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 :	on 20	04233				Repo Filed		y :	CAN	IDI	DATE		СОМ	ITTEE	✓ [LOB	BYIST		
Name of Filing C	ommittee, Can	didate or	Lobbyist	:	F	FRATI	ERN	NAL (ORDER	R OF	POLI	CE L	DDGE 5	<u>_</u>					
Street Address:	1336 SPRII	NG GARD	EN ST																
City:	PHILADELP	HIA							State	:	PA		Zip Cod	le: 19	123-3	3295			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FF PRIMAI		PRE-	2.		30 DA		Р	OST-	3. X		AMENDMENT REPORT?		Yes		No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FF ELECTI		PRE-	- 5.		30 DA		Р	OST-	6.		TERMINA REPORT	Yes	1 [No	\	
report type)	ANNUAL REPO	RT 7.	Year 2	2010					CHECK					PAPER		√	DISI	ETTE	
Name of Office S	ought by Candi	date:				-	_		DATE	E OI	F ELE	СТІС	N	District Number	Office Code	Pai	rty Coo	le Cou	
									МО		DAY	YI	AR		10000			51	
										11		2	2010		(SEE IN	TRUCTI	ONS FO	R CODES	5)
Summary of		МО	DAY	′	YEAR				МО		DAY	YI	EAR	FO	R OFFIC	E USE	ONL	Y	
Expenditures	from:		1	1	20	010	T)		6		7	2010						
A. Amount Bro	ught Forward F	rom Last	Report					\$				2,6	502.46						
B. Total Moneta	ary Contribution	ns And Re	ceipts (F	From	Sched	lule I	[)	\$					0.00						
C. Total Funds	Available (Sum	Of Lines	A and B))				\$				2,6	502.46						
D. Total Expenditures (From Schedule III) \$ 300							300.00												
E. Ending Cash	Balance (Subtr	act Line [From L	ine C	:)			\$				2,3	02.46						
F. Value Of In-	Kind Contribution	ons Recei	ved (Fro	m Sc	hedul	e II)		\$					0.00						
G. Unpaid Debt	s And Obligatio	ns (From	Schedul	le IV))			\$					0.00						
					AFFI	[DA\	VIT	SE	CTIO	N									
PART I - If this is				_															
I swear (or affirm) correct and comple		including th	ne attache	ed sch	edules	filed o	on p	aper	or by e	lectr	onic m	edium	, are to t	he best o	f my knov	vledge	and b	elief , tı	rue
Sworn to and subs	cribed before me	this	20									5	ignature	of Perso	n Submitt	ing Re	port		
	Signs	ature								•				Prin	ted Name				-
My Commission Ex	_									-				Ema	il				-
	мо	ı	DAY		YR						Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	andidate's	s authori	ized (Comm	ittee,	, Ca	ndid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my know	ledge and	d belie	ef this p	politic	cal o	omm	ittee ha	as no	ot viola	ted an	y provis	ions of the	e act of Ju	ıne 3,1	937 (F	.L. 133	з,
Sworn to and subsc		nis											s	ignature o	of Candida	ite			-
	day of 		²⁰ -											Printe	d Name				-
	Signatu	re						,		_									_
My Commission Exp	_													Ema	il				
	мо	ı	DAY		YR						Area	Code		Da	aytime To	elephoi	ne Nun	nber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRATERNAL ORDER OF POLICE LODGE 5	From:	1/1/201	<u>0</u> To:	6/7/2010
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	(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)			\$	0.00
TOTAL for the Reporting	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	j Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
		From:			То	То:		
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•				-		DAGE TOTAL

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

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 Fining Committee of Canadate			oorting P	eriod				
			Fro	m:		0:		
					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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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.)

Name of Filing Committee or Candidate				Rep	orting Pe	riod				
				Fror	n:		To	o:		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State	Zi	p Code (Plus	4)						
Employer Name		•			Occupa	tion	•	•		
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	ode (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	TAL 0.00

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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Total of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	Section	••			\$	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							
FRATERNAL ORDER OF POLICE LODGE 5	From:	<u>1/1/2010</u> To:	<u>6/7/2010</u>					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR							
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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	Il Name of Contributor			Reporting Period					
			From:			То:			
				DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						\$	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	ле Г		PAGE TOTAL		
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL		
						\$	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Full Name of Contributor Mailing Address State Zip Code(Plus			Reporting Period					
			Fro	m:		To:		
					DATE			AMOUNT
				мо	DAY	YEAR		
							\$	0.00
	Zip Code(P	Plus 4)						
				Occupa	ation			
City		State		Zip 4)	Code(Plus	Descri	ption of	f Contribution
, In-Kind	Contribution	ons De	taile	ed				PAGE TOTAL 0.00
		City		Zip Code(Plus 4) City State	Zip Code(Plus 4) Occupa	Tom: DATE MO DAY Zip Code(Plus 4) Occupation City State Zip Code(Plus 4)	To: DATE MO DAY YEAR Zip Code(Plus 4) Occupation City State Zip Code(Plus 4) Descri	To: DATE MO DAY YEAR \$ Zip Code(Plus 4) Occupation City State Zip Code(Plus 4) Description of

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
FRATERNAL ORDER OF POLICE LODGE 5	From	1/1/2010	То:	6/7/2010			

				DATE		AMOUNT	
To Whom Paid FRIENDS OF VANESSA LOWERY BI	RIENDS OF VANESSA LOWERY BROWN						
Mailing Address 4706 WESTMINISTER AVE				17	2010	\$	300.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19131	1 -	otion of Exp			
Futor Crowd Total of French dite		PAGE TOTAL					
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							300.00