

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	<input type="checkbox"/>	LOBBYIST	<input type="checkbox"/>		
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 <b>District Attorney</b>				DISTRICT NO. <b>Montg.</b>		PARTY <b>REP</b>		DATE OF ELECTION	
6TH TUESDAY PRE-PRIMARY	<input type="checkbox"/>	DATES OF REPORTING PERIOD		TO							
2ND FRIDAY PRE-PRIMARY	<input type="checkbox"/>	MO.	DAY	YEAR	MO.	DAY	YEAR	MO.	DAY	YEAR	
30 DAY POST-PRIMARY	<input type="checkbox"/>	11	29	11	12	31	11	11	08	11	
6TH TUESDAY PRE-ELECTION	<input type="checkbox"/>	CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>- 0 -</u> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>- 0 -</u>									
2ND FRIDAY PRE-ELECTION	<input type="checkbox"/>										
30 DAY POST-ELECTION	<input type="checkbox"/>	AMENDMENT REPORT?		YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	FOR OFFICE USE ONLY RECEIVED 2012 JAN 25 P 2:10			
ANNUAL REPORT	<input checked="" type="checkbox"/>	TERMINATION REPORT?		YES	<input type="checkbox"/>	NO	<input type="checkbox"/>				

**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  
 25 DAY OF JANUARY 2012  
 NOTARIAL SEAL  
 WHITNEY ROBIN DAVIS  
 Notary Public  
 NORRISTOWN BORO, MONTGOMERY COUNTY  
 My Commission Expires Feb 24, 2014

SIGNATURE OF PERSON SUBMITTING REPORT  
 Risa Vetri Ferman  
 PRINTED NAME  
 610 278 3099  
 AREA CODE DAYTIME TELEPHONE NUMBER

**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 \_\_\_\_\_