

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 ^{1.}		COMMITTEE ^{2.} <input checked="" type="checkbox"/>		LOBBYIST ^{3.}	
Name of Filing Committee, Candidate or Lobbyist: <i>Friends of Mark Levy</i>									
Street Address: <i>PO Box 176</i>									
City: <i>Norristown</i>					State: <i>PA</i>		Zip Code: <i>19404-0176</i>		
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 type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION ^{4.}		2ND FRIDAY PRE-ELECTION ^{5.} <input checked="" type="checkbox"/>		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 <input checked="" type="checkbox"/>		DISKETTE <input type="checkbox"/>

Name of Office Sought by Candidate: <i>PROTHONOTARY</i>				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
MO.	DAY	YEAR	MO.	DAY	YEAR	N/A	OTH	DEM	46	

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)							
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)							

FOR OFFICE USE ONLY

RECEIVED
 2012 OCT 25 P 3:2
 OFFICE OF
 SECRETARY OF
 TREASURY

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 26th day of October 2012

NOTARIAL SEAL DANIELLE CUBAS Notary Public PHILADELPHIA CITY, PHILADELPHIA CNTY My Commission Expires Jun 20, 2018 My commission expires <u>06-20-2018</u> MO. DAY YR.	Signature of Person Submitting Report <i>Patrick Parkinson</i> PATRICK PARKINSON Printed Name 267 Area Code 773-3251 Daytime Telephone Number
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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 26th day of October 2012

NOTARIAL SEAL DANIELLE CUBAS Notary Public PHILADELPHIA CITY, PHILADELPHIA CNTY My Commission Expires Jun 20, 2018 My commission expires <u>06-20-2016</u> MO. DAY YR.	Signature of Candidate <i>Mark Levy</i> MARK LEVY Printed Name 267 Area Code 738-6536 Daytime Telephone Number
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CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends of Mark Levy</i>	Reporting Period From <u>1/1/12</u> To <u>10/22/12</u>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
	TOTAL for the Reporting Period	(1) \$ <u>1975.-</u>

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)		
Contributions Received from Political Committees (Part A)		\$ <u>470.-</u>
All Other Contributions (Part B)		\$ <u>1385.-</u>
	TOTAL for the Reporting Period	(2) \$

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		
Contributions Received from Political Committees (Part C)		\$ <u>2350.-</u>
All Other Contributions (Part D)		\$ <u>1000.-</u>
	TOTAL for the Reporting Period	(3) \$

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)		
	TOTAL for the Reporting Period	(4) \$ <u>30.-</u>

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.)	\$ <u>7,210.-</u>
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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 <i>Friends of Mark Levy</i>	Reporting Period From <i>1/1/12</i> To <i>10/22/12</i>
--	---

Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	\$
<i>see attached</i>				\$
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)				\$
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
\$ <i>470.00</i>

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Name of Filing Committee
Friends of Mark Levy

Date	Name
9/10/2012	Pennsylvania Liberty Fund
9/24/2012	1776 PAC
9/24/2012	Fattah for Congress
9/24/2012	Friends of Robert Sassi

Page Total

Part A
Contributions Received From Political Committees
\$50.01 to \$250.00

Reporting Period
From 01/01/2012 to 10/22/2012

Address	Amount
101 Greenwood Ave Jenkintown, PA 19046	\$200.00
3031 A Walton Rd Plymouth Meeting, PA 19	\$70.00
PO Box 30743 Phila PA 19104	\$100.00
1951 Main Ave Conshohocken, PA 19426	\$100.00
	\$470.00

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Name of the Filing Committee
Friends of Mark Levy

