Commonwealth of Pennsylvania CAMPAIGN FINANCE REPORT

PAGE 1 OF

(cover page) (NOTE: This report must be typed or printed in blue or black ink.) LOBBYIST 1. COMMITTEE Report CANDIDATE Filer Identification Filed By: -> Number: ---> Name of Filing Committee, Candidate or Lobbyist Friends of Risa Ferman Street Address 300 E. Moreland Avenue Zip Code State 19040 PA **Hatboro Amendment** X NO 3. 30 Dav YES 2. 2nd Friday 6th Tuesday Report? Post Primary TYPE OF Pre-Primary Pre-Primary Termination Report? 6. **X** X REPORT NO 2nd Fridav Pre-Election 30 Day YES 5. 6th Tuesday 4. Post Election (place X to Pre-Election Diskette Filina Method X Paper Year the right of 7. Annual 2012 Check One --> report type) County Partv Report Office District Date of Election Code Name of Office Sought by Candidate Code Code Number Month-Day-Year REP 46 OTH (see instructions for codes) **District Attorney** 11-06-12 FOR OFFICE USE ONL Month-Day-Year Month-Day-Year Summary of Receipts 😞 11-26-12 10-23-12 To and Expenditures from: \Box \$181,067.73 A. Amount Brought Forward From Last Report B. Total Monetary Contributions and Receipts (From Schedule I) \$26.94 \$181,094.67 C. Total Funds Available (Sum of Lines A and B) \$883.00 D. Total Expenditures (From Schedule III) \$180,211.67 E. Ending Cash Balance (Subtract Line D from Line C) F. Value of In-Kind Contributions Received (From Schedule II) -- 0 --- 0 G. Unpaid Debts and Obligations (From Schedule IV) 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. and subscribed before me this day of WHITNEY ROBIN DA Signature of Person Submitting Report Alfred F. Zollers Notary Public HORNISH BORD MONIGOMERY My Commission Shipherties 20 Printed Name 674-2784 215 Daytime Telephone Number My commission expires Area Code DA MO 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 an provisions of the act of June 3, 1937 (P.L. 1333, No. 320) as amended. Sworn to and subscribed before me this 20 1 Signature of Candidate NOTELY PUBLIC NORRISTOWN BOROSTOPHERY COUNTY Risa Vetri Ferman **Printed Name** 219-3622 My commission expires ten 26. 215 Daytime Telephone Number Area Code YR. MO

| PAGE 2 OF | 5 |
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SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

| Reporting Period | 1 | | | |
|--|---|--|--|--|
| From 10-23-12 | To <u>11-26-12</u> | | | |
| | | | | |
| DIFES DED CONTR | IBUTOR | | | |
| | a a | | | |
| rting Period (1) | -0- | | | |
| | | | | |
| ART B) | | | | |
| | - 0 | | | |
| | -0- | | | |
| All Other Contributions (Part B) TOTAL for the Reporting Period (2) | | | | |
| | | | | |
| T D) | | | | |
| 1 0) | -0- | | | |
| | _ - 0 | | | |
| | | | | |
| orting Period (3) | - 0 | | | |
| | | | | |
| URNED CHECKS, ET | C. (FROM PART | | | |
| | \$26.94 | | | |
| | | | | |
| | | | | |
| NG | | | | |
| NG Boxes | \$26.94 | | | |
| | From 10-23-12 R LESS PER CONTR Inting Period (1) PART B) Orting Period (2) T D) Orting Period (3) JRNED CHECKS, ET Porting Period (4) | | | |

OTHER RECEIPTS

| PAGE OI | PAGE | 3 | OF | 5 |
|---------|------|---|----|---|
|---------|------|---|----|---|

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. Reporting Period

| rme of Filing Committee or Candidate | | | Repo | rting Period m_ 10-23-12 _ To | 11-26-12 |
|--|-----------|----------------|----------|---|----------------------|
| Friends of Risa Ferman | | | | | |
| ull Name | ··· | | | | |
| Nells Fargo Bank Nailing Address | | | | | |
| Nailing Address Blair Mill & Moreland | T Ctata I | Zin Code (Plus | 4) M | onth-Day-Year A | mount |
| City Horsham | PA | 19044 | ./ | 10-31-2012 | \$26.94 |
| Receipt Description Money Maket Acct Interest | | | | | |
| Full Name | | | <u>,</u> | | |
| Mailing Address | | | | | A |
| City | State | Zip Code (Plus | s 4) N | onth-Day-Year | |
| Receipt Description | | | | | |
| Full Name | | | | | |
| Mailing Address | | | | | |
| City | State | Zip Code (Plu | ıs 4) İ | Month-Day-Year | Amount |
| Receipt Description | | | | | |
| Fuli Name | | | | | |
| Mailing Address | | | | | |
| City | State | Zip Code (Plu | us 4) | Month-Day-Year | Amount |
| Receipt Description | | | | | |
| Full Name | | | | | |
| Mailing Address | | | | | |
| City | State | Zip Code (Pl | lus 4) | Month-Day-Year | Amount |
| Receipt Description | | | | · · · · · · · · · · · · · · · · · · · | |
| Full Name | | | | | |
| Mailing Address | | | | | |
| City | Stat | e Zip Code (P | Plus 4) | Month-Day-Yea | Amount |
| Receipt Description | | | | | |
| Enter Grand Total of Part E on Schedule | I Detaile | d Summarv Pa | age, S | ection 4. | PageTotal \$26.94 |

