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 2004	233			Rep File			CANDI	DATE		СОМ	4ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:	F	FRAT	ERI	NAL C	ORDER O	F POLI	CE LO	DDGE 5						_
Street Address:	1336 SPRING	GARDE	N ST														
City:	PHILADELPHI	Α						State:	PA			Zip Cod	de: 19	9123-3	295		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY P PRIMARY	RE-	2		30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	1	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDAY ELECTION	PRE-	- 5	i.	30 DA ELECT	'	POST-	6.		TERMINA REPORT		Yes	No	•	
report type)	ANNUAL REPORT	7.	Year 2010					IG METH				PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candida	te:	•			-		DATE C	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	County	y
	,							МО	DAY	YE	AR	rumber	Toode			51	_
								11		2	2010		(SEE IN	STRUCTIO	ONS FOR C	ODES)	_
•	Receipts and	МО	DAY YE	AR				МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY		
Expenditures	from:		1 1	20	010	T	0	9		13	2010						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			2,3	302.46						
B. Total Moneta	ary Contributions	And Rec	eipts (From So	hec	lule 1	I)	\$				55.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			2,3	357.46						
D. Total Expend	ditures (From Sch	edule II	I)				\$			8	85.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			1,4	72.46						
F. Value Of In-	Kind Contributions	s Receiv	ed (From Sche	dul	e II))	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)				\$				0.00			•			
			А	FF]	[DA]	VI	ΓSE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign her	e. I	f this	s is	a Can	ndidate r	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sched	ules	filed	on p	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , true	э,
Sworn to and subs	cribed before me this day of	5	20							S	ignature	of Perso	n Submit	ting Rep	ort		,
	Signatu	re					-					Prin	ted Name	e			-
My Commission Ex	cpires						_					Ema	il				.
	МО	D	AY	YR					Are	ea Cod	e	Daytim	e Telepl	none Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Co	mm	ittee	e, Ca	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowl	edge and belief t	this	politi	cal	commi	ittee has r	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,	
Sworn to and subsc	ribed before me this		20								S	ignature (of Candid	ate			۱ ٔ
	day of						-					Printe	d Name				.
	Signature						-					Ema	il				.
My Commission Exp	oires 																
	МО	D	AY	YR			-		Area	Code		D	aytime T	elephon	e Numbe	er	

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:	9/13/2010
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	55.00
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)			\$	0.00
TOTAL for the Reporting) 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
			1	
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			\$	55.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	nis Part to itemize onl vith an aggregate valu							
Name of Filing Commit	tee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u>.</u>			DATE			AMOUNT
Full Name of Contributing	g Committee			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

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 of Candidate					Reporting Period From: To:				
					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.)

Name of Filing Committee or Candidate	•			Rep	orting Pe	riod				
				Froi	m:		То):		
					D	ATE		AN	MOUNT	
Full Name of Contributor					МО	DAY	YEAR			
Mailing Address								\$	0.00)
City	State	Zi	p Code (Plus	5 4)						
Employer Name	•	•			Occupa	tion	•	•		
Employer Mailing Address/Principal Pla Business	ce of		City		•	State		Zip Cod	e (Plus 4)	
Enter Grand Total of Part C on Scho	edule I, Deta	iled Sumr	mary Page,	Section	on 3.			P/	AGE TOTAL 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	Candidate		Report	ting Perio	od			
			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. Detailer	d Summary Page	Section	4			PA	GE TOTAL
	,,,	. Junimary 1 ago,	5000.011				\$	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:	9/13/2010
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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, 1		\$	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						\$	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	те Г		PAGE TOTAL
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting l	Period			
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$ \$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition			
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	ption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or (Candidate		Reporti	ng Period			
FRATERNAL ORDER OF POLIC	CE LODGE 5		From	<u>1/:</u>	1/2010	То:	9/13/2010
				DATE		AMOUNT	
To Whom Paid DEMOCRATIC CITY COMMITTE	≣E		МО	DAY	YEAR		
Mailing Address 1907 S. BROAD STREET				30	2010	\$	210.00
City PHILADELPHIA PA Zip Code (Plus 4) PA 19123			1 -	otion of Exp			
To Whom Paid NOVAK FRANCELLA LLC			МО	DAY	YEAR		
Mailing Address ONE PRES	IDENTIAL BLVD STE 330		6	30	2010	\$	375.00
City BALA CYNWYD	State PA	Zip Code (Plus 4) 19004	1 -	otion of Exp			
To Whom Paid FRIENDS OF JEWELL WILLIAM	1S		МО	DAY	YEAR		
Mailing Address 2220 N. BROAD ST.			8	23	2010	\$	300.00
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19132	CONTR	IBUTION			

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

PAGE TOTAL

885.00

\$