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 :			port ed B					СОМ	ITTEE	✓	LOBI	BYIST					
Name of Filing C	ommittee, Candi	date or L	obbyist:	•	LAW	VREN	ICE C	OUNTY F	REPUBL	ICAN	COMM	1ITTEE					
Street Address:	3015 WILMI	NGTON F	ROAD														
City:	NEW CASTLE							State:	PA			Zip Cod	de: 1	6105			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2. X	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	•	/
report type)	ANNUAL REPOR	7.	Year 2013					NG METH				PAPER		\	DISKE	TTE	
Name of Office S	ought by Candid	ate:	•					DATE C)F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Count	ty
								МО	DAY	YE	AR	Number	code			Couc	
								11		5	2013		(SEE IN	ISTRUCTI	ONS FOR C	ODES)	
	Receipts and	МО	DAY	YEAR	l			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		4 2	20	013	Т	0	5	5	6	2013						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			9,9	98.98						
B. Total Moneta	B. Total Monetary Contributions And Receipts (From Schedule I) \$ 500.0								00.00								
C. Total Funds Available (Sum Of Lines A and B)							\$			10,4	198.98						
D. Total Expenditures (From Schedule III)							\$			1	80.00						
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)			\$			10,3	18.98						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	hedul	le II	I)	\$				0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)				\$				0.00						
				AFF	IDA	٩VI	ΓSE	CTION									
PART I - If this is	a Committee re	ort, trea	surer sign h	ere. 1	[f th	is is	a Car	ndidate r	eport, o	candi	date sig	jn here.					
I swear (or affirm) correct and comple	that this report, in ete.	cluding the	e attached sche	edules	file	d on	paper	or by elect	tronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , tru	ie.
Sworn to and subs	cribed before me th day of	is	20							S	ignature	of Perso	n Submit	ting Rep	oort		
	Signat	ure					-					Prin	ted Nam	e			_
My Commission Ex	rpires						_					Ema	il				_
	МО	D	AY	YR					Ar	ea Cod	e	Daytim	e Telepi	hone Nu	mber		
Part II- If this is	a report of a car	didate's	authorized C	Comm	nitte	e, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	f this	polit	tical	comm	ittee has r	not viola	ted an	y provis	ions of th	e act of J	lune 3,1	937 (P.L.	. 1333	,
Sworn to and subsc	ribed before me this day of	i	20								s	ignature o	of Candid	late			-
							_					Printe	d Name				-
My Commission Exp	Signature						-					Ema	il				-
, солилизают схр					_	_	•										
	МО	D	AY	YR					Area	Code		Da	aytime 1	elephor	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
LAWRENCE COUNTY REPUBLICAN COMMITTEE	From:	4/2/201	<u>13</u> To:	<u>5/6/2013</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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)			\$	500.00
TOTAL for the Reporting	y Period	(3)	\$	500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	500.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize only with an aggregate valu							
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		-			DATE			AMOUNT
Full Name of Contribution	ng Committee			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

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 Filling Committee of Candidate				Reporting Period From: To:				
			Fro	m:		10):	
					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		Α	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 S	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 Candid	ate			Rep	orting Pe	riod			
LAWRENCE COUNTY REPUBLICAN	COMMITTEE			Fror	m:	<u>4/2/2</u>	<u>013</u> То	:	5/6/2013
					D/	ATE		A	MOUNT
Full Name of Contributor MIKE KELLY FOR CONGRESS					мо	DAY	YEAR		
Mailing P.O. BOX 476						20	2012	\$	500.00
City LYNDORA	State PA		p Code (Plus 6045	4)	4	30	2013		
Employer Name					Occupat	tion			
Employer Mailing Address/Principal Business	Place of		City			State		Zip Cod	le (Plus 4)
Enter Grand Total of Part C on S	chedule I, Deta	iled Sumn	mary Page,	Section	on 3.		4		500.00

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 C	andidate		Repor	ting Perio	od			
			From:			To:		
				D	ATE		АМ	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description		·					•	
Enter Grand Total of Part E or	n Schedule T. Detailed	d Summary Page	Section	4			PAC	GE TOTAL
	Juliania I Detaile	a cannual y 1 age,	2001011	••			\$	0.00

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 Period	i	
LAWRENCE COUNTY REPUBLICAN COMMITTEE	From:	<u>4/2/2013</u> To :	5/6/2013
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
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 Candidat	e				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting P	eriod		
LAWRENCE COUNTY REPUBLICAN COMMITTEE	From	<u>4/2/2013</u>	То:	<u>5/6/2013</u>

			DATE				AMOUNT
To Whom Paid NEW CASTLE NEWS			МО	DAY	YEAR		
Mailing Address N. MERCER STREET			4	8	2013	\$	180.00
City NEW CSTLE	State PA	Zip Code (Plus 4) 16105	Description of Expenditure AD FOR PARTY MEET AND GREET				
Subsection of Table 6 Supervision and Paract Court Paract Court Paract Court Paract Court Paract Par							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	180.00