

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 :		8000661		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: LAWRENCE CO REP COM												
Street Address:												
City: NEW CASTLE						State: PA			Zip Code: 16101-6817			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6. X	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2002	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR				
						11	5	2002	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:				MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
				1	1	1		11	25	2002		
A. Amount Brought Forward From Last Report						\$ 11,682.61						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 7,740.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 19,422.61						
D. Total Expenditures (From Schedule III)						\$ 6,626.47						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 12,796.14						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 0.00						

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 filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

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

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
LAWRENCE CO REP COM	From: To: <u>11/25/2002</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 6,440.00

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)	\$ 800.00
TOTAL for the Reporting Period (2)	\$ 800.00

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 Period (3)	\$ 500.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.00

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 Page1, Report Cover Page, Item B.)	\$ 7,740.00
---	-------------

PART B 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 LAWRENCE CO REP COM				Reporting Period From: To: <u>11/25/2002</u>			
				DATE		AMOUNT	

Full Name of Contributor JOHN R. BUTZ			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	25	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101				

Full Name of Contributor W. THOMAS ANDREWS			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	25	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101				

Full Name of Contributor DONALD W. FOX			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	25	2002	
City ENON VALLEY	State PA	Zip Code (Plus 4) 16120				

Full Name of Contributor DR. WILBUR E. FLANNERY			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	25	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16105				

Full Name of Contributor RICHARD E. FLANNERY			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	25	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16105				

Full Name of Contributor GALE MEASEL, JR			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	22	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16105				

Full Name of Contributor ANTHONY CIOFFI			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	22	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101				

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
NORMAN DE GIDIO				10	22	2002	
Mailing Address							
City	NEW CASTLE	State	Zip Code (Plus 4)				
		PA	16101				

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

PAGE TOTAL
\$ 800.00

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 Candidate	Reporting Period	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 0.00

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 LAWRENCE CO REP COM	Reporting Period From: To: <u>11/25/2002</u>
---	--

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
ROBERT BARNESFELD	10	15	2002	\$ 500.00
Mailing Address				
City ELLWOOD CITY	State PA	Zip Code (Plus 4) 16117		
Employer Name RETIRED			Occupation	
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)

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

PAGE TOTAL
\$ 500.00

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	Reporting Period From: To:
---------------------------------------	--

				DATE	AMOUNT		
Full Name				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

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

PAGE TOTAL
\$ 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	
LAWRENCE CO REP COM		From:	To: <u>11/25/2002</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
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, Reports Cover Page, Item F.)			\$ 0.00

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period From: To:
---------------------------------------	--

			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

9/15/2025 10:37:36 AM

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
LAWRENCE CO REP COM	From To: <u>11/25/2002</u>

				DATE	AMOUNT		
To Whom Paid				MO	DAY	YEAR	\$ 106.00
NEST EGG				10	22	2002	
Mailing Address				10	22	2002	\$ 56.18
City	NEW CASTLE	State	PA	Zip Code (Plus 4)	16142	Description of Expenditure	
To Whom Paid				MO	DAY	YEAR	\$ 1,000.00
SUPERIOR SIGN & GRAPHICS				10	22	2002	
City	NEW CASTLE	State	PA	Zip Code (Plus 4)	16101	Description of Expenditure	ELECTION POSTERS
To Whom Paid				MO	DAY	YEAR	\$ 85.00
FRIENDS OF LAWR. CO.				10	24	2002	
City	NEW CASTLE	State	PA	Zip Code (Plus 4)	16101	Description of Expenditure	SIGNS FOR ELECTION
To Whom Paid				MO	DAY	YEAR	\$ 3,757.50
RAYMOND MELCER				10	24	2002	
City	NEW CASTLE	State	PA	Zip Code (Plus 4)	16101	Description of Expenditure	MUSIC FOR DINNER
To Whom Paid				MO	DAY	YEAR	\$ 250.00
CRANE ROOM				10	24	2002	
City	NEW CASTLE	State	PA	Zip Code (Plus 4)	16101	Description of Expenditure	FALL DINNER
To Whom Paid				MO	DAY	YEAR	\$ 106.00
ANTHONY DE CARLO				10	30	2002	
City	NEW CASTLE	State	PA	Zip Code (Plus 4)	16105	Description of Expenditure	AD BOOK

To Whom Paid NICK RISKO			MO	DAY	YEAR	\$ 44.65
Mailing Address			10	30	2002	
City ELLWOOD CITY	State PA	Zip Code (Plus 4) 16117	Description of Expenditure OCT. EXPENSES			

To Whom Paid NORMAN DE GIDIO			MO	DAY	YEAR	\$ 1,070.00
Mailing Address			11	1	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure OCT. EXPENSES			

To Whom Paid CIALELLA & CARNEY			MO	DAY	YEAR	\$ 47.40
Mailing Address			11	1	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure FLOWERS FOR D.A. DON WILLIAMS			

To Whom Paid POSTMASTER			MO	DAY	YEAR	\$ 37.00
Mailing Address			11	4	2002	
City ELLWOOD CITY	State PA	Zip Code (Plus 4) 16117	Description of Expenditure STAMPS			

To Whom Paid NORMAN DE GIDIO			MO	DAY	YEAR	\$ 172.74
Mailing Address			11	4	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure OCT. EXPENSES			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 6,626.47

