#### **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	ion	2008	016				oort		CANDI	DATE		СОМ	<b>4ITTEE</b>	<b>✓</b>	LOBE	SYIST	
Name of Filing C	Committee	, Candida	ate or Lo	obbyist:		STE	PHE	NS, T	ODD FRI	ENDS	OF						
Street Address:	РО ВО	OX 95															
City:	HORS	НАМ				State:			PA			Zip Cod	de: 19	9044			
TYPE OF REPORT	6TH TUES		1.	2ND FRIDA PRIMARY	Y PRE	-	2. <b>X</b>	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	<b>~</b>
(place X to the right of	6TH TUES		4.	2ND FRIDATELECTION	y pre	≣- !	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	<b>\</b>
report type)	ANNUAL	REPORT	7.	<b>Year</b> 2009					NG METHO				PAPER		$\overline{}$	DISKE	TTE
Name of Office S	Sought by	Candidat	e:						DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
									МО	DAY	YE	AR		STH	REP		46
REPRESENTATI	IVE IN THI	E GENER	AL ASS	EMBLY					11		3	2009		(SEE IN	ISTRUCTIO	ONS FOR C	ODES)
Summary of Expenditures		and	МО	DAY	YEAR	ł		_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
				1 1	2	009	Т	<u> </u>	5		4	2009					
A. Amount Bro	ught Forw	ard Fron	ı Last R	eport				\$			5,7	732.51					
B. Total Monet	ary Contri	butions <i>l</i>	And Rec	eipts (From	Sche	dule	<b>I</b> )	\$			3	399.35					
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$			6,1	31.86					
D. Total Expen	ditures (F	rom Sche	edule III	[)				\$			1,3	800.94					
E. Ending Cash	Balance (	Subtract	Line D	From Line (	C)			\$			4,8	30.92					
F. Value Of In-	Kind Cont	ributions	Receive	ed (From S	chedu	le II	)	\$				0.00					
G. Unpaid Debt	ts And Obl	igations	(From S	chedule IV	)			\$				0.00			•		
					AFF	IDA	١٧٧	T SE	CTION								
PART I - If this is	s a Commi	ttee repo	ort, trea	surer sign	here.	If th	is is	a Car	ndidate re	eport, o	candi	date sig	ın here.				
I swear (or affirm) correct and comple		eport, incl	uding the	attached scl	hedule	s filed	d on	paper	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , true
Sworn to and subs	cribed befo day of	re me this		20							S	ignature	of Perso	n Submit	ting Rep	ort	
		Signatur	·e					- -					Prin	ted Name	e		
My Commission Ex	kpires	o.g.iatui	-										Ema	il			
	1	мо	DA	ΑΥ	YR					Are	ea Cod	le	Daytim	e Telepl	none Nu	mber	
Part II- If this is	a report	of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende		best of m	ıy knowle	edge and beli	ef this	polit	ical	comm	ittee has n	ot viola	ted an	y provisi	ions of th	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc		e me this										Si	ignature o	of Candid	ate		
	day of ——							_					Printe	d Name			
	s	ignature						-									
My Commission Exp													Ema	il			
	_	МО	DA	ΑΥ	YR	1		•		Area	Code		Da	aytime T	elephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
STEPHENS, TODD FRIENDS OF	From:	1/1/200	<u>9</u> To:	5/4/2009
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	) Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	399.35
TOTAL for the Reporting	) Period	(3)	\$	399.35
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	) Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	399.35

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

**PAGE TOTAL**\$ 0.00

## 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 Candi	date		Re <sub>l</sub>	oorting P m:	eriod	To	o:	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					

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

**PAGE TOTAL \$**0.00

#### **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 from Over \$250.00 in the reporting period.

Name of Filing Committee or Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

## ALL OTHER CONTRIBUTIONS

**OVER \$250.00** 

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

1/2009 T
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399.35
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s 4)
<b>DTAL</b> 399.35
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## 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		Report	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	0.00

#### **SCHEDULE II**

#### **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	d	
STEPHENS, TODD FRIENDS OF	From:	<u>1/1/2009</u> <b>To:</b>	<u>5/4/2009</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candid	ate		Reporting	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II, In-Kir	nd Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting P	Period			
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (	Contributions De	etaile	ed				PAGE TOTAL 0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	R	Reporting Period						
STEPHENS, TODD FRIENDS OF	Fi	rom	<u>1/:</u>	<u>L/2009</u>	To:	5/4/2009		
			DATE			AMOUNT		
To Whom Paid		мо	DAY	YEAR				

