

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: | Report Filed By: | CANDIDATE ^{1.} | COMMITTEE ^{2.} <input checked="" type="checkbox"/> | LOBBYIST ^{3.} |
| Name of Filing Committee, Candidate or Lobbyist: <i>Friends of Ann Thornburg Weiss</i> | | | | |
| Street Address: <i>1100 Donna Dr.</i> | | | | |
| City: <i>Fort Washington</i> | | State: <i>PA</i> | Zip Code: <i>19034 -</i> | |
| TYPE OF REPORT (place X to the right of report type) | 1ST TUESDAY PRE-PRIMARY | 2ND FRIDAY PRE-PRIMARY | 30 DAY POST-PRIMARY | AMENDMENT REPORT? |
| | 4. | 5. | 6. | YES |
| | 7. <input checked="" type="checkbox"/> ANNUAL REPORT | YEAR: <i>2012</i> | FLING METHOD: <input checked="" type="checkbox"/> CHECK ONE | PAPER |

| | | | | | |
|-------------------------------------|------------------|-----------------|------------------------------|------------|-------------|
| Name of Office Sought by Candidate: | DATE OF ELECTION | District Number | Office Code | Party Code | County Code |
| | MO. DAY YEAR | | <i>OTH</i> | <i>Dem</i> | <i>46</i> |
| | | | (SEE INSTRUCTIONS FOR CODES) | | |

| | | | |
|--|-------------------|----|-------------------|
| Summary of Receipts and Expenditures from: | MO. DAY YEAR | To | MO. DAY YEAR |
| | <i>01 01 2012</i> | | <i>12 31 2012</i> |
| A. Amount Brought Forward From Last Report | \$ <i>1753.32</i> | | |
| B. Total Monetary Contributions and Receipts (From Schedule I) | \$ <i>1175.00</i> | | |
| C. Total Funds Available (Sum of Lines A and B) | \$ <i>2928.32</i> | | |
| D. Total Expenditures (From Schedule III) | \$ <i>2304.</i> | | |
| E. Ending Cash Balance (Subtract Line D from Line C) | \$ <i>624.32</i> | | |
| F. Value of In-Kind Contributions Received (From Schedule II) | \$ | | |
| G. Unpaid Debts and Obligations (From Schedule IV) | \$ | | |

RECEIVED
 FEB - 4 P 3:18
 OFFICE OF
 NOTARY SERVICES
 ✓

AFFIDAVIT SECTION

PART I If this is a Committee report, authorized committee candidate shall 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 *4th* day of *February* 20*12*

Elizabeth A. Charbonnier
Signature

My commission expires *12* MO. *8* DAY *13* YR.

Michelle C. Bert
Signature of Person Submitting Report

Michelle C. Bert
Printed Name

215 Area Code *793-4800* Daytime Telephone Number

NOTARIAL SEAL
 ELIZABETH A. CHARBONNIER, Notary Public
 Upper Dublin Twp., Montgomery County
 My Commission Expires December 8, 2013

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 *31st* day of *January* 20*13*

Barbara A. Melnyk
Signature

My commission expires _____ MO. _____ DAY _____ YR.

Ann Thornburg Weiss
Signature of Candidate

Ann Thornburg Weiss
Printed Name

215 Area Code *643-0496* Daytime Telephone Number

COMMONWEALTH OF PENNSYLVANIA
 Notary Seal DAY YR.
 Barbara A. Melnyk, Notary Public
 East Norriton Twp., Montgomery County
 My Commission Expires Sept. 24, 2014