Part B
All Other Contributions
\$50.01 to \$250.00

Reporting Period
From 01/01/2012 to 10/22/2012

Date	Name	Address	Amount
2/17/2012	Joanne Olszewski	1538 Bethlehem Pike Flourtown, PA 19031	\$100.00
4/3/2012	Michael Hinkson	1908 Midfield Ave Feasterville PA 19053	\$250.00
8/10/2012	Richard Cohen	618 Swede St Norristown, PA 19401	\$70.00
9/11/2012	Alyssa Orler	2009 Willowood Dr Limerick, PA 19466	\$70.00
9/11/2012	Lisa Murray	71 W 5th St Pottstown, PA 19464	\$70.00
9/11/2012	Sarah John	2325 Welsh Rd Pottstown, PA 19464	\$70.00
9/11/2012	Angelina Salamone	2101 Coles Blvd Norristown, PA 19401	\$105.00
9/13/2012	Marlene Linkmeyer	1476 Braddock Ln Wynnwood, PA 19096	\$100.00
9/13/2012	Lawrence Roberts	49 White Hurst Dr Richboro PA 18954	\$100.00
9/13/2012	Steven B Gross	Information Requested	\$100.00
9/13/2012	Lawrence O'Connor	301 Havertord Ave Narberth PA 19072	\$70.00
9/13/2012	Daniel P Bauder	2866 Tolbut St Phila PA 19136	\$70.00
9/13/2012	Steven Barret	501 Clothier Rd Wynnwood PA 19096	\$70.00
9/13/2012	Mary Jane Macrae	509 N Essex Ave Narberth PA 19072	\$70.00
9/13/2012	Jeffrey Rudnick	200 Beech Hill Rd Wynnwood PA 19096	\$70.00
Page Total			\$1,385.00

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 Friends of Mark Levy	Reporting Period From <u>1/1/12</u> To <u>10/22/12</u>
--	---

Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
<i>see attached</i>				\$
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)				\$
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 C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 2350 -

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Part C
Contributions Received From Political Committees
Over \$250.00

Reporting Period	Name of Filing Committee	Date	Address	Amount
From 01/01/2012 to 10/22/2012	Friends of Mark Levy	8/10/2012	103 Red Rambler Dr Lafayette Hills PA 1944	\$1,000.00
	Friends of Vince Gillen	8/22/2012	142 E Main St Lansdale PA 19448	\$1,000.00
	We the People PAC	9/10/2012	PO Box 2232 Jenkintown, PA 19046	\$350.00
				\$2,350.00

Page Total

**PART D
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 <i>Friends of Mark Levy</i>	Reporting Period From <u>1/1/12</u> To <u>10/22/12</u>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
<i>see attached</i>				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Employer Name		Occupation		
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Employer Name		Occupation		
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Employer Name		Occupation		
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
Mailing Address				\$
City	State	Zip Code (Plus 4)		\$
Employer Name		Occupation		
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
				\$
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 <i>\$ 1000.00</i>

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Part D
All Other Contributions
over \$250

Reporting Period
From 01/01/2012 to 10/22/2012

Name of the Filing Committee
Friends of Mark Levy

Date	Name	Address	Amount	Employer	Employers Address	Occupation
9/10/2012	Mike Hinkson	1908 Midfield Ave Feasterville PA 19053	\$500.00	PSI	3494 Progress Drive Bensalem PA 19020	Owner
2/17/2012	Peter Leon	1 Merton Way Lower Merton PA	\$500.00	Tessman's	Info requested	Owner
			\$1,000.00	Page Total		

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 Mark Levy</i>	Reporting Period From <i>1/1/12</i> To <i>10/22/12</i>
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Full Name <i>First Niagara</i>

Mailing Address <i>401 Plymouth Rd</i>

City <i>Plymouth Meeting</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19462-</i>	MO. <i>6</i>	DAY <i>5</i>	YEAR <i>12</i>	Amount <i>\$ 30.-</i>
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Receipt Description <i>Returd of incorrect Bank fee of \$10 per mo x 3 mo.</i>

Full Name

Mailing Address

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

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

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>\$ 30.-</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 Mark Levy</i>	Reporting Period From <i>1/1/12</i> To <i>10/22/12</i>
--	---

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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IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate <i>Friends of Mark Levy</i>	Reporting Period From <i>1/1/12</i> To <i>10/22/12</i>
--	---

Full Name of Contributor <i>N/A</i>	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Description of Contribution:				

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Description of Contribution:				

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Description of Contribution:				

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Description of Contribution:				

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Description of Contribution:				

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

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

Name of Filing Committee or Candidate <i>Friends of Mark Levy</i>	Reporting Period From <u>1/1/12</u> To <u>10/22/12</u>
--	---

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
<i>N/A</i>				\$
Mailing Address				\$
City				\$
State				
Zip Code (Plus 4)				
Employer of Contributor	Occupation			
Employer Mailing Address/Principal Place of Business	Description of Contribution			
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				
Zip Code (Plus 4)				
Employer of Contributor	Occupation			
Employer Mailing Address/Principal Place of Business	Description of Contribution			
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				
Zip Code (Plus 4)				
Employer of Contributor	Occupation			
Employer Mailing Address/Principal Place of Business	Description of Contribution			
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				
Zip Code (Plus 4)				
Employer of Contributor	Occupation			
Employer Mailing Address/Principal Place of Business	Description of Contribution			
Full Name of Contributor				\$
Mailing Address				\$
City				\$
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
\$

SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <i>Friends of Mark Levy</i>	Reporting Period From <i>1/1/12</i> To <i>10/22/12</i>
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To Whom Paid <i>see attached</i>	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)		
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
\$ 5327.75

Schedule III
Statement of Expenditures

Reporting Period
From 01/01/2012 to 10/22/2012

Address	Description of Expenditure	Amount
2400 Chemical Rd Plymouth Meeting PA 19462	Office Material	-28.61
401 Plymouth Rd Plymouth Meeting PA 19462	Bank Fee	-10.00
1502 Dekalb Pk Blue Bell PA 19422	Meeting Expense	-31.68
501 Dekalb St Bridgeport PA 19405	Meeting Expense	-35.26
512 W Germantown Pike Plymouth Meeting PA 19462	Meeting Expense	-54.44
551 Germantown Pk Lafayette Hill PA 19444	Meeting Expense	-49.89
401 Plymouth Rd Plymouth Meeting PA 19462	Bank Fee	-10.00
417 Germantown Pk Lafayette Hill PA 19401	Meeting Expense	-65.85
n/a	Out of campaign checks	-300.00
10931 Laureate Dr San Antonio TX	Campaign Account Checks	-27.80
401 Plymouth Rd Plymouth Meeting PA 19462	Bank Fee	-10.00
Address requested	Contribution	-50.00
Address requested	Contribution	-100.00
200 W Ridge Pk Conshohocken PA 19426	Meeting Expense	-8.00
21 E. Airy Street Norristown, PA 19401	Ad for Spring Dinner	-142.00
Address requested	Meeting Expense	-11.42
401 Plymouth Rd Plymouth Meeting PA 19462	Bank Fee	-10.00
401 Plymouth Rd Plymouth Meeting PA 19462	Bank Fee	-10.00
512 W Germantown Pike Plymouth Meeting PA 19462	Meeting Expense	-38.39
405 Germantown Pk Lafayette Hill PA 19444	Meeting Expense	-24.02
8005 Ventnor Ave Margate NJ	Shore Event Expense	-14.95
7950 Ventnor Ave Margate NJ	Shore Event Expense	-69.51
8016 Ventnor Ave Margate NJ	Shore Event Expense	-18.93
9300 Ventnor Ave Margate NJ	Shore Event Expense	-7.66
Address requested	Fuel for shore event	-50.00
512 W Germantown Pike Plymouth Meeting PA 19462	Meeting Expense	-97.32
107 W Ridge Pk Conshohocken PA 19426	Meeting Expense	-12.25
505 W Germantown Pk Plymouth Meeting PA 19462	Meeting Expense	-33.94
413 West Ridge Pk Plymouth Meeting PA 19462	Meeting Expense	-14.02

Name of the Filing Committee
Friends of Mark Levy

Date	To Whom Paid
1/16/2012	Office Depot
1/31/2012	First Niagara
2/12/2012	From the Boot
2/24/2012	Franzone's
2/27/2012	Redstone
2/28/2012	Moe's
2/29/2012	First Niagara
3/5/2012	The Lucky Dog Saloon
3/16/2012	Bank Check
3/28/2012	Harland Clarke
3/30/2012	First Niagara
4/12/2012	Colonial Area Dem
4/13/2012	154 Dem Com
4/19/2012	Tony A's
4/19/2012	MCD/C
4/25/2012	Dunkin Donuts
4/30/2012	First Niagara
5/31/2012	First Niagara
6/9/2012	Redstone
7/31/2012	Ye Old Ale House
8/16/2012	Starbucks
8/16/2012	Downbeach Liquors
8/17/2012	Dino's Subs
8/17/2012	Wawa
8/18/2012	Sunoco
8/23/2012	Redstone
8/25/2012	Fingers Wings and Other Things
8/27/2012	Qdoba
8/29/2012	Starbucks

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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 Mark Levy</i>	Reporting Period From <i>1/1/12</i> To <i>10/22/12</i>
--	---

Name of Creditor <i>N/A</i>				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 \$
