

Commonwealth of Pennsylvania
CAMPAIGN FINANCE REPORT
 (NOTE: This report must be typed or printed in blue or black ink.)

Filer Identification Number: --->		Report Filed By: ->		CANDIDATE ^{1.}	COMMITTEE ^{2.} X	LOBBYIST ^{3.}				
Name of Filing Committee, Candidate or Lobbyist Friends of Risa Ferman										
Street Address 300 E. Moreland Avenue										
City Hatboro			State PA		Zip Code 19040					
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	X
	6th Tuesday Pre-Election	4.	2nd Friday Pre-Election	5. X	30 Day Post Election	6.	Termination Report?	YES	NO	X
	Annual Report	7.	Year	-->	2012	Filing Method Check One -->	Paper	X	Diskette	
Name of Office Sought by Candidate District Attorney				Date of Election Month-Day-Year 11-06-12		District Number	Office Code OTH	Party Code REP	County Code 46	

Summary of Receipts and Expenditures from: >	Month-Day-Year	To	Month-Day-Year	FOR OFFICE USE ONLY
	05-15-12		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)				-- 0 --

OFFICE OF
 VOTER SERVICES
 MONTG. CO. PA
 OCT 25 PM 4:22

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 October 20 12

Judith A. Vecchio
 Notarial Seal
 My commission expires July 23 2015 DAY YR.

Alfred F. Zollers
 Signature of Person Submitting Report
Alfred F. Zollers
 Printed Name
215 674-2784
 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
24th day of October 20 12

Judith A. Vecchio
 Notarial Seal
 My commission expires July 23 2015 DAY YR.

Risa Vetri Ferman
 Signature of Candidate
Risa Vetri Ferman
 Printed Name
215 219-3622
 Area Code Daytime Telephone Number

Commonwealth of Pennsylvania
CAMPAIGN FINANCE REPORT

(NOTE: This report must be typed or printed in blue or black ink.)

(cover page)

Filer Identification Number: --->		Report Filed By: -> CANDIDATE ^{1.}		COMMITTEE ^{2.} X		LOBBYIST ^{3.}					
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Street Address 300 E. Moreland Avenue											
City Hatboro			State PA		Zip Code 19040						
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	X
	6th Tuesday Pre-Election	4.	2nd Friday Pre-Election	5. X	30 Day Post Election	6.	Termination Report?	YES		NO	X
	Annual Report	7.	Year	-->	2012	Filing Method Check One -->	Paper	X	Diskette		
Name of Office Sought by Candidate District Attorney				Date of Election Month-Day-Year 11-06-12		District Number	Office Code OTH	Party Code REP	County Code 46	(see instructions for codes)	
Summary of Receipts and Expenditures from: >			Month-Day-Year 05-15-12		To	Month-Day-Year 10-22-12		FOR OFFICE USE ONLY			
A. Amount Brought Forward From Last Report						\$189,540.89					
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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 October 20 12

Judith A. Vucko
Signature

My commission expires July 23 2015
DAY YR.

Alfred F. Zollers
Signature of Person Submitting Report

Printed Name

215

Area Code

674-2784

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

24th day of October 20 12

Judith A. Vucko
Signature

My commission expires July 23 2015
DAY YR.

Risa Vetri Ferman
Signature of Candidate

Printed Name

215

Area Code

219-3622

Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate Friends of Risa Ferman	Reporting Period From <u>05-15-12</u> To <u>10-22-12</u>
--	---

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS -- \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	-- 0 --

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	-- 0 --
All Other Contributions (Part B)	-- 0 --
TOTAL for the Reporting Period (2)	-- 0 --

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	-- 0 --
All Other Contributions (Part D)	-- 0 --
TOTAL for the Reporting Period (3)	-- 0 --

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period (4)	\$155.53

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.)	\$155.53
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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 Friends of Risa Ferman	Reporting Period From <u>05-15-12</u> To <u>10-22-12</u>
--	---

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				
---	--	--	--	--

Full Name Wells Fargo Bank				
Mailing Address Blair Mill & Moreland				
City Horsham	State PA	Zip Code (Plus 4) 19044	Month-Day-Year 05-31-2012	Amount \$31.95