SCHEDULE II

PAGE 4 OF 5

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

| ame of Filing Committee or Candidate Friends of Risa Ferman | Reporting Period From 10-23-12 | To |
|---|--------------------------------|--------------|
| | | ED CONTRIBUT |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - Y | e Reporting Period (1) | - 0 |
| | | |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE of \$50 | .01 TO \$250.00 (FROM PAI | RT F) |
| | e Reporting Period (2) | -0- |
| TOTAL VALUE OVER | \$250 00 (FROM PART G) | |
| 3. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OVER TOTAL for the | e Reporting Period (3) | - 0 |
| TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING | THIS | |
| REPORTING PERIOD (Add and enter amount totals from and 3; also enter on Page 1, Report Cover Page, Item F.) | Boxes 1, 2, | - 0 - |

Schedule III STATEMENT OF EXPENDITURES

| Schedule III | PAGE_ | 5 | OF | 5 |
|--------------|-------|---|----|---|
| | | | | |

| | | Ren | orting Period | | |
|---|--|---|---|--|--|
| | | | | 11-26-12 | |
| Friends of Risa Ferman Fro | | | | | |
| | | N | onth-Day-Year | Amount | |
| To Whom Paid | | | | \$60.00 | |
| | | D | escription of Expe | enditure | |
| | | | Event 110 | Kets | |
| | Zip Code (Plus | 4) | | | |
| FA | 19401 | - | Month-Day-Year | Amount | |
| To Whom Paid | | | | \$500.00 | |
| ATRO Mailing Address | | | Description of Expenditure | | |
| | | | Eventilic | Kets | |
| | Zip Code (Plus | 4) | | | |
| PA | 13001 | | Month-Day-Year | Amount | |
| | | - 1 | 10-25-2012 | \$ 7.60 | |
| | | | Description of Exp | enditure | |
| | | \rightarrow | Postage S | tanos | |
| | Zip Code (Plus | s 4) | | | |
| PA | 19040 | _ | Month Day Year | Amount | |
| _ | | - [| | \$300.00 | |
| To Whom Paid Montgomery County Republican Committee Mailing Address | | | | enditure | |
| | | | Event Ti | ckets | |
| State | Zip Code (Plus | s 4) | | | |
| PA | 19404 | | | Amarini | |
| | | | Month-Day-Year | \$15.40 | |
| UNITED STATES POSTAL SERVICE Mailing Address | | | | | |
| | | | Postage S | stamps | |
| State | Zip Code (Plu | s 4) | | | |
| PA | 19040 | | | A | |
| To Whom Paid | | | | Amount | |
| 10 WHOTH F and | | | Description of Ex | penditure | |
| | | | Becomparent et and | | |
| State | Zip Code (Plu | is 4) | | | |
| | | | | Assessment | |
| | | | Month-Day-Year | Amount | |
| | | | Description of Ex | penditure | |
| | | | Doodiplion of Ex | • | |
| State | Zip Code (Plu | ıs 4) | | | |
| | | - | | LAmount | |
| | | | Month-Day-Year | Amount | |
| To Whom Paid | | | Description of Ex | penditure | |
| | | | | • | |
| State | Zip Code (Plu | us 4) | | | |
| | <u> </u> | | | DogoTetal | |
| 1, Rep | ort Cover Page, | , Iten | n D. | PageTotal \$883.00 | |
| | State PA State Zip Code (Plus 1904) State PA Zip Code (Plus 1904) State PA Zip Code (Plus 1904) State PA Zip Code (Plus 19404) State Zip Code (Plus 19404) State Zip Code (Plus 1904) State Zip Code (Plus 1904) State Zip Code (Plus 1904) | State Zip Code (Plus 4) PA Zip Code (Plus 4) State PA 19001 State PA 19040 State PA 2ip Code (Plus 4) 19040 State PA 19040 State PA 19040 State Zip Code (Plus 4) 19404 State Zip Code (Plus 4) 19404 State Zip Code (Plus 4) 19040 State Zip Code (Plus 4) 19040 | State Zip Code (Plus 4) PA To-27-2012 Description of Expression of Expressio | |