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: <input type="checkbox"/> | | Report Filed By: <input type="checkbox"/> | | CANDIDATE ^{1.} | COMMITTEE ^{2.} <input checked="" type="checkbox"/> | LOBBYIST ^{3.} |
| Name of Filing Committee, Candidate or Lobbyist: <i>Friends of Ann Thornburg Weiss</i> | | | | | | |
| Street Address: <i>1100 Donna Dr.</i> | | | | | | |
| City: <i>Fort Washington</i> | | | State: <i>PA</i> | | Zip Code: <i>19034 -</i> | |
| 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 | |
| | 6TH TUESDAY PRE-ELECTION ^{4.} | 2ND FRIDAY PRE-ELECTION ^{5.} | 30 DAY POST-ELECTION ^{6.} | TERMINATION REPORT? YES | NO | |
| | ANNUAL REPORT ^{7.} <input checked="" type="checkbox"/> | YEAR: <i>2012</i> | FILING METHOD <input checked="" type="checkbox"/> CHECK ONE | PAPER | DISKETTE | |
| Name of Office Sought by Candidate: | | | | DATE OF ELECTION MO. DAY YEAR | | District Number <i>OTH</i> |
| | | | | | | Office Code <i>Dem</i> |
| | | | | | | Party Code <i>46</i> |
| | | | | | | County Code <i>46</i> |
| (SEE INSTRUCTIONS FOR CODES) | | | | | | |
| FOR OFFICE USE ONLY | | | | | | |
| Summary of Receipts and Expenditures from: <input type="checkbox"/> | | | MO. DAY YEAR | To | MO. DAY YEAR | |
| | | | <i>01 01 2012</i> | | <i>12 31 2012</i> | |
| A. Amount Brought Forward From Last Report | | | \$ <i>1753.32</i> | | | |
| B. Total Monetary Contributions and Receipts (From Schedule I) | | | \$ <i>1175.00</i> | | | |
| C. Total Funds Available (Sum of Lines A and B) | | | \$ <i>2928.32</i> | | | |
| D. Total Expenditures (From Schedule III) | | | \$ <i>2304.</i> | | | |
| E. Ending Cash Balance (Subtract Line D from Line C) | | | \$ <i>624.32</i> | | | |
| F. Value of In-Kind Contributions Received (From Schedule II) | | | \$ | | | |
| G. Unpaid Debts and Obligations (From Schedule IV) | | | \$ | | | |

RECEIVED
 JAN 21 10 35 AM '12

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 _____ day of _____ 20____

Signature _____

My commission expires MO. DAY YR. _____

Signature of Person Submitting Report _____

Printed Name _____

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 *31st* day of *January* 20*13*

Signature *Barbara A. Melnyk*

My commission expires MO. DAY YR. _____

Signature of Candidate *Ann Thornburg Weiss*

Printed Name *Ann Thornburg Weiss*

Area Code *215* Daytime Telephone Number *643-0496*

COMMONWEALTH OF PENNSYLVANIA
 Notary Public
 Barbara A. Melnyk
 East Norriton Twp., Montgomery County
 My Commission Expires Sept. 24, 2014
 Department of State • Bureau of Commissions, Elections and Legislation
 303 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280

MONTGOMERY COUNTY COURT HOUSE
 Board of Elections
 P.O. Box 311
 Norristown, PA 19404

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| | |
|---|---|
| Name of Filing Committee or Candidate Friends of Ann Thornborg Weiss | Reporting Period From 1/1/2012 To 12/31/2012 |
|---|---|

| | |
|---|---------------|
| 1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR | |
| TOTAL for the Reporting Period | (1) \$ 375.00 |

| | |
|--|----------------|
| 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) | \$ 800.00 |
| TOTAL for the Reporting Period | (2) \$ 1175.00 |

| | |
|--|----------|
| 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) \$ 0 |

| | |
|---|------------|
| 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.) | \$ 1175.00 |
|---|------------|

