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			Repoi			ANDI	DATE		COM	AITTEE	Y	LUBI	51151			
Name of Filing C	ommittee, Candid	ate or L	obbyist:		FRATE	RNAL	ORE	ER O	F POLI	CE L	ODGE 5	;						
Street Address:	1336 SPRING	GARDE	N ST															
City:	PHILADELPHI/	A					Sta	ite:	PA			Zip Co	Zip Code: 19123-3295					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.		DAY MARY	F	POST-	3.			AMENDMENT REPORT?		No	\		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5. X		DAY CTIOI		POST-	6.		TERMINATION REPORT?		Yes	No	✓		
report type)	ANNUAL REPORT	7.	Year 2010					METHO				PAPER		$ \checkmark $	DISKE	ΓΤΕ		
Name of Office S	ought by Candida	te:	-				DA	TE O	F ELE	CTIC	ON	District Number	Office Code	Par	ty Code	County Code		
							MC)	DAY	Y	EAR		•	•		51		
								11		2	2010		(SEE IN	STRUCTI	ONS FOR C	ODES)		
	Receipts and	МО	DAY	YEAR			МС)	DAY	Υ	EAR	FC	R OFFI	CE USE	ONLY			
Expenditures	from:		1 1	20	010	ГО		10		18	2010							
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			1,	472.46							
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule I)		\$				190.00							
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			1,	662.46							
D. Total Expend	ditures (From Scho	edule II	I)				\$				570.00							
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		_	\$			1,0	092.46							
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	e II)		\$				0.00							
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	')			\$				0.00			'				
				AFF	IDAV	IT S	ECT	ION										
I swear (or affirm)	s a Committee report, incl	*	_								_		f my knov	wledge	and belie	ef , true		
correct and comple																		
Sworn to and subs	cribed before me this day of	•				_				\$	Signature	of Perso	n Submit	ting Rep	oort			
	Signatu	re				_						Prin	ted Name	•				
My Commission Ex						_						Ema	il					
	МО		AY	YR						ea Co	de	Daytin	e Teleph	one Nu	mber			
	a report of a cand				•				_									
No 320) as amende		iy knowie	eage and bell	er tnis	politica	ı com	mitte	e nas n	ot viola	tea ai	ny provis	ions of th	e act of J	une 3,1	937 (P.L.	1333,		
Sworn to and subsc	ribed before me this day of		20								S	ignature (of Candida	ate				
						_						Printe	d Name					
My Commission Exp	Signature ires											Ema	il			—		
	мо	D	AY	YR		_			Area	Code		D	aytime T	elephor	ne 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:	10/18/2010
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	190.00
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
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			\$	190.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize only with an aggregate valu							
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		-			DATE			AMOUNT
Full Name of Contribution	ng 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 Filling Committee of Candidate				oorting P				
			Fro	m:		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 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				Reporting Period						
			Fron	n:		То	:			
				D	ATE		АМО	DUNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plu	s 4)							
Employer Name				Occupat	tion					
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PAG	GE 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	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		
FRATERNAL ORDER OF POLICE LODGE 5	From:	<u>1/1/2010</u> To:	10/18/2010
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	TF)		
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 Candidat	:e		Reporting	g 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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	e				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor			•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	andidate		Reporti	ng Period			
FRATERNAL ORDER OF POLICE	E LODGE 5		From	1/:	1/2010	То:	10/18/2010
		[DATE			AMOUNT
To Whom Paid FRIENDS OF MARIAN B. TASCO)		мо	DAY	YEAR		
Mailing Address 1000 E. VER	RNON RD		9	15	2010	\$	35.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19150		otion of Exp IBUTION	penditure		
To Whom Paid FRIENDS OF MARIAN B. TASCO)		МО	DAY	YEAR		
Mailing Address 1000 E. VERNON RD				15	2010	\$	35.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19150		otion of Exp	penditure		
To Whom Paid FRIENDS OF MIKE STACK	·		мо	DAY	YEAR		
Mailing Address 12361 ACAI	DEMY ROAD		9	15	2010	\$	250.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19154		otion of Exp			
To Whom Paid FRIENDS OF MIKE O'BRIEN			мо	DAY	YEAR		
Mailing Address 610 N. 2ND	STREET		9	15	2010	\$	250.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19123	1	otion of Exp			
Enter Grand Total of Expend	litures on Page 1, Re	port Cover Page, Item D),				PAGE TOTAL

570.00