

Commonwealth of Pennsylvania  
CAMPAIGN FINANCE REPORT

(NOTE: This report must be typed or printed in blue or black ink.)

Filer Identification Number: --->	Report Filed By: ->	CANDIDATE <sup>1.</sup>	COMMITTEE <sup>2.</sup> X	LOBBYIST <sup>3.</sup>						
Name of Filing Committee, Candidate or Lobbyist <b>Friends of Risa Ferman</b>										
Street Address <b>PO Box 1010</b>										
City <b>Norristown</b>		State <b>PA</b>	Zip Code <b>19404</b>							
TYPE OF REPORT (place X to the right of report type)	6th Tuesday Pre-Primary	1.	2nd Friday Pre-Primary	2. X	30 Day Post Primary	3.	Amendment Report?	YES	NO	X
	6th Tuesday Pre-Election	4.	2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termination Report?	YES	NO	X
	Annual Report	7.	Year -->	2010	Filing Method Check One -->	Paper	X	Diskette		

Name of Office Sought by Candidate <b>District Attorney</b>	Date of Election Month-Day-Year <b>05-18-10</b>	District Number	Office Code OTH	Party Code REP	County Code 46
(see instructions for codes)					

Summary of Receipts and Expenditures from: >	Month-Day-Year <b>01-01-10</b>	To	Month-Day-Year <b>05-03-10</b>	FOR OFFICE USE ONLY
A. Amount Brought Forward From Last Report				<b>\$24,761.42</b>
B. Total Monetary Contributions and Receipts (From Schedule I)				<b>\$6,017.76</b>
C. Total Funds Available (Sum of Lines A and B)				<b>\$30,779.18</b>
D. Total Expenditures (From Schedule III)				<b>\$3,731.01</b>
E. Ending Cash Balance (Subtract Line D from Line C)				<b>\$27,048.17</b>
F. Value of In-Kind Contributions Received (From Schedule II)				<b>-- 0 --</b>
G. Unpaid Debts and Obligations (From Schedule IV)				<b>-- 0 --</b>

RECEIVED  
 2010 MAY -1 P 2:00  
 OFFICE OF  
 VOTER SERVICES  
 MONTGOMERY CO PA

**AFFIDAVIT SECTION**

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

5th day of May 2010

Notarial Seal  
Sharyn Donnelly, Notary Public  
Norsham Twp., Montgomery County  
My Commission Expires Nov. 8, 2013  
Member, Pennsylvania Association of Notaries

Signature

My commission expires 11 8 13  
MO. DAY YR.

*Alfred F. Zollers*  
Signature of Person Submitting Report  
**Alfred F. Zollers**  
Printed Name

215 674-2784  
Area Code Daytime Telephone Number

**PART II - If this is a report of a Candidate's Authorized Committee, candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No. 320) as amended.

Sworn to and subscribed before me this

5th day of May 2010

Notarial Seal  
Sharyn Donnelly, Notary Public  
Norsham Twp., Montgomery County  
My Commission Expires Nov. 8, 2013  
Member, Pennsylvania Association of Notaries

Signature

My commission expires 11 8 13  
MO. DAY YR.

*Risa V. Ferman*  
Signature of Candidate  
**Risa Vetri Ferman**  
Printed Name

215 219-3622  
Area Code Daytime Telephone Number

SCHEDULE I  
CONTRIBUTIONS AND RECEIPTS  
Detailed Summary Page

Name of Filing Committee or Candidate <b>Friends of Risa Ferman</b>	Reporting Period From <b>01-01-10</b> To <b>05-03-10</b>
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<b>1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS -- \$50.00 OR LESS PER CONTRIBUTOR</b>	
TOTAL for the Reporting Period (1)	<b>-- 0 --</b>

<b>2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)</b>	
Contributions Received from Political Committees (Part A)	<b>-- 0 --</b>
All Other Contributions (Part B)	<b>-- 0 --</b>
TOTAL for the Reporting Period (2)	<b>-- 0 --</b>

<b>3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)</b>	
Contributions Received from Political Committees (Part C)	<b>\$6,000.00</b>
All Other Contributions (Part D)	<b>-- 0 --</b>
TOTAL for the Reporting Period (3)	<b>\$6,000.00</b>

<b>4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)</b>	
TOTAL for the Reporting Period (4)	<b>\$17.76</b>

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)</b>	<b>\$6,017.76</b>
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**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 over \$250.00 in the reporting period.

Name of Filing Committee or Candidate				Reporting Period	
Friends of Risa Ferman				From <u>01-01-10</u> To <u>05-03-10</u>	
				DATE	AMOUNT
Full Name of Contributing Committee <b>Carpenters PAC of Phila. &amp; Vicinity</b>				Month-Day-Year <b>01-26-2010</b>	<b>\$5,000.00</b>
Mailing Address <b>1803 Spring Gaarden Street</b>				Month-Day-Year	
City <b>Philadelphia</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19130</b>	Month-Day-Year		
Full Name of Contributing Committee <b>Area 5 Republican Committee</b>				Month-Day-Year <b>03-15-2010</b>	<b>\$1,000.00</b>
Mailing Address <b>616 Ford Street</b>				Month-Day-Year	
City <b>Conshohocken</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19428</b>	Month-Day-Year		
Full Name of Contributing Committee				Month-Day-Year	
Mailing Address				Month-Day-Year	
City	State	Zip Code (Plus 4)	Month-Day-Year		
Full Name of Contributing Committee				Month-Day-Year	
Mailing Address				Month-Day-Year	
City	State	Zip Code (Plus 4)	Month-Day-Year		
Full Name of Contributing Committee				Month-Day-Year	
Mailing Address				Month-Day-Year	
City	State	Zip Code (Plus 4)	Month-Day-Year		
Full Name of Contributing Committee				Month-Day-Year	
Mailing Address				Month-Day-Year	
City	State	Zip Code (Plus 4)	Month-Day-Year		
Full Name of Contributing Committee				Month-Day-Year	
Mailing Address				Month-Day-Year	
City	State	Zip Code (Plus 4)	Month-Day-Year		
Full Name of Contributing Committee				Month-Day-Year	
Mailing Address				Month-Day-Year	
City	State	Zip Code (Plus 4)	Month-Day-Year		
Full Name of Contributing Committee				Month-Day-Year	
Mailing Address				Month-Day-Year	
City	State	Zip Code (Plus 4)	Month-Day-Year		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