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 | | | | Reporting Period | | | |
|---------------------------------------|-----|-----|------|-----------------------------|--|--|-----------|
| Friends of Ann Thornburg Weiss | | | | From 1/1/2012 To 12/31/2012 | | | |
| | | | | DATE | | | AMOUNT |
| Full Name of Contributor | MO. | DAY | YEAR | | | | |
| Mr. + Mrs. Robert B. Thornburg | 4 | 12 | 2012 | | | | \$ 100.00 |
| Mailing Address | MO. | DAY | YEAR | | | | \$ |
| 1009 Debbie Lane | | | | | | | |
| City | MO. | DAY | YEAR | | | | \$ |
| Allentown | | | | | | | |
| State | MO. | DAY | YEAR | | | | \$ |
| PA | | | | | | | |
| Zip Code (Plus 4) | MO. | DAY | YEAR | | | | \$ |
| 18103 - | | | | | | | |
| Full Name of Contributor | MO. | DAY | YEAR | | | | \$ |
| George Corson | 4 | 12 | 2012 | | | | \$ 100.00 |
| Mailing Address | MO. | DAY | YEAR | | | | \$ |
| | | | | | | | |
| City | MO. | DAY | YEAR | | | | \$ |
| | | | | | | | |
| State | MO. | DAY | YEAR | | | | \$ |
| - | | | | | | | |
| Zip Code (Plus 4) | MO. | DAY | YEAR | | | | \$ |
| - | | | | | | | |
| Full Name of Contributor | MO. | DAY | YEAR | | | | \$ |
| Michael O'Hara Peale, Esq. | 4 | 12 | 2012 | | | | \$ 100.00 |
| Mailing Address | MO. | DAY | YEAR | | | | \$ |
| | | | | | | | |
| City | MO. | DAY | YEAR | | | | \$ |
| | | | | | | | |
| State | MO. | DAY | YEAR | | | | \$ |
| - | | | | | | | |
| Zip Code (Plus 4) | MO. | DAY | YEAR | | | | \$ |
| - | | | | | | | |
| Full Name of Contributor | MO. | DAY | YEAR | | | | \$ |
| Michael Goodman | 4 | 12 | 2012 | | | | \$ 100.00 |
| Mailing Address | MO. | DAY | YEAR | | | | \$ |
| | | | | | | | |
| City | MO. | DAY | YEAR | | | | \$ |
| | | | | | | | |
| State | MO. | DAY | YEAR | | | | \$ |
| - | | | | | | | |
| Zip Code (Plus 4) | MO. | DAY | YEAR | | | | \$ |
| - | | | | | | | |
| Full Name of Contributor | MO. | DAY | YEAR | | | | \$ |
| Wisler Pearlstein | 4 | 12 | 2012 | | | | \$ 200.00 |
| Mailing Address | MO. | DAY | YEAR | | | | \$ |
| | | | | | | | |
| City | MO. | DAY | YEAR | | | | \$ |
| | | | | | | | |
| State | MO. | DAY | YEAR | | | | \$ |
| - | | | | | | | |
| Zip Code (Plus 4) | MO. | DAY | YEAR | | | | \$ |
| - | | | | | | | |
| Full Name of Contributor | MO. | DAY | YEAR | | | | \$ |
| Mr. + Mrs. Maxwell Stepanuk | 6 | 8 | 2012 | | | | \$ 100.00 |
| Mailing Address | MO. | DAY | YEAR | | | | \$ |
| | | | | | | | |
| City | MO. | DAY | YEAR | | | | \$ |
| | | | | | | | |
| State | MO. | DAY | YEAR | | | | \$ |
| - | | | | | | | |
| Zip Code (Plus 4) | MO. | DAY | YEAR | | | | \$ |
| - | | | | | | | |
| Full Name of Contributor | MO. | DAY | YEAR | | | | \$ |
| Michael Cassidy | 6 | 8 | 2012 | | | | \$ 100.00 |
| Mailing Address | MO. | DAY | YEAR | | | | \$ |
| | | | | | | | |
| City | MO. | DAY | YEAR | | | | \$ |
| | | | | | | | |
| State | MO. | DAY | YEAR | | | | \$ |
| - | | | | | | | |
| Zip Code (Plus 4) | MO. | DAY | YEAR | | | | \$ |
| - | | | | | | | |
| Full Name of Contributor | MO. | DAY | YEAR | | | | \$ |
| | | | | | | | |
| Mailing Address | MO. | DAY | YEAR | | | | \$ |
| | | | | | | | |
| City | MO. | DAY | YEAR | | | | \$ |
| | | | | | | | |
| State | MO. | DAY | YEAR | | | | \$ |
| - | | | | | | | |
| Zip Code (Plus 4) | MO. | DAY | YEAR | | | | \$ |
| - | | | | | | | |

