

CAMPAIGN FINANCE REPORT

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

Filer Identification Number: ▶	Report Filed By: ▶	CANDIDATE ^{1.}	COMMITTEE ^{2.} <input checked="" type="checkbox"/>	LOBBYIST ^{3.}
Name of Filing Committee, Candidate or Lobbyist: Friends Of Diane Morgan				
Street Address: 753 Johns Lane				
City: Ambler		State: PA		Zip Code: 19002 -
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY ^{1.}	2ND FRIDAY PRE-PRIMARY ^{2.}	30 DAY POST-PRIMARY ^{3.}	AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION ^{4.}	2ND FRIDAY PRE-ELECTION ^{5.}	30 DAY POST-ELECTION ^{6.} <input checked="" type="checkbox"/>	TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
	ANNUAL REPORT ^{7.}	YEAR ▶		FILING METHOD <input checked="" type="checkbox"/> PAPER <input checked="" type="checkbox"/> DISKETTE

Name of Office Sought by Candidate: Controller of Montgomery County	DATE OF ELECTION			District Number	Office Code	Party Code	County Code
	MO.	DAY	YEAR	AL	0TH	DEM	46
	11	08	2011				
(SEE INSTRUCTIONS FOR CODES)							

Summary of Receipts and Expenditures from:	MO.			DAY			YEAR			To	MO.			DAY			YEAR			FOR OFFICE USE ONLY
A. Amount Brought Forward From Last Report				10	25	2011				11	28	2011							RECEIVED 2011 NOV 30 P 3:09 (M)	
B. Total Monetary Contributions and Receipts (From Schedule II)																				
C. Total Funds Available (Sum of Lines A and B)																				
D. Total Expenditures (From Schedule III)																				
E. Ending Cash Balance (Subtract Line D from Line C)																				
F. Value of In-Kind Contributions Received (From Schedule II)																				
G. Unpaid Debts and Obligations (From Schedule IV)																				

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 29 day of November

COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL PHILOMENA NOAK, Notary Public Lower Gwynedd Twp., Montgomery County My Commission Expires December 5, 2012	Signature of Person Submitting Report <u>Diane B. Morgan</u> Printed Name <u>Diane B. Morgan</u>
---	---

My commission expires 12 05 2012 (MO. DAY YR.)

Area Code: 215 Daytime Telephone Number: 646-9330

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 29 day of November

COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL PHILOMENA NOAK, Notary Public Lower Gwynedd Twp., Montgomery County My Commission Expires December 5, 2012	Signature of Candidate <u>Diane B. Morgan</u> Printed Name <u>Diane B. Morgan</u>
---	--

My commission expires 12 05 2012 (MO. DAY YR.)

Area Code: 215 Daytime Telephone Number: 646-9330

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate

Friends of Diane Morgan

Reporting Period

From 10/25/2011 To 11/28/2011

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR

TOTAL for the Reporting Period (1) \$ 150.00

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)

Contributions Received from Political Committees (Part A) \$ 0

All Other Contributions (Part B) \$ 200.00

TOTAL for the Reporting Period (2) \$ 200.00

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)

Contributions Received from Political Committees (Part C) \$ 0

All Other Contributions (Part D) \$ 0

TOTAL for the Reporting Period (3) \$ 0

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)

TOTAL for the Reporting Period (4) \$ 10.17

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.)

\$ 360.17

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 Candidate Friends of Diane Morgan	Reporting Period From <u>10/25/2011</u> To <u>11/28/2011</u>
---	---

				DATE			AMOUNT
Full Name of Contributor				MO.	DAY	YEAR	
William Grosnick				10	25	2011	\$ 200.00
Mailing Address 415 City Ave C-3				MO.	DAY	YEAR	\$
City Merion Station	State PA	Zip Code (Plus 4) 19066 -		MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) -		MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) -		MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) -		MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) -		MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) -		MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) -		MO.	DAY	YEAR	\$
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) -		MO.	DAY	YEAR	\$

PAGE TOTAL
\$ 200.00

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Friends of Diane Morgan	Reporting Period From <u>10/25/2011</u> To <u>11/28/2011</u>
---	---

To Whom Paid Lower Providence Democratic Committee	MO.	DAY	YEAR	Amount
Mailing Address 900 Kriebel Mill Rd	10	25	2011	\$ 100.00
City Eagleville	Description of Expenditure Fundraising donation			
State PA	Zip Code (Plus 4) 19403 -			

