

COMMONWEALTH OF PENNSYLVANIA  
**CAMPAIGN FINANCE STATEMENT**

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <sup>2</sup>	LOBBYIST <sup>3</sup>		
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <b>Risa Vetri Ferman</b>							
STREET ADDRESS <b>115 Wrack Road</b>							
CITY <b>Meadowbrook</b>		STATE <b>PA</b>	ZIP CODE <b>19046</b>				
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE		DISTRICT NO.	PARTY	DATE OF ELECTION		
	<b>District Attorney</b>		<b>Montg.</b>	<b>REP</b>	MO. <b>11</b>	DAY <b>08</b>	
	DATES OF REPORTING PERIOD		MO. <b>10</b>	DAY <b>25</b>	YEAR <b>11</b>	TO	
			MO. <b>11</b>	DAY <b>28</b>	YEAR <b>11</b>		
	CASH BALANCE AT END OF REPORTING PERIOD:		\$ <b>- 0 -</b>				
	TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ <b>- 0 -</b>				
	AMENDMENT REPORT?		YES	NO	FOR OFFICE USE ONLY		
TERMINATION REPORT?		YES	NO	RECEIVED 2011 DEC - 5 A 10:20 VOTING MACHINE			
6TH TUESDAY PRE-PRIMARY	1.						
2ND FRIDAY PRE-PRIMARY	2.						
30 DAY POST-PRIMARY	3.						
6TH TUESDAY PRE-ELECTION	4.						
2ND FRIDAY PRE-ELECTION	5.						
30 DAY POST-ELECTION	6. <input checked="" type="checkbox"/>						
ANNUAL REPORT	7.						

**AFFIDAVIT SECTION**

**PART I -**

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.  
 If statement is filed on behalf of a Candidate, the Candidate must sign here.  
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS <b>5th</b> DAY OF <b>NOVEMBER</b> 20 <b>11</b> Notary Public <b>WHITNEY ROBIN DAVIS</b> NORRISTOWN BORO, MONTGOMERY COUNTY My Commission Expires <b>Feb 24, 2011</b>	SIGNATURE OF PERSON SUBMITTING REPORT  <b>Risa Vetri Ferman</b> PRINTED NAME AREA CODE <b>610</b> DAYTIME TELEPHONE NUMBER <b>278 3099</b>
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**PART II -**

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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 _____ DAY OF _____ 20____ SIGNATURE MY COMMISSION EXPIRES _____ MO. DAY YR.	SIGNATURE OF CANDIDATE _____ PRINTED NAME _____ AREA CODE _____ DAYTIME TELEPHONE NUMBER _____
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