Campaign Finance Report

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

Filer Identificat	tion	20042	233			Report		CANDI	DATE	СО	MMITTEE	 ✓ 	LOBI	BYIST			
Number : Name of Filing	Committee.	Candida	te or Lo	obbvist:		Filed B					= 5						
Street Address:																	
City:	PHILAI	DELPHIA	L					State:	PA		Zip Co	Zip Code: 19123-3295					
TYPE OF REPORT	6TH TUESD PRE-PRIMA		1.	2ND FRIDA PRIMARY	Y PRE	- 2. X	30 DA PRIM		POST-	3.	AMENDI REPORT		Yes	No	· 🗸		
(place X to the right of	6TH TUESD PRE-ELECT		4.	2ND FRIDA ELECTION	AY PRE	E- 5.	30 DAY POST ELECTION			OST- 6.		TERMINATION REPORT?		No	· 🗸		
report type)	ANNUAL R	REPORT	7.	Year 2011				NG METHO			PAPER	PAPER JISK					
Name of Office	Sought by (o.					DATE O	F ELEC	CTION	District		Par	ty Code			
	Sought by C	Junuluut						мо	DAY	YEAR	Number	Code			Code 51		
								11		8 201	1	(SEE INS	STRUCTI	ONS FOR	CODES)		
Summary of	Receipts	and	мо	DAY	YEAR	2		мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY			
Expenditure	s from:			1 1	. 2	011 T	0	5		2 20:	11						
A. Amount Bro	ought Forwa	ard From	Last R	eport			\$			319.5	58						
B. Total Mone	tary Contrib	outions A	nd Rec	eipts (Fron	n Sche	edule I)	\$			100.0	00						
C. Total Funds	s Available (Sum Of	Lines A	and B)			\$			419.5	58						
D. Total Exper	nditures (Fr	om Sche	dule II	[)			\$			400.0	0						
E. Ending Cas	h Balance (S	Subtract	Line D	From Line	C)		\$			19.5	8						
F. Value Of In	-Kind Contr	ibutions	Receive	ed (From S	chedu	le II)	\$			0.0	0						
G. Unpaid Deb	ots And Obli	gations	(From S	chedule I\	/)		\$			0.0	0						
					AFF	IDAVI	T SE	CTION									
PART I - If this		-		-							-						
I swear (or affirn correct and comp		port, inclu	iding the	attached so	hedule	s filed on	paper	or by elect	ronic me	edium, are t	o the best o	of my knov	vledge	and beli	ef , true		
Sworn to and sub	scribed befor day of	e me this		20						Signat	ure of Perso	on Submitt	ing Rep	oort			
							-				Prii	nted Name					
My Commission E	Expires	Signatur	e								Ema	ail					
,	м	0	D	AY	YR		-		Are	a Code		ne Teleph	one Nu	mber			
Part II- If this is	sa reporto	of a cand	idate's	authorized	Com	nittee, C	andid	ate shall	sign he	ere.							
I swear (or affirm No 320) as amend		best of m	y knowle	edge and bel	ief this	, political	comm	ittee has n	ot violat	ed any pro	visions of th	ne act of Ju	ine 3,1	937 (P.I	1333,		
Sworn to and subscribed before me this											Signature	of Candida	ite				
	day of						_										
							_				Print	ed Name					
My Commission Ex		gnature									Ema	ail					
		мо	D/	AY	YR	ł	-		Area	Code	C	aytime Te	elephon	e Numb	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary P	aye			
Name of Filing Committee or Candidate	Reporting) Period		
FRATERNAL ORDER OF POLICE LODGE 5	From:	<u>1/1/201</u>	<u>.1</u> To:	<u>5/2/2011</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			_	
TOTAL for the Repo	\$	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)	\$	100.00		
TOTAL for the Repo	\$	100.00		
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 Repo	rting Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Par	rt E)			
TOTAL for the Repo	rting Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Ac totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cove			\$	100.00

PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate				Reporting Period				
		·			DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	0.00

PART B 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 Candid	ate		Rep	porting P	eriod			
FRATERNAL ORDER OF POLICE LODGE 5					<u>1/1/</u>	2011 To	6: <u>5/2/2011</u>	
			1		DATE			AMOUNT
Full Name of Contributor FRANK COWARD				мо	DAY	YEAR		
Mailing Address							\$	100.00
City ALBRIGHTSVILLE	State	Zip Code (Plus	4)	4	1	2011		
	PA	18210						
								PAGE TOTAL
Enter Grand Total of Part A on	Schedule I, I	Detailed Summary Pa	ge, S	ection 2	2.		\$	100.00

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						
				То:					
				DA	TE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							- \$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Schedule I, Detailed Summary Pa				age, Section 3.			\$	0.00	

PART D 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					
Fr					From:				
				D	ATE		АМ	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE TOTAL 0.00	

PART E **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			Reporting Period						
				From: To:					
				D	ATE			AMOUNT	
Full Name					DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	Section	4.			\$		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>1/1/2011</u> To:	<u>5/2/2011</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 Candidate			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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	ie,		PAGE TOTA	L
						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period				
						То:		
					DATE		AMOUNT	
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$ 0.00	
City	State	Zip Code(Plus 4)						
Employer of Contributor				Occupation				
Employer Mailing Address/Principal Plac	e of Business (City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution	
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	l Contributions D	etaile	d			PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name	Name of Filing Committee or Candidate				Reporting Period					
FRATERNAL ORDER OF POLICE LODGE 5					From <u>1/1/2011</u> To:					
					DATE A					
To Who	om Paid			мо	DAY	YEAR				
NOVAK	K FRANCELLA LLC									
Mailing	g Address			4	27	2011	\$	400.00		
City	BALA CYNWYD	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	19004	ACCOUNTANT EXPENSE						
								PAGE TOTAL		
Enter	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D						\$	400.00		