PAGE TOTAL

\$ 800.00

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

**SCHEDULE III
STATEMENT OF EXPENDITURES**

| | |
|--|---|
| Name of Filing Committee or Candidate Friends of Ann Thornburg Weiss | Reporting Period From 1/1/2012 To 12/31/2012 |
|--|---|

| To Whom Paid Montgomery Co. Democratic Comm. | MO. | DAY | YEAR | Amount | |
|--|--------------------|------------------------------------|------|-----------|----------------------------|
| Mailing Address PO Box 857 | 4 | 3 | 2012 | \$ 500.00 | Description of Expenditure |
| City Norristown | State PA | Zip Code (Plus 4) 19404 | | | Donation |
| To Whom Paid Montgomery Co. Democratic Comm. | MO. | DAY | YEAR | Amount | |
| Mailing Address PO Box 857 | 4 | 3 | 2012 | \$ 142.00 | Description of Expenditure |
| City Norristown | State PA | Zip Code (Plus 4) 19404 | | | Donation |
| To Whom Paid Friends of Kelly Devine | MO. | DAY | YEAR | Amount | |
| Mailing Address | 4 | 3 | 2012 | \$ 100.00 | Description of Expenditure |
| City | State | Zip Code (Plus 4) | | | Donation |
| To Whom Paid Abington Rockledge Democratic Comm. | MO. | DAY | YEAR | Amount | |
| Mailing Address PO Box 132 | 4 | 4 | 2012 | \$ 140.00 | Description of Expenditure |
| City Abington | State PA | Zip Code (Plus 4) 19001- | | | Donation |
| To Whom Paid Colonial Democrats | MO. | DAY | YEAR | Amount | |
| Mailing Address | 4 | 12 | 2012 | \$ 50.00 | Description of Expenditure |
| City | State PA | Zip Code (Plus 4) | | | Donation |
| To Whom Paid Montgomery Co. Democratic Comm | MO. | DAY | YEAR | Amount | |
| Mailing Address PO Box 857 | 05 | 06 | 2012 | \$ 500.00 | Description of Expenditure |
| City Norristown | State PA | Zip Code (Plus 4) 19404- | | | |
| To Whom Paid Friends of Ron Kola | MO. | DAY | YEAR | Amount | |
| Mailing Address | 07 | 30 | 2012 | \$ 50.00 | Description of Expenditure |
| City | State PA | Zip Code (Plus 4) | | | Donation |
| To Whom Paid Montgomery Co. Democratic Comm. | MO. | DAY | YEAR | Amount | |
| Mailing Address PO Box 857 | 12 | 12 | 12 | \$ 300.00 | Description of Expenditure |
| City Norristown | State PA | Zip Code (Plus 4) 19404- | | | Donation |

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

**PAGE TOTAL
\$ 1782.00**

**SCHEDULE III
STATEMENT OF EXPENDITURES**

| | |
|--|---|
| Name of Filing Committee or Candidate Friends of Ann Thornburg Weiss | Reporting Period From 1-1-2012 To 12-31-2012 |
|--|---|

| To Whom Paid | MO. | DAY | YEAR | Amount |
|--------------------------------------|-----------|-------------------|------|----------------------------|
| Shapiro Richards | 1 | 2 | 2012 | \$ 22.00 |
| Mailing Address PO Box 241 | | | | |
| City | State | Zip Code (Plus 4) | | Description of Expenditure |
| Abington | PA | 19001 - | | Donation |
| Shapiro Richards | 1 | 2 | 2012 | \$ 500. |
| Mailing Address PO Box 241 | | | | |
| City | State | Zip Code (Plus 4) | | Description of Expenditure |
| Abington | PA | 19001 - | | Donation |
| To Whom Paid | MO. | DAY | YEAR | Amount |
| Mailing Address | | | | \$ |
| City | State | Zip Code (Plus 4) | | Description of Expenditure |
| | | | | |
| To Whom Paid | MO. | DAY | YEAR | Amount |
| Mailing Address | | | | \$ |
| City | State | Zip Code (Plus 4) | | Description of Expenditure |
| | | | | |
| To Whom Paid | MO. | DAY | YEAR | Amount |
| Mailing Address | | | | \$ |
| City | State | Zip Code (Plus 4) | | Description of Expenditure |
| | | | | |
| To Whom Paid | MO. | DAY | YEAR | Amount |
| Mailing Address | | | | \$ |
| City | State | Zip Code (Plus 4) | | Description of Expenditure |
| | | | | |
| To Whom Paid | MO. | DAY | YEAR | Amount |
| Mailing Address | | | | \$ |
| City | State | Zip Code (Plus 4) | | Description of Expenditure |
| | | | | |

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

PAGE TOTAL
\$ 522