

Commonwealth of Pennsylvania
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: <input type="checkbox"/>		Report Filed By: <input type="checkbox"/>		CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE ^{2.} <input type="checkbox"/>	LOBBYIST ^{3.} <input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist: Friends of Leslie Richards						
Street Address: 2106 Basswood Drive						
City: Lafayette Hill			State: PA		Zip Code: 19444	
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY ^{1.}	2ND FRIDAY PRE-PRIMARY ^{2.} <input checked="" type="checkbox"/>	30 DAY POST PRIMARY ^{3.}	AMENDMENT REPORT?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	6TH TUESDAY PRE-ELECTION ^{4.}	2ND FRIDAY PRE-ELECTION ^{5.}	30 DAY POST ELECTION ^{6.}	TERMINATION REPORT?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	ANNUAL REPORT ^{7.}	YEAR	FILING METHOD () CHECK ONE <input type="checkbox"/>	PAPER	DISKETTE	

Name of Office Sought by Candidate: County Commissioner			DATE OF ELECTION			District Number	Office Code	Party Code	County Code
MO.	DAY	YEAR	MO.	DAY	YEAR	N/A	0TH	DEM	46
05	17	2011							

(SEE INSTRUCTIONS FOR CODES)

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR
	A. Amount Brought Forward From Last Report						
B. Total Monetary Contributions and Receipts (From Schedule I)	01	01	2011	To	05	02	2011
C. Total Funds Available (Sum of Lines A and B)	\$ 82,603.17						
D. Total Expenditures (From Schedule III)	\$ 4,799.90						
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 87,403.07						
F. Value of In-Kind Contributions Received (From Schedule II)	\$ 62,923.85						
G. Unpaid Debts and Obligations (From Schedule IV)	\$ 24,479.22						
	\$ - 0 -						
	\$ - 0 -						

FOR OFFICE USE ONLY

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 2011 MAY -6 A 11:02
 OFFICE OF
 VOTER SERVICES
 MONTG. 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 20 11 Sheri Risler Signature	} Signature of Person Submitting Report Sheri Risler Printed Name 215 275 0320 Area Code Daytime Telephone Number
My commission expires 05/04/15 MO. DAY YR.	

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 20 11 Leslie Richards Signature	} Signature of Candidate Leslie Richards Printed Name 610 457 1744 Area Code Daytime Telephone Number
My commission expires 05/04/15 MO. DAY YR.	

Department of State • Bureau of Commissions, Elections and Legislation
 COMMONWEALTH OF PENNSYLVANIA Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280

Notarial Seal
 Dana D. Conaway, Notary Public
 Whitmarsh Twp., Montgomery County
 My Commission Expires May 4, 2015
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

COMMONWEALTH OF PENNSYLVANIA
 Notarial Seal
 Dana D. Conaway, Notary Public
 Whitmarsh Twp., Montgomery County
 My Commission Expires May 4, 2015

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends of Leslie Richards</i>	Reporting Period From <i>01-01-11</i> To <i>05-02-11</i>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$ <i>100.00</i>

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ <i>- 0 -</i>
All Other Contributions (Part B)	\$ <i>1,300.00</i>
TOTAL for the Reporting Period	(2) \$ <i>1,300.00</i>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ <i>- 0 -</i>
All Other Contributions (Part D)	\$ <i>3,300.00</i>
TOTAL for the Reporting Period	(3) \$ <i>3,300.00</i>

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period	(4) \$ <i>99.90</i>

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)</i>	\$ <i>4799.90</i>
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PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

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 Leslie Richards	Reporting Period From 01-01-11 To 05-02-11
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	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$

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

PAGE TOTAL
\$ - 0 -

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 Leslie Richards	Reporting Period From 01-01-11 To 05-02-11
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Jill Plotnick	01	07	11	\$ 200.00
Mailing Address 114 Chinnbery Dr.	MO.	DAY	YEAR	\$
City Lafayette Hill	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 19444				
Devra Goldstein	02	11	11	\$ 100.00
Mailing Address 10631 SW 113 Pl Apt A	MO.	DAY	YEAR	\$
City Miami	MO.	DAY	YEAR	\$
State FL				
Zip Code (Plus 4) 33176				
Marc Jonas	02	12	11	\$ 250.00
Mailing Address 1465 Granary Rd	MO.	DAY	YEAR	\$
City Blue Bell	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 19422				
Richard & Marguerite Greenhall	02	12	11	\$ 100.00
Mailing Address 211 Atlantic Ave	MO.	DAY	YEAR	\$
City Palm Beach	MO.	DAY	YEAR	\$
State FL				
Zip Code (Plus 4) 33480				
Nicholas Torres	01	05	11	\$ 250.00
Mailing Address 501 Glen Echo Road	MO.	DAY	YEAR	\$
City Phila	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 19119				
Deborah Kurtz	02	02	11	\$ 250.00
Mailing Address 1426 Monk Road	MO.	DAY	YEAR	\$
City Gladwyne	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 19035				
Barbara Rice	02	02	11	\$ 150.00
Mailing Address 712 Germantown Pike	MO.	DAY	YEAR	\$
City Lafayette Hill	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 19444				
[Redacted]				\$
Mailing Address [Redacted]	MO.	DAY	YEAR	\$
City [Redacted]	MO.	DAY	YEAR	\$
State [Redacted]				
Zip Code (Plus 4) [Redacted]				

PAGE TOTAL

\$ 1300.00

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

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 <i>Friends of Leslie Richards</i>	Reporting Period From <i>01-01-11</i> To <i>05-02-11</i>
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Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				

