

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: 27-5160316	Report Filed By: CANDIDATE 1. <input type="checkbox"/> COMMITTEE 2. <input checked="" type="checkbox"/> LOBBYIST 3. <input type="checkbox"/>			
Name of Filing Committee, Candidate or Lobbyist: Friends of Pat Mosesso				
Street Address: 2449 Schlosser Rd				
City: Hanleysville	State: PA Zip Code: 19438-			
TYPE OF REPORT (place X to the right of report type)	1. 5TH TUESDAY PRE-PRIMARY <input type="checkbox"/>	2. 2ND FRIDAY PRE-PRIMARY <input type="checkbox"/>	3. 30 DAY POST-PRIMARY <input checked="" type="checkbox"/>	AMENDMENT REPORTS YES <input type="checkbox"/> NO <input type="checkbox"/>
	4. 5TH TUESDAY PRE-ELECTION <input type="checkbox"/>	5. 2ND FRIDAY PRE-ELECTION <input type="checkbox"/>	6. 30 DAY POST-ELECTION <input type="checkbox"/>	7. TERMINATION REPORT YES <input type="checkbox"/> NO <input type="checkbox"/>
	ANNUAL REPORT <input type="checkbox"/>	YEAR <input type="checkbox"/>	FILING METHOD <input checked="" type="checkbox"/> PAPER <input checked="" type="checkbox"/> <input type="checkbox"/> DISKETTE	

Name of Office Sought by Candidate: Register or Wills	DATE OF ELECTION MO. DAY YEAR 5 17 2011	District Number	Office Code OTH	Party Code REP	County Code 46
(SEE INSTRUCTIONS FOR CODES)					

Summary of Receipts and Expenditures from: 5 3 2011 To 6 6 2011	FOR OFFICE USE ONLY
A. Amount Brought Forward From Last Report \$ 14,196.-	RECEIVED 2011 JUN 16 P 1:2 OFFICE OF VOTER SERVICES MONTG. CO. PA
B. Total Monetary Contributions and Receipts (From Schedule I) \$ 6,175.-	
C. Total Funds Available (Sum of Lines A and B) \$ 20,371.-	
D. Total Expenditures (From Schedule III) \$ (8903.68)	
E. Ending Cash Balance (Subtract Line D from Line C) \$ 11,467.32	
F. Value of In-Kind Contributions Received (From Schedule II) \$ 492.50	
G. Unpaid Debts and Obligations (From Schedule IV) \$ 8771.06	

AFFIDAVIT SECTION

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 15th day of June 2011

Deborah T. Pinho
Signature
COMMONWEALTH OF PENNSYLVANIA
My Commission Expires 2014
DEBORAH T. PINHO, Notary Public DAY YR.
Whitpain Twp., Montgomery County

Nora A. Schwartz
Signature of Person Submitting Report
Nora A. Schwartz
Printed Name
215 723-9592
Area Code Daytime Telephone Number

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 15th day of June 2011

Deborah T. Pinho
Signature
COMMONWEALTH OF PENNSYLVANIA
My Commission Expires 2014
DEBORAH T. PINHO, Notary Public DAY YR.
Whitpain Twp., Montgomery County

Patricia A. Mosesso
Signature of Candidate
Patricia A. Mosesso
Printed Name
610 213-1115
Area Code Daytime Telephone Number

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate FRIENDS OF Pat MOSES	Reporting Period From 5/3/11 To 6/6/11
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$ 425.-

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ 250.-
All Other Contributions (Part B)	\$ 2500.-
TOTAL for the Reporting Period	(2) \$ 2750

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ —
All Other Contributions (Part D)	\$ 3000.-
TOTAL for the Reporting Period	(3) \$ 3000.-

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

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.)	\$ 6175.-
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PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

page 3 of 11

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 FRIENDS OF Pat Moselew	Reporting Period From <u>5/3/11</u> To <u>6/6/11</u>
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	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributing Committee Timothy Knox LHP Political Act Comm	5	22	11	\$ 150
Mailing Address 400 Maryland Drive PO Box 7544				\$
City Fort Washington	State PA	Zip Code (Plus 4) 19034 -		\$
Full Name of Contributing Committee Norristown Rep Comm	5	22	11	\$ 100
Mailing Address 205 W Wood St				\$
City Norristown	State PA	Zip Code (Plus 4) 19401 -		\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$