				DATE		AMOUNT
To Whom Paid NICOLE KENNEDY			мо	DAY	YEAR	
Mailing Address 11 WOODBINE COU	IRT		1	5	2009	\$ 234.06
City HORSHAM	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19044	<b>Descrip</b> CELL PI	otion of Exp	penditure	
To Whom Paid U.S. POSTAL SERVICE			мо	DAY	YEAR	
Mailing Address POST OFFICE			1	21	2009	\$ 6.07
City HATBORO	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19040	<b>Descrip</b> POSTA	otion of Exp	penditure	
To Whom Paid HORSHAM TRAVEL BASEBALL			МО	DAY	YEAR	
Mailing Address 11 CLAREMONT CIF	RCLE		1	26	2009	\$ 300.00
City HORSHAM	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19044	Descrip AD BOO	otion of Exp	penditure	
To Whom Paid HATBORO - HORSHAM MUSICAL THEA	TRE		МО	DAY	YEAR	
Mailing Address 899 HORSHAM ROA	۱D		1	26	2009	\$ 150.00
City HORSHAM	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19044	Descrip AD BO	otion of Exp	penditure	
To Whom Paid COUNTY OF MONTGOMERY			МО	DAY	YEAR	
Mailing Address PO BOX 311			1	29	2009	\$ 37.10
City NORRISTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19404	1	tion of Exp IGN EXPEN		

							PAG	E 12
To Whom Paid EFAX PLUS SERVICE					DAY	YEAR		
Mailing Address 6922 HOLLYWOOD BLVD					12	2009	\$	16.95
City LOS ANGI	FLFS	State	Zip Code (Plus 4)	Descrip	otion of Exi	enditure		
200711101		CA	90028	Description of Expenditure FAX SERVICE				
To Whom Paid DAWSONS				МО	DAY	YEAR		
Mailing Address PLYMOUTH ROAD				1	14	2009	\$	45.86
City PLYMOLIT	MEETING State Zip Code (Plus 4)			Descrip	tion of Exp	enditure		
72111001	TIPILLTING	PA	19262		DATE MTG			
To Whom Paid GODADDY.COM					DAY	YEAR		
Mailing Address INTERNET				2	11	2009	\$	78.55
City UNKNOWN	N	State	Zip Code (Plus 4)	Descrip	Description of Expenditure			
		AZ	11111		N NAMES			
To Whom Paid LOWER GWYNEDD REPUBLICAN COMMITTEE				МО	DAY	YEAR		
Mailing Address 712 MEADOW CREEK CIRCLE				4	15	2009	\$	70.00
City AMBLER		State	Zip Code (Plus 4)	Descrip	Description of Expenditure			
		PA	19002	TICKET	S			
To Whom Paid APPLETREE ANSWERING SERVICE					DAY	YEAR		
Mailing Address PO BOX 7777				3	23	2009	\$	121.60
City PHILADELP	 _PHIA	State	Zip Code (Plus 4)	Description of Expenditur OFFICE OPERATIONS		enditure		
		PA	19175					
To Whom Paid ALWAYS SIGNS					DAY	YEAR		
Mailing Address 16182 GOTHARD STREET				4	19	2009	\$	206.85
				Description of Expenditur				
City HUNTING	TON BEACH	State	Zip Code (Plus 4)	Descrip	otion of Ex	enditure		

To Whom Paid EFAX PLUS SERVICE	МО	DAY	YEAR				
Mailing Address 6922 HOLLYWOOD BLVE				11	2009	\$	16.95
City LOS ANGELES	<b>State</b> CA	<b>Zip Code (Plus 4)</b> 90028	Description of Expenditure FAX SERVICE				
To Whom Paid EFAX PLUS SERVICE	МО	DAY	YEAR				
Mailing Address 6922 HOLLYWOOD BLVE				13	2009	\$	16.95
City LOS ANGELES	<b>State</b> CA	<b>Zip Code (Plus 4)</b> 90028	Description of Expenditure FAX SERVICE				
Enter Grand Total of Expenditures		PAGE TOTAL					
	\$	1,300.94					