Campaign Finance Report

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

Filer Identificati Number :	on	80006	550			Rep File			CANDI	DATE		COMN	4ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, C	Candida	te or Lo	bbyist:		INDI	ANA	A CO	DEM CO	4								
Street Address:	РО ВОХ	315																
City:	INDIAN	Α							State:	PA			Zip Cod	le: 15	5701-0	000		
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRIDAY PRIMARY	/ PRE	- 2		30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	•	/
(place X to the right of	6TH TUESDA PRE-ELECTIO		4.	2ND FRIDAY ELECTION	/ PRE	- 5	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	•	/
report type)	ANNUAL RE	PORT	7. X	Year 2012					IG METHO				PAPER		/	DISKE	TTE	
Name of Office S	- Sought by Ca	ndidate	e:			_	_		DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
									МО	DAY	YE	AR			-			
									11		6	2012		(SEE IN	STRUCTI	ONS FOR (CODES)	
Summary of Expenditures		nd	МО	DAY	YEAR		_	_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
			1	.1 27	2	012	T	0	12		31	2012						
A. Amount Bro	ught Forwar	d From	Last Re	eport				\$			8,8	860.57						
B. Total Monet	ary Contribu	itions A	nd Rece	eipts (From	Sche	dule	I)	\$				46.85						
C. Total Funds	Available (S	um Of	Lines A	and B)				\$			8,9	07.42						
D. Total Expen	ditures (Fro	m Sche	dule III	(1)				\$			3	21.25						
E. Ending Cash	Balance (Su	ubtract	Line D I	From Line (:)			\$			8,5	86.17						
F. Value Of In-	Kind Contrib	outions	Receive	ed (From So	hedu	le II))	\$				0.00						
G. Unpaid Debt	s And Obliga	ations ((From S	chedule IV)			\$				0.00			'			
					AFF	IDA	VI	ΓSE	CTION									
PART I - If this is	s a Committe	ee repo	rt, treas	surer sign h	nere.	[f thi	s is	a Can	didate re	eport, o	andi	date sig	ın here.					
I swear (or affirm) correct and comple		ort, inclu	iding the	attached sch	edules	filed	on p	paper o	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ıe
Sworn to and subs	cribed before day of	me this		20							s	ignature	of Perso	n Submit	ting Rep	ort		_
				·				-					Prin	ted Name	<u> </u>			-
My Commission Ex		Signatur	e										Ema	:1				_
	мо)	DA	Υ	YR			-		Are	ea Cod	e		e Teleph	none Nu	mber		-
Part II- If this is	a report of	a candi	idate's a	authorized	Comn	nittee	e, Ca	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the b						•			_		y provisi	ions of the	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before n	ne this										Si	ignature o	of Candid	ate			-
	day of			20				-						-1 N-				_
	Sian	nature						-					Printe	d Name				
My Commission Exp	_	acure											Ema	il				-
	-	мо	DA	ıΥ	YR			•		Area	Code		Da	aytime T	elephon	e Numb	er	·

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
INDIANA CO DEM COM	From:	11/27/201	<u>2</u> To:	12/31/2012
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	46.85
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	46.85

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•			•	•		PAGE TOTAL

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

0.00

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 o	r Candidate		Rep Fro	oorting P	eriod	To	o:	
			l		DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

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

PAGE TOTAL \$0.00

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 from Over \$250.00 in the reporting period.

Name of Filing Committee or Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	tee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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			Rep	orting Pe	riod			
			Fron	n:		To) :	
				D	ATE		ı	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			l	PAGE TOTAL
							\$	0.00

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	Reporting P	Period	
INDIANA CO DEM COM	From:	<u>11/27/2012</u> To:	12/31/2012

			D	ATE		AMOUNT
Full Name Verizon Wireless			МО	DAY	YEAR	
Mailing Address P.O. Box 25505			12	6	2012	\$ 46.85
City Lehigh Valley	State PA	Zip Code (Plus 4) 18002	12	0	2012	
Receipt Description refund						

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

PAGE TOTAL \$ 46.85

SCHEDULE II

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	Reporting Per	iod	
INDIANA CO DEM COM	From:	<u>11/27/2012</u> To:	12/31/2012
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	1				Re	porting l	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									- \$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II, I	n-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candida	te		Reporti	ng Period			
INDIANA CO DEM COM			From	11/2	7/2012	То:	12/31/2012
				DATE			AMOUNT
To Whom Paid Pennsylvania American Water			МО	DAY	YEAR		
Mailing Address P.O. Box 371412			12	2	2012	\$	42.94
City Pittsburgh	State PA	Zip Code (Plus 4) 15250	Descrip water	otion of Exp	penditure		
To Whom Paid Verizon			мо	DAY	YEAR		
lailing Address P.O. Box 15026				2	2012	\$	34.35
City Albany	State NY	Zip Code (Plus 4) 12212	Descrip telepho	otion of Exp	penditure		
To Whom Paid Penelec			мо	DAY	YEAR		
Mailing Address P.O. Box 3687			12	2	2012	\$	151.25
City Akron	State OH	Zip Code (Plus 4) 44309	Descrip electric	otion of Exp	penditure		
To Whom Paid Comcast			мо	DAY	YEAR		
Mailing Address P.O. Box 3001			12	2	2012	\$	52.58
City Southeastern	State PA	Zip Code (Plus 4) 19398		otion of Exp			
To Whom Paid			мо	DAY	YEAR		

Mailing Address

Indiana

City

47 S. 7th St.

State

PΑ

5.60

2012

12

postage

Description of Expenditure

Zip Code (Plus 4)

15701

To Whom Paid The Co-Op Store				мо	DAY	YEAR		
Mailing Address 319 Pratt Dr.			12	5	2012	\$	0.63	
City Indiana		State PA	Zip Code (Plus 4) 15701	Description of Expenditure large envelope				
To Whom Paid Verizon				МО	DAY	YEAR		
Mailing Address P.O. Box 15026				12	30	2012	\$	33.90
City Albany		State NY	Zip Code (Plus 4) 12212	Description of Expenditure telephone				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.								PAGE TOTAL
							\$	321.25