Page Total <b>\$6,000.00</b>
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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 <b>Friends of Risa Ferman</b>	Reporting Period From <u>01-01-10</u> To <u>05-03-10</u>
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Full Name <b>Wachovia Bank</b>				
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Mailing Address <b>Main Street</b>				
---------------------------------------	--	--	--	--

City <b>Norristown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19401</b>	Month-Day-Year <b>02-26-2010</b>	Amount <b>\$2.22</b>
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Receipt Description <b>Money Maket Acct Interest</b>				
---------------------------------------------------------	--	--	--	--

Full Name <b>Wachovia Bank</b>				
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Mailing Address <b>Main Street</b>				
---------------------------------------	--	--	--	--

City <b>Norristown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19401</b>	Month-Day-Year <b>03-31-2010</b>	Amount <b>\$8.14</b>
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Receipt Description <b>Money Maket Acct Interest</b>				
---------------------------------------------------------	--	--	--	--

Full Name <b>Wachovia Bank</b>				
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Mailing Address <b>Main Street</b>				
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City <b>Norristown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19401</b>	Month-Day-Year <b>04-30-2010</b>	Amount <b>\$7.40</b>
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Receipt Description <b>Money Maket Acct Interest</b>				
---------------------------------------------------------	--	--	--	--

Full Name				
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Mailing Address				
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City	State	Zip Code (Plus 4)	Month-Day-Year	Amount
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Receipt Description				
---------------------	--	--	--	--

Full Name				
-----------	--	--	--	--

Mailing Address				
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City	State	Zip Code (Plus 4)	Month-Day-Year	Amount
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Receipt Description				
---------------------	--	--	--	--

Full Name				
-----------	--	--	--	--

Mailing Address				
-----------------	--	--	--	--

City	State	Zip Code (Plus 4)	Month-Day-Year	Amount
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Receipt Description				
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Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

Page Total <b>\$17.76</b>
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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 <b>Friends of Risa Ferman</b>	Reporting Period From <u>01-01-10</u> To <u>05-03-10</u>
------------------------------------------------------------------------	-------------------------------------------------------------

1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE of \$50.00 or LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	-- 0 --

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE of \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	-- 0 --

3. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period (3)	-- 0 --

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)	-- 0 --
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Schedule III  
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <b>Friends of Risa Ferman</b>	Reporting Period From <u>01-01-10</u> To <u>05-03-10</u>
------------------------------------------------------------------------	-------------------------------------------------------------

To Whom Paid <b>Montgomery County Republican Committee</b>	Month-Day-Year <b>01-18-2010</b>	Amount <b>\$1,000.00</b>
Mailing Address <b>314 E. Johnson Highway</b>	Description of Expenditure <b>Contribution</b>	
City <b>Norristown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19404</b>
To Whom Paid <b>Brian Miles</b>	Month-Day-Year <b>02-05-2010</b>	Amount <b>\$35.40</b>
Mailing Address <b>1330 Longhorn Circle</b>	Description of Expenditure <b>Web Site Design/Maintenance</b>	
City <b>Blue Bell</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19422</b>
To Whom Paid <b>Montgomery Co. District Attorney's Office</b>	Month-Day-Year <b>03-03-2010</b>	Amount <b>\$600.00</b>
Mailing Address <b>PO Box 311</b>	Description of Expenditure <b>Cell Phone Bill</b>	
City <b>Norristown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19404</b>
To Whom Paid <b>Intuit</b>	Month-Day-Year <b>02-08-2010</b>	Amount <b>\$95.61</b>
Mailing Address <b>Customer Service@intuit.com</b>	Description of Expenditure <b>Office Expense</b>	
City <b>N/A</b>	State <b>NA</b>	Zip Code (Plus 4) <b>11111</b>
To Whom Paid <b>Tom Corbett For Governor</b>	Month-Day-Year <b>04-11-2010</b>	Amount <b>\$2,000.00</b>
Mailing Address <b>P. O. Box 181</b>	Description of Expenditure <b>Candidate Contribution</b>	
City <b>Harrisburg</b>	State <b>PA</b>	Zip Code (Plus 4) <b>17108</b>
To Whom Paid	Month-Day-Year	Amount
Mailing Address	Description of Expenditure	
City	State	Zip Code (Plus 4)
To Whom Paid	Month-Day-Year	Amount
Mailing Address	Description of Expenditure	
City	State	Zip Code (Plus 4)
To Whom Paid	Month-Day-Year	Amount
Mailing Address	Description of Expenditure	
City	State	Zip Code (Plus 4)

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

Page Total  
**\$3,731.01**