Commonwealth of Pennsylvania CAMPAIGN FINANCE REPORT

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(NOTE: This report must be typed or printed in blue or black ink.) (cover page) Report Filed Bv: -> Filer Identification CANDIDATE LOBBYIST COMMITTEE Number: ---> Name of Filing Committee, Candidate or Lobbvist Friends of Risa Ferman Street Address 300 E. Moreland Avenue State Zip Code City PA 19040 **Hatboro** 2nd Friday 3. Amendment 30 Day TYPE OF 6th Tuesday YES NO X X Post Primary Pre-Primary Pre-Primary Report? REPORT 5. 6th Tuesday 4. 2nd Friday 30 Day 6. Termination YES NO X (place X to Pre-Election Post Election Report? Pre-Election the right of Year Filing Method Annual Paper X Diskette report type) 2013 Check One --> Report County Name of Office Sought by Candidate Date of Election District Office Party Code Code Number Code Month-Day-Year OTH REP 46 **District Attorney** 05-21-13 (see instructions for codes) FOR OFFICE USE ONL Month-Day-Year Month-Day-Year Summary of Receipts ---04-01-13 01-01-13 and Expenditures from: Tο 河角 33 \$178.544.85 A. Amount Brought Forward From Last Report 3000 B. Total Monetary Contributions and Receipts (From Schedule I) \$578.46  $\infty$ \$179,123.31 C. Total Funds Available (Sum of Lines A and B) T D. Total Expenditures (From Schedule III) \$1.718.25 Ņ E. Ending Cash Balance (Subtract Line D from Line C) \$177,405.06 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. Sworn to and subscribed before me this 20 day of Signature of Person Submitting Report
Alfred F. Zollers **Printed Name** Signature 674-2784 215 My commission expires Area Code YR. Daytime Telephone Number MO. DAY 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 2**d** day of Signature of Candidate WHITNEY ROBIN DAWS Risa Vetri Ferman My commission expires to 26 2014 Printed Name 219-3622 215 Daytime Telephone Number Area Code

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# SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period	
Friends of Risa Ferman	From <b>01-01-13</b>	To <u>04-01-13</u>
1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR	LESS PER CONT	RIBUTOR
TOTAL for the Report	ing Period (1)	0
TO COST OF THE PART A AND DA	DT D)	
2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PA	KIB)	- 0
Contributions Received from Political Committees (Part A)		
All Other Contributions (Part B)		0
TOTAL for the Report	ing Period (2)	_ 0
3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART	D) 	<u> </u>
Contributions Received from Political Committees (Part C)		\$500.00
All Other Contributions (Part D)		-0
TOTAL for the Report	ting Period (3)	\$500.00
4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETUR	NED CHECKS, ET	C. (FROM PART
TOTAL for the Report	ting Period (4)	\$78.46
TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD (Add and enter amount totals from Bo 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page	xes	<b>\$578.46</b>

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# 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.

Name of Filing Committee or Candidate			Reporting Period	
Friends of Risa Ferman			From 01-01-13	To _04-01-13
			DATE	AMOUNT
Full Name of Contributing Committee PECO PAC			Month-Day-Year 02-06-2013	\$500.00
Mailing Address 2301 Market Street			Month-Day-Year	
City Philadelphia	State PA	Zip Code (Plus 4 19103	4) Month-Day-Year	
Full Name of Contributing Committee			Month-Day-Year	
Mailing Address			Month-Day-Year	
City	State	Zip Code (Plus	4) Month-Day-Year	
Full Name of Contributing Committee	<del></del>		Month-Day-Year	
Mailing Address			Month-Day-Year	
City	State	Zip Code (Plus	4) Month-Day-Year	
Full Name of Contributing Committee	<del></del>	<del></del>	Month-Day-Year	
Mailing Address			Month-Day-Year	
City	State	Zip Code (Plus	1) Month-Day-Year	
Full Name of Contributing Committee	·····	· · · · · · · · · · · · · · · · · · ·	Month-Day-Year	
Mailing Address		· · · · · · · · · · · · · · · · · · ·	Month-Day-Year	· · · · · · · · · · · · · · · · · · ·
City	State	Zip Code (Plus	4) Month-Day-Year	
Full Name of Contributing Committee			Month-Day-Year	
Mailing Address			Month-Day-Year	
City	State	Zip Code (Plus	4) Month-Day-Year	
Full Name of Contributing Committee	·		Month-Day-Year	
Mailing Address			Month-Day-Year	
City	State	Zip Code (Plus	4) Month-Day-Year	
Full Name of Contributing Committee	<del></del>		Month-Day-Year	
Mailing Address	-		Month-Day-Year	
City	State	Zip Code (Plus	4) Month-Day-Year	
Enter Grand Total of Part C on Schedule I,	 Detailed	Summary Page,	Section 3.	PageTotal \$500.00

