

# 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: 1105 DEWEY AVE											
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 POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	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

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

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

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 800.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 800.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 500.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 500.00

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

<b>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.)</b>	\$ 7,740.00
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**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)**

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

<b>DATE</b>	<b>AMOUNT</b>
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Full Name of Contributor NORMAN DE GIDIO			MO	DAY	YEAR	\$ 100.00
Mailing Address 13 E. EDISON AVE			10	22	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101				

Full Name of Contributor ANTHONY CIOFFI			MO	DAY	YEAR	\$ 100.00
Mailing Address 113 VINE ST			10	22	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101				

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

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

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
DR. WILBUR E. FLANNERY							
Mailing Address 106 HAZELCROFT AVE				10	25	2002	
City	NEW CASTLE	State	Zip Code (Plus 4)				
		PA	16105				

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
DONALD W. FOX						
Mailing Address 441 PETERSBURG RD.			10	25	2002	
City ENON VALLEY	State PA	Zip Code (Plus 4) 16120				

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

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
JOHN R. BUTZ						
Mailing Address 120 E. WASHINGTON ST.			10	25	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101				

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

<b>PAGE TOTAL</b>
\$ 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.)**

<b>Name of Filing Committee or Candidate</b>  LAWRENCE CO REP COM	<b>Reporting Period</b>  <b>From:</b> <b>To:</b> <u>11/25/2002</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
ROBERT BARNESFELD							
<b>Mailing Address</b> RR #2 BOX 581				10	15	2002	\$ 500.00
<b>City</b> ELLWOOD CITY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16117					
<b>Employer Name</b> RETIRED				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

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

<b>PAGE TOTAL</b>
\$ 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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
LAWRENCE CO REP COM		<b>From:</b>	<b>To:</b> <u>11/25/2002</u>
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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			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.						<b>PAGE TOTAL</b>  \$ 0.00

**SCHEDULE II**  
**PART G**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OVER \$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)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

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

DATE				AMOUNT		
To Whom Paid NEST EGG			MO	DAY	YEAR	\$ 106.00
Mailing Address 139 WILMINGTON RD. BOX 266			10	22	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16142	Description of Expenditure GIFT FOR SPEAKER			
To Whom Paid SUPERIOR SIGN & GRAPHICS			MO	DAY	YEAR	\$ 56.18
Mailing Address 914 S. MILL ST.			10	22	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure ELECTION POSTERS			
To Whom Paid FRIENDS OF LAWR. CO.			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 212 E. MOODY AVE.			10	24	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure SIGNS FOR ELECTION			
To Whom Paid RAYMOND MELCER			MO	DAY	YEAR	\$ 85.00
Mailing Address 3027 PINEHURST WAY			10	24	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure MUSIC FOR DINNER			
To Whom Paid CRANE ROOM			MO	DAY	YEAR	\$ 3,757.50
Mailing Address 3009 WILMINGTON RD.			10	24	2002	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure FALL DINNER			

<b>To Whom Paid</b> ANTHONY DE CARLO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 2418 WILMINGTON RD			10	30	2002	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105	<b>Description of Expenditure</b> AD BOOK			

<b>To Whom Paid</b> NICK RISKO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 120 MARTIN AVE			10	30	2002	
<b>City</b> ELLWOOD CITY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16117	<b>Description of Expenditure</b> OCT. EXPENSES			

<b>To Whom Paid</b> NORMAN DE GIDIO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 13 E. EDISON AVE			11	1	2002	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	<b>Description of Expenditure</b> OCT. EXPENSES			

<b>To Whom Paid</b> CIALELLA & CARNEY			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> S. MILL ST.			11	1	2002	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	<b>Description of Expenditure</b> FLOWERS FOR D.A. DON WILLIAMS			

<b>To Whom Paid</b> POSTMASTER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 7TH ST & CRESCENT AVE.			11	4	2002	
<b>City</b> ELLWOOD CITY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16117	<b>Description of Expenditure</b> STAMPS			

<b>To Whom Paid</b> NORMAN DE GIDIO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 13 E EDISON AVE.			11	4	2002	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	<b>Description of Expenditure</b> OCT. EXPENSES			

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