PAGE TOTAL	\$ <i>- 0 -</i>
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Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

ALL OTHER CONTRIBUTIONS

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 Leslie Richards	Reporting Period From 01-01-11 To 05-02-11
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Obermayer Rebman Maxwell	02	25	11	\$ 500.00
Mailing Address 1617 John F. Kennedy Blvd	MO.	DAY	YEAR	\$
City Philadelphia	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 19103				
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				
Nora Winkleman	02	12	11	\$ 1000.00
Mailing Address 1018 Green St	MO.	DAY	YEAR	\$
City Harrisburg	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 17102				
Employer Name PA House of Representatives	Occupation			
Employer Mailing Address/Principal Place of Business Democratic Caucus				
Manko, Gold, Kather's	02	12	11	\$ 500.00
Mailing Address 401 E. City Ave #500 Fox LLP	MO.	DAY	YEAR	\$
City Bala Cynwyd	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 19004				
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				
Schnader Harrison Segal & Lewis	04	05	11	\$ 1000.00
Mailing Address 1600 Market St.	MO.	DAY	YEAR	\$
City Phila	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 19103				
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				
Ellen Sternberg	03	29	11	\$ 300.00
Mailing Address 150 Belle Circle	MO.	DAY	YEAR	\$
City Blue Bell	MO.	DAY	YEAR	\$
State PA				
Zip Code (Plus 4) 19444				
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
\$ 3300.00

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 <i>Friends of Leslie Richards</i>	Reporting Period From <i>01-01-11</i> To <i>05-02-11</i>
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Full Name <i>First Trust Bank</i>

Mailing Address						
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City <i>Phila</i>	State <i>PA</i>	Zip Code (Plus 4) -	MO.	DAY	YEAR	Amount \$ <i>99.90</i>
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Receipt Description <i>Interest income</i>

Full Name

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

Full Name

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

Full Name

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

Full Name

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

City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$
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Receipt Description

Full Name

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

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.	PAGE TOTAL \$ <i>99.90</i>
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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 <i>Friends of Leslie Richards</i>	Reporting Period From <i>01-01-11</i> To <i>05-02-11</i>
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$ <i>- 0 -</i>

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

3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period	(3) \$ <i>- 0 -</i>

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD <i>(Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)</i>	\$ <i>- 0 -</i>
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SCHEDULE II
PART F

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate <i>Friends of Leslie Richards</i>	Reporting Period From <i>01-01-11</i> To <i>05-02-11</i>
--	---

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Description of Contribution:				
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Description of Contribution:				
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Description of Contribution:				
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Description of Contribution:				
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Description of Contribution:				
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Description of Contribution:				
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Description of Contribution:				

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL \$ <i>-0-</i>

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

Name of Filing Committee or Candidate <i>Friends of Leslie Richards</i>	Reporting Period From <i>01-01-11</i> To <i>05-02-11</i>
--	---

				DATE	AMOUNT
Full Name of Contributor	MO.	DAY	YEAR		
Mailing Address	MO.	DAY	YEAR		\$
City	MO.	DAY	YEAR		\$
State					\$
Zip Code (Plus 4)					\$
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	MO.	DAY	YEAR		\$
State					\$
Zip Code (Plus 4)					\$
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	MO.	DAY	YEAR		\$
State					\$
Zip Code (Plus 4)					\$
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	MO.	DAY	YEAR		\$
State					\$
Zip Code (Plus 4)					\$
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	MO.	DAY	YEAR		\$
State					\$
Zip Code (Plus 4)					\$
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
\$ *0*

**SCHEDULE III
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate Friends of Leslie Richards	Reporting Period From 01-01-11 To 05-02-11
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To Whom Paid Independence Strategy	MO. 01	DAY 11	YEAR 11	Amount \$ 1,250.00
Mailing Address P. O Box 789	Description of Expenditure			
City Wayne	State PA	Zip Code (Plus 4) 19087		
To Whom Paid Independence Strategy	MO. 02	DAY 21	YEAR 11	Amount \$ 1,250.00
Mailing Address P. O Box 789	Description of Expenditure			
City Wayne	State PA	Zip Code (Plus 4) 19 -		
To Whom Paid Shapiro Richards	MO. 02	DAY 21	YEAR 11	Amount \$ 50,000.00
Mailing Address 1917 Guernsey Ave	Description of Expenditure			
City Abington	State PA	Zip Code (Plus 4) 19001		
To Whom Paid J Shapiro Richards	MO. 04	DAY 03	YEAR 11	Amount \$ 8,550.00
Mailing Address 1917 Guernsey Ave	Description of Expenditure			
City Abington	State PA	Zip Code (Plus 4) 19007		
To Whom Paid Heart for Judge	MO. 04	DAY 08	YEAR 11	Amount \$ 500.00
Mailing Address 312 Flourtown Rd	Description of Expenditure			
City Lafayette Hill	State PA	Zip Code (Plus 4) 19444		
To Whom Paid Colonial Area Democrats	MO. 04	DAY 08	YEAR 11	Amount \$ 1,000.00
Mailing Address 21 E. Arty St	Description of Expenditure			
City Norristown	State PA	Zip Code (Plus 4) 19041		
To Whom Paid Online paypal charges	MO. 05	DAY 02	YEAR 11	Amount \$ 373.85
Mailing Address (2010 + 2011)	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

\$ 62,923.85

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 <i>Friends of Leslie Richards</i>	Reporting Period From <i>01-01-11</i> To <i>05-2-11</i>
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Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City	State	Zip Code (Plus 4)				
Description of Debt						

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

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

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

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

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

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.	PAGE TOTAL \$ <i>0 -</i>
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