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 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				
City	State	Zip Code (Plus 4)	Month-Day-Year	Amount
Receipt Description				

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

Page Total
\$155.53

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 Risa Ferman	Reporting Period From <u>05-15-12</u> To <u>10-22-12</u>
--	---

1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE of \$50.00 or LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	-- 0 --

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE of \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	-- 0 --

3. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period (3)	-- 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 --
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Schedule III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Friends of Risa Ferman	Reporting Period From <u>05-15-12</u> To <u>10-22-12</u>
--	---

To Whom Paid Authorize Net			Month-Day-Year 06-04-2012	Amount \$20.00
Mailing Address 808 East Utah Valley Drive			Description of Expenditure Web Site Service Fee	
City American Fork	State UT	Zip Code (Plus 4) 84003		
To Whom Paid Cybersource			Month-Day-Year 06-04-2012	Amount \$59.95
Mailing Address 1295 Charleston Road			Description of Expenditure Service Fee	
City Mountain View	State CA	Zip Code (Plus 4) 94043		
To Whom Paid Montgomery Co. District Attorney's Office			Month-Day-Year 06-28-2012	Amount \$2,100.00
Mailing Address PO Box 311			Description of Expenditure Cell Phone Bill	
City Norristown	State PA	Zip Code (Plus 4) 19404		
To Whom Paid IPAC			Month-Day-Year 07-01-2012	Amount \$325.00
Mailing Address 3769 Mill Road			Description of Expenditure Dues	
City Collegeville	State PA	Zip Code (Plus 4) 19426		
To Whom Paid Pennsylvania Society			Month-Day-Year 07-02-2012	Amount \$50.00
Mailing Address 808 Bethlehem Pike			Description of Expenditure Dues	
City Erdenheim	State PA	Zip Code (Plus 4) 19038		
To Whom Paid Brian Miles			Month-Day-Year 07-09-2012	Amount \$263.79
Mailing Address 1330 Longhorn Circle			Description of Expenditure Expense Reimbursement	
City Blue Bell	State PA	Zip Code (Plus 4) 19422		
To Whom Paid Cybersource			Month-Day-Year 07-03-2012	Amount \$59.95
Mailing Address 1295 Charleston Road			Description of Expenditure Service Fee	
City Mountain View	State CA	Zip Code (Plus 4) 94043		
To Whom Paid Pioneer Lodge 37			Month-Day-Year 08-06-2012	Amount \$500.00
Mailing Address PO Box 985			Description of Expenditure Event Tickets	
City Bala Cynwyd	State PA	Zip Code (Plus 4) 19004		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

Page Total \$3,378.69

Schedule III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Friends of Risa Ferman	Reporting Period From <u>05-15-12</u> To <u>10-22-12</u>
--	---

To Whom Paid Whitpain Twp Republican Comm	Month-Day-Year 08-20-2012	Amount \$250.00
Mailing Address 50 High Gate Lane	Description of Expenditure Event Tickets	
City Blue Bell	State PA	Zip Code (Plus 4) 19422
To Whom Paid David Freed For Atty Gen	Month-Day-Year 09-15-2012	Amount \$5,000.00
Mailing Address P.O. Box 1105	Description of Expenditure Candidate Contribution	
City Harrisburg	State PA	Zip Code (Plus 4) 17108
To Whom Paid	Month-Day-Year	Amount
Mailing Address	Description of Expenditure	
City	State	Zip Code (Plus 4)
To Whom Paid	Month-Day-Year	Amount
Mailing Address	Description of Expenditure	
City	State	Zip Code (Plus 4)
To Whom Paid	Month-Day-Year	Amount
Mailing Address	Description of Expenditure	
City	State	Zip Code (Plus 4)
To Whom Paid	Month-Day-Year	Amount
Mailing Address	Description of Expenditure	
City	State	Zip Code (Plus 4)
To Whom Paid	Month-Day-Year	Amount
Mailing Address	Description of Expenditure	
City	State	Zip Code (Plus 4)
To Whom Paid	Month-Day-Year	Amount
Mailing Address	Description of Expenditure	
City	State	Zip Code (Plus 4)

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

Page Total
\$5,250.00