Year	Amount
			William Day I Cur	Aniount
Mailing Address			Description of Exp	conditure
			Description of Ex-	Jenuiure
City	State	Zip Code (Plus 4)		
	1	Zip 0000 ()	1	
To Whom Paid			Month-Day-Year	Amount
			William Day 1 Car	Amount
Mailing Address			Description of Exp	anditura
			Description of EVE	enalure
City	State	Zip Code (Plus 4)		
	1	i cip code (i inc i,		
Fried County Takes of Franciskings on Daniel C		2 2 4		PageTotal
Enter Grand Total of Expenditures on Page 1, F	кероп с	Cover Page, Item I	D.	\$5,250.00
			T T	φο, ∠ου.υυ τ