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

PAGE TOTAL
\$ 250

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 Pat Mosesso	Reporting Period From 5/3/11 To 6/6/11
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	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributor AKANKSHA KALRA	5	10	11	\$ 150.00
Mailing Address 1895 Meredith Lane				\$
City Blue Bell				\$
State PA				\$
Zip Code (Plus 4) 19422-				\$
Full Name of Contributor Geoffrey N Zeh Or	5	10	11	\$ 100.00
Mailing Address 1150 Rosewood Dr				\$
City Blue Bell				\$
State PA				\$
Zip Code (Plus 4) 19422-				\$
Full Name of Contributor Brian Patrick Miles	5	10	11	\$ 100.00
Mailing Address 1130 Longhorn Circle				\$
City Blue Bell				\$
State PA				\$
Zip Code (Plus 4) 19422-				\$
Full Name of Contributor Nora Schwartz	5	10	11	\$ 100.00
Mailing Address 1926 Burgundy Way				\$
City Hatfield				\$
State PA				\$
Zip Code (Plus 4) 19440-				\$
Full Name of Contributor Matthew Maguire	5	10	11	\$ 100.00
Mailing Address 1065 Ski Pack Pike				\$
City Blue Bell				\$
State PA				\$
Zip Code (Plus 4) 19422				\$
Full Name of Contributor Michael Golarz	5	10	11	\$ 100.00
Mailing Address 1032 North 4th St				\$
City Phila				\$
State PA				\$
Zip Code (Plus 4) 19123 -				\$
Full Name of Contributor Jill Gouberg	5	10	11	\$ 200.00
Mailing Address 621 Old Gulph Rd				\$
City Bryn MAWR				\$
State PA				\$
Zip Code (Plus 4) 19010 -				\$
Full Name of Contributor Deborah T. Pinho	5	10	11	\$ 100.00
Mailing Address 627 Harrison St				\$
City Riverside				\$
State NJ				\$
Zip Code (Plus 4) 08075-				\$

PAGE TOTAL
\$ 950.00

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

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 PAT MOSESU	Reporting Period From 5/3/11 To 6/6/11
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Full Name of Contributor	Mailing Address	City	State	Zip Code (Plus 4)	DATE			AMOUNT
					MO.	DAY	YEAR	
George A Karkus	128 William Penn Drive	Jeffersonville	PA	19403 -	5	22	11	\$ 100.00
Truett S Musselman	238 Brandon Blvd	Jeffersonville	PA	19403 -	5	22	11	\$ 100.00
Michelle Scarpone	2000 Valley Forge Circle	Kings of Prussia	PA	19406 -	5	22	11	\$ 100.00
DBV Partnership	Suite 200 1800 Pennbrook Pky	Lansdale	PA	19446 -	5	10	11	\$ 100.00
Moon Ann	142 East Main St	Lansdale	PA	19446 -	5	10	11	\$ 100.00
Keenan, Cicittobrasse (Partnership)	376 East Main St	Colleyville	PA	19426 -	5	9	11	\$ 150.00
William Wanger	PO Box 44	Gwynedd	PA	19436 -	5	9	11	\$ 100.00
								\$
								\$
								\$

PAGE TOTAL
\$ 750.00

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

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 Pat Moresco	Reporting Period From 5/3/11 To 6/6/11
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	DATE			AMOUNT
	MO	DAY	YEAR	
Full Name of Contributor Steven F Gardon	5	19	11	\$ 100.00
Mailing Address 1635 Market St				\$
City Phila	State PA	Zip Code (Plus 4) 19103-		\$
Full Name of Contributor Andrew E DiPiero	5	11	11	\$ 100.00
Mailing Address 3879 Whitman Rd				\$
City Huntingdon Valley	State PA	Zip Code (Plus 4) 19006 -		\$
Full Name of Contributor Carl Weiner	5	22	11	\$ 250.00
Mailing Address 1015 Pheasant Meadow Rd				\$
City Blue Bell	State PA	Zip Code (Plus 4) 19422 -		\$
Full Name of Contributor JACK Kowick	5	22	11	\$ 150.00
Mailing Address 1224 Gulph Creek Drive				\$
City Radnor	State PA	Zip Code (Plus 4) 19087 -		\$
Full Name of Contributor Robert E Walton	5	22	11	\$ 100.00
Mailing Address 102 Watercrest Dr				\$
City Doylestown	State PA	Zip Code (Plus 4) 18901 -		\$
Full Name of Contributor Donna M Parisi	5	10	11	\$ 100.00
Mailing Address 1468 Plymouth Blvd				\$
City Ply Mtg	State PA	Zip Code (Plus 4) 19462 -		\$
Full Name of Contributor	5	9	11	\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Full Name of Contributor				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$

PAGE TOTAL
\$ 800.00

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

ALL OTHER CONTRIBUTIONS

page 7 of 11

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 FRIENDS OF Pat Moresco	Reporting Period From <u>5/3/11</u> To <u>6/6/11</u>
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	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributor Walter H Flamm Jr	5	3	11	\$ 500.00
Mailing Address 249 Northwestern Ave				\$
City Phila	State PA	Zip Code (Plus 4) 19128-		\$
Employer Name Flamm Walton PC	Occupation Attorney			
Employer Mailing Address/Principal Place of Business 794 Penllyn Pike Blue Bell Pa 19422				
Full Name of Contributor Ernest G Szoke	5	19	2011	\$ 2500.00
Mailing Address 1312 Valley Forge Circle Apt				\$
City King of Prussia	State PA	Zip Code (Plus 4) 19406-		\$
Employer Name Ernest G Szoke, Esq	Occupation			
Employer Mailing Address/Principal Place of Business 1000 Valley Forge Circle Suite 1312 King of Prussia PA 19406				
Full Name of Contributor				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				
Full Name of Contributor				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				
Full Name of Contributor				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				