### **OTHER RECEIPTS**

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				<del> </del>

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	
Friends of Risa Ferman			From <b>01-01-13</b>	To <u>04-01-13</u>
Full Name				
Wells Fargo Bank				
Mailing Address Blair Mill & Moreland				
City Horsham	State PA	Zip Code (Plus 4	4) Month-Day-Year 12-31-2012	Amount \$22.38
Receipt Description Money Maket Acct Interest	1		1 1 3	<b>422.00</b>
Full Name		<u> </u>		
Wells Fargo Bank Mailing Address	<u>,</u>			
Blair Mill & Moreland City	Ctate	Zip Code (Plus	4) Month-Day-Year	Amount
Horsham	PA	19044	04-01-2013	\$22.38
Receipt Description  Money Maket Acct Interest				
Full Name				
Wells Fargo Bank Mailing Address Blair Mill & Moreland				
City		Zip Code (Plus		
Horsham Receipt Description	PA	19044	04-01-2013	\$18.78
Money Maket Acct Interest				
Full Name Wells Fargo Bank				
Mailing Address Blair Mill & Moreland				
City Horsham	State PA	Zip Code (Plus 4	4) Month-Day-Year 04-01-2013	Amount \$14.92
Receipt Description Money Maket Acct Interest				
Full Name		Anarini .		
Mailing Address			<del>, , , , , , , , , , , , , , , , , , , </del>	Processor Control Cont
City	State	Zip Code (Plus	4) Month-Day-Year	Amount
Receipt Description	<u></u>		<u> </u>	
Full Name			<del>(1 </del>	
Mailing Address				
City	State	Zip Code (Plus	4) Month-Day-Year	Amount
Receipt Description	<u></u>			
Enter Grand Total of Part E on Schedule I, D	 Detailed	Summary Page,	Section 4.	PageTotal \$78.46

#### SCHEDULE II

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#### 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	Reporting Period	
Friends of Risa Ferman	From <b>01-01-13</b> To	04-01-13
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE	of \$50.00 or LESS PE	R CONTRIBUTO
TOTAL for the Report	ting Period (1)	0
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE of \$50.01 TO \$	250.00 (FROM PART	F)
TOTAL for the Report	ting Period (2)	- 0
3. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OVER \$250.00	(FROM PART G)	i
TOTAL for the Repor	ting Period (3)	- 0
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, and 3; also enter on Page 1, Report Cover Page, Item F.)	, 2,	0