To Whom Paid WNPV Radio	MO.	DAY	YEAR	Amount
Mailing Address 1210 Snyder Rd P.O. Box 1440	10	25	2011	\$ 160.00
City Lansdale	Description of Expenditure Radio Campaign Advertising			
State PA	Zip Code (Plus 4) 19446 -			

To Whom Paid Cheltenham Democratic Committee	MO.	DAY	YEAR	Amount
Mailing Address 40 Steve McCarter 211 W. Waverly Rd.	10	30	2011	\$ 40.00
City Glenside	Description of Expenditure Fundraising donation			
State PA	Zip Code (Plus 4) 19038 -			

To Whom Paid Lamott AME Church	MO.	DAY	YEAR	Amount
Mailing Address 1505 W. Cheltenham Ave	11	04	2011	\$ 100.00
City Elkins Park	Description of Expenditure Donation			
State PA	Zip Code (Plus 4) 19022 -			

To Whom Paid Helene Ratner	MO.	DAY	YEAR	Amount
Mailing Address 346 Stratton Ct.	11	04	2011	\$ 160.00
City Langhorne	Description of Expenditure Reimbursement for postage for area advertising mailer			
State PA	Zip Code (Plus 4) 19047 -			

To Whom Paid Card Services (Lees Hoagie House)	MO.	DAY	YEAR	Amount
Mailing Address 411 Doylestown Rd.	11	22	2011	\$ 22.02
City Montgomeryville	Description of Expenditure Lunch for Jesse & David for distribution of literature			
State PA	Zip Code (Plus 4) 18936 -			

To Whom Paid David Morgan	MO.	DAY	YEAR	Amount
Mailing Address 753 Johns Lane	11	22	2011	\$ 21.08
City Ambler	Description of Expenditure Petty cash reimbursement for Notary & stamps.			
State PA	Zip Code (Plus 4) 19002 -			

To Whom Paid Card Services	MO.	DAY	YEAR	Amount
Mailing Address P.O. Box 13337	11	22	2011	\$ 8,317.21
City Philadelphia	Description of Expenditure Payment for Times Herald & Jewish Exponent Newspaper & KYW Advertising			
State PA	Zip Code (Plus 4) 19101 -3337			

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

PAGE TOTAL
\$ 8,920.91

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Friends of Diane Morgan	Reporting Period From <u>10/25/2011</u> To <u>11/28/2011</u>
---	---

To Whom Paid Card Services	MO. 11	DAY 25	YEAR 2011	Amount \$4,570.96
Mailing Address P. O. Box 13337		Description of Expenditure Payment for Hotcards.com mailer		
City Philadelphia	State PA	Zip Code (Plus 4) 19101 -3337		EWBEN-FM Radio Political Advertising

To Whom Paid Pay Pal	MO. 11	DAY 14	YEAR 2011	Amount \$1.75
Mailing Address 2211 N. First St.		Description of Expenditure Service Charge		
City San Jose	State CA	Zip Code (Plus 4) 95036 -		

To Whom Paid Jesse Moore	MO. 11	DAY 19	YEAR 2011	Amount \$500.00
Mailing Address 504 Norristown Rd		Description of Expenditure Laun sign distribution, Lit drops		
City Ambler	State PA	Zip Code (Plus 4) 19002 -		political calls, poll campaigning

To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) -		

To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) -		

To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) -		

To Whom Paid	MO.	DAY	YEAR	Amount \$
Mailing Address		Description of Expenditure		
City	State	Zip Code (Plus 4) -		

To Whom Paid	MO.	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
\$5,072.71

**PART E
OTHER RECEIPTS**

Page 6 of 6

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 Friends of Diane Morgan	Reporting Period From 10/25/2011 To 11/28/2011
---	---

Full Name Citizens Bank						
Mailing Address P.O. Box 7000						
City Providence	State RI	Zip Code (Plus 4) 02940 -	MO. 10	DAY 31	YEAR 2011	Amount \$0.76
Receipt Description Interest on checking Account						

Full Name Pay Pal						
Mailing Address 2211 N. First St.						
City San Jose	State CA	Zip Code (Plus 4) 95036 -	MO. 11	DAY 14	YEAR 2011	Amount \$9.41
Receipt Description Misc. return of funds.						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$
Receipt Description						

PAGE TOTAL
\$ 10.17

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.