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

PAGE TOTAL
\$ 3000.00

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 FRIENDS OF Pat Mosesso	Reporting Period From <u>5/3/11</u> To <u>6/6/11</u>
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$

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

3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period	(3) \$ 492.⁵⁰

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.)	\$ 492.⁵⁰
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SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

PAGE 9 of 11

Name of Filing Committee or Candidate FRIENDS OF Pat Maresco	Reporting Period From 5/3/11 To 6/6/11
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	DATE	AMOUNT
Full Name of Contributor Paul Bartle	MO. DAY YEAR 6 5 11	\$ 492.50
Mailing Address 201 Westminster Rd	MO. DAY YEAR	\$
City Maple Glen State PA Zip Code (Plus 4) 19002-	MO. DAY YEAR	\$
Employer of Contributor Hugh Schwartz LLP	Occupation Attorney	
Employer Mailing Address/Principal Place of Business 40 East AIRY ST Norristown PA 19401	Description of Contribution printed envelopes for contribution	
Full Name of Contributor	MO. DAY YEAR	\$
Mailing Address	MO. DAY YEAR	\$
City State Zip Code (Plus 4)	MO. DAY YEAR	\$
Employer of Contributor	Occupation	
Employer Mailing Address/Principal Place of Business	Description of Contribution	
Full Name of Contributor	MO. DAY YEAR	\$
Mailing Address	MO. DAY YEAR	\$
City State Zip Code (Plus 4)	MO. DAY YEAR	\$
Employer of Contributor	Occupation	
Employer Mailing Address/Principal Place of Business	Description of Contribution	
Full Name of Contributor	MO. DAY YEAR	\$
Mailing Address	MO. DAY YEAR	\$
City State Zip Code (Plus 4)	MO. DAY YEAR	\$
Employer of Contributor	Occupation	
Employer Mailing Address/Principal Place of Business	Description of Contribution	
Full Name of Contributor	MO. DAY YEAR	\$
Mailing Address	MO. DAY YEAR	\$
City State Zip Code (Plus 4)	MO. DAY YEAR	\$
Employer of Contributor	Occupation	
Employer Mailing Address/Principal Place of Business	Description of Contribution	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

PAGE TOTAL 50
\$ 492.

**SCHEDULE III
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate FRIENDS OF Palmaseusa	Reporting Period From 5/3/11 To 6/6/11
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To Whom Paid Blue Bell Inn	MO.	DAY	YEAR	Amount \$ 1282.08
Mailing Address 601 Skippack Pike				Description of Expenditure FOOD, drinks, tip ^{FOR} STAFF FUNDRAISER
City Blue Bell	State PA	Zip Code (Plus 4) 19422 -		
To Whom Paid Cedars Advertising	MO.	DAY	YEAR	Amount \$ 4621.60
Mailing Address PO Box 85				Description of Expenditure
City Cedars	State PA	Zip Code (Plus 4) 19423 -		
To Whom Paid merc	MO.	DAY	YEAR	Amount \$ 3000.-
Mailing Address 314 E Johnson Highway				Description of Expenditure green ballots
City Norristown	State PA	Zip Code (Plus 4) 19401 -		
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
\$ 8903.68**

SCHEDULE IV
STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Name of Filing Committee or Candidate FRIENDS OF Pat MOSCOSO	Reporting Period From 5/3/11 To 6/6/11
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Name of Creditor Pat Mosesso		DATE DEBT INCURRED			Outstanding Balance of Debt \$ 5000.	
Mailing Address 140 Avondale Rd		MO	DAY	YEAR		
City Warristown		4	7	2011		
		State PA	Zip Code (Plus 4) 19403-			

Description of Debt
loan to committee

Name of Creditor Pat Mosesso		DATE DEBT INCURRED			Outstanding Balance of Debt \$ 3771.06	
Mailing Address 140 Avondale R		MO	DAY	YEAR		
City Warristown		3	31	2011		
		State PA	Zip Code (Plus 4) 19403-			

Description of Debt

Name of Creditor		DATE DEBT INCURRED			Outstanding Balance of Debt \$	
Mailing Address		MO	DAY	YEAR		
City		State	Zip Code (Plus 4)			
			-			

Description of Debt

Name of Creditor		DATE DEBT INCURRED			Outstanding Balance of Debt \$	
Mailing Address		MO	DAY	YEAR		
City		State	Zip Code (Plus 4)			
			-			

Description of Debt

Name of Creditor		DATE DEBT INCURRED			Outstanding Balance of Debt \$	
Mailing Address		MO	DAY	YEAR		
City		State	Zip Code (Plus 4)			
			-			

Description of Debt

Name of Creditor		DATE DEBT INCURRED			Outstanding Balance of Debt \$	
Mailing Address		MO	DAY	YEAR		
City		State	Zip Code (Plus 4)			
			-			

Description of Debt

PAGE TOTAL
\$ 8771.06

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.