Schee	dule III
STATEMENT OF	<b>EXPENDITURES</b>

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			Pan	orting Period	
Name of Filing Committee or Candidate				om <b>01-01-13</b> To	. 04-01-13
Friends of Risa Ferman			Fr	OIII - A1-A1-1A- 1(	) <u> </u>
				Month-Day-Year	Amount
To Whom Paid			[ ]	01-17-2013	\$6.40
UNITED STATES POSTAL SERVICE			ſ	Description of Exp	enditure
Mailing Address				Postage S	tamps
Postmaster	State	Zip Code (Plus	4)		
City Hatboro	PA	19040			
To Whom Paid			Ī	Month-Day-Year	Amount
Chardo For Judge				02-13-2013	\$300.00
Mailing Address			] [	Description of Exp	enditure
PO Box 60474			-,-	Event Tic	neis
City		Zip Code (Plus	4)		
Harrisburg	PA	17106-0474		Month-Day-Year	Amount
To Whom Paid				Month-Day-Year 02-26-2013	\$250.00
Friends of Jim Cawley	··-			Description of Exp	
Mailing Address				Description of Exp	ckets
PO Box 1125	Ctata	Zip Code (Plus	<u> </u>		
City	PA	17108	77		
Harrisburg		11.100		Month-Day-Year	Amount
To Whom Paid			- 1	03-05-2013	\$38.00
IRS				Description of Exp	enditure
Mailing Address  Department of the Treasury				Income	Taxes
	State	Zip Code (Plu	s 4)		
City Washington	DC	20001			
To Whom Paid				Month-Day-Year	Amount
Fitzpartrick For Congress				03-23-2013	\$1,000.00
Mailing Address				Description of Ex	penditure
PO Box 185		1 =		Contrib	uliOII
City	State	Zip Code (Plu	ıs 4)		
Langhorne	PA	19047	}	Month Day Vac-	Amount
To Whom Paid				Month-Day-Year 03-23-2013	\$100.00
IPAC				Description of Ex	
Mailing Address				Description of Ex	
3769 Mill Road	State	Zip Code (Plu	IS <b>4</b> 1		
City	State	19426	, <del>, ,</del>		
Collegeville	<u> </u>			Month-Day-Year	Amount
To Whom Paid				01-03-2013	\$7.95
American Express Mailing Address				Description of Ex	penditure
200 Vesey Street				Servic	e Fee
City	State		us 4)		
New York	NY	10285			<b>A</b>
To Whom Paid				Month-Day-Year	Amount \$7.95
American Express				02-04-2013	
Mailing Address				Description of Ex	e Fee
200 Vesey Street	T 61 .	- Zin Code (Di	110 4		<del></del>
City	State	e Zip Code (Pl 10285	us 4)	<b>'</b>	
New York					PageTotal
Enter Grand Total of Expenditures on Page	1, Rep	ort Cover Page	, Iten	n ט.	\$1,710.30

#### Schedule III STATEMENT OF EXPENDITURES

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\$7.95

			1-11-1	
Name of Filing Committee or Candidate		7	Reporting Period	
Friends of Risa Ferman			From <u>01-01-13</u>	To <u>04-01-13</u>
To Whom Paid American Express			Month-Day-Year 03-04-2013	7 Amount \$7.95
Mailing Address 200 Vesey Street			Description of Ex	xpenditure
City New York	State NY	Zip Code (Plus 4		
To Whom Paid	<u> </u>		Month-Day-Year	Amount
Mailing Address	***************************************		Description of Ex	cpenditure
City	State	Zip Code (Plus 4	4)	
To Whom Paid			Month-Day-Year	Amount
Mailing Address	<del></del>		Description of Ex	cpenditure
City	State	Zip Code (Plus 4	4)	
To Whom Paid			Month-Day-Year	· Amount
Mailing Address			Description of Ex	penditure
City	State	Zip Code (Plus 4	4)	
To Whom Paid	<u> </u>		Month-Day-Year	Amount
Mailing Address			Description of Ex	penditure
City	State	Zip Code (Plus 4	4)	
To Whom Paid			Month-Day-Year	Amount
Mailing Address			Description of Ex	penditure
City	State	Zip Code (Plus 4	4)	
To Whom Paid			Month-Day-Year	Amount
Mailing Address			Description of Ex	penditure
City	State	Zip Code (Plus 4	<b>\$</b> )	
To Whom Paid			Month-Day-Year	Amount
Mailing Address			Description of Ex	penditure
City	State	Zip Code (Plus 4	1)	
Enter Grand Total of Expenditures on Page 1	I, Repor	rt Cover Page, Ite	ım D.	PageTotal