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 8000	0650				port ed B		CANDI	DATE		СОМ	4ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candid	late or L	obbyist:		IND	IAN	A CO	DEM COI	м								
Street Address:	PO BOX 315																
City:	INDIANA							State:	PA			Zip Cod	le: 1	5701			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE	-	2.	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 ELECT		POST-	6. X		TERMINATION Yes REPORT?			No	•	
report type)	ANNUAL REPORT	7.	Year 2003					IG METHO						$\overline{}$	DISKE	TTE	
Name of Office S	Sought by Candida	ite:	-					DATE 0	DISTRICT OFFICE Number Code						ty Code	Count	y
								МО	DAY	YI	AR		12222				
								11		4	2003		(SEE IN	STRUCTIO	ONS FOR C	ODES)	_
	Receipts and	МО	DAY	YEAR	2			МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	s trom:		1 1		1	Т	0	11	2	24	2003						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			9,8	320.77						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	eI)	\$				0.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			9,8	320.77						
D. Total Expend	ditures (From Sch	edule II	I)				\$			1,0	080.44						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$			8,7	40.33						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sc	hedu	le II	[)	\$			1	.00.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)				\$				0.00			•			
				AFF	ID/	٩VI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere.	If th	is is	a Can	didate r	eport, o	andi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sch	edule	s file	d on	paper o	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , true	В,
Sworn to and subs	cribed before me thi day of	s	20							5	Signature	of Perso	n Submit	ting Rep	ort		•
	Signatu	ıre					- -					Prin	ted Name	e			-
My Commission Ex	cpires						_					Ema	il				-
	МО	D	AY	YR					Arc	ea Co	le	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of a can	didate's	authorized (Comn	nitte	ee, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of i	ny knowle	edge and belie	f this	polit	tical	commi	ittee has n	ot viola	ted ar	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,	
Sworn to and subsc	ribed before me this day of		20								S	ignature o	of Candid	ate			۱- ا
							-					Printe	d Name				-
My Commission Exp	Signature						-					Ema	il				-
, commission exp							-										
	МО	D	AY	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 Period		
INDIANA CO DEM COM	From:	To:	11/24/2003
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)	\$	0.00
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	d enter amount ge, Item B.)	\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Name of Filing Committe	e or Candidate		Reporting	Period			
			From:		То	:	
		L		DATE			AMOUNT
Full Name of Contributing (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 Fining Committee of Canadate				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 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		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•		•	•	
Enter Grand Total of Part E o	on Schedule I. Detailed	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 1, Betanet	. Jammar y r uge,	500.011				\$	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		
INDIANA CO DEM COM	From:	To:	11/24/2003
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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)	\$	100.00
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,		\$	100.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	Period			
INDIANA CO DEM COM			From:			То:	11/24/2003
				DATE			AMOUNT
Full Name of Contributor TOM HARLEY & ASSOC			мо	DAY	YEAR		
Mailing Address PHILADELPHIA ST.			11	4	2003	\$	100.00
City INDIANA	State	Zip Code (Plus 4)	7				
	PA	15701					
Description of Contribution: USE OF R	OOM FOR ELEC	CTION NIGHT-NO RENT	CHARGE				
Enter Grand Total of Part F on Sched	ule II, In-Kin	d Contributions Deta	iled Sum	mary Pag	je,		PAGE TOTAL
Section 2.					•	\$	100.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Reporting	Period			
					From:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus	4)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

STATEMENT OF EXPENDITURES

Name of Filing Co	ommittee or Candidate			Reporti	ng Period			
INDIANA CO DEN	1 COM			From			То:	11/24/2003
					DATE			AMOUNT
To Whom Paid POSTMASTER				МО	DAY	YEAR		
Mailing Address	7TH ST.			10	27	2003	\$	47.33
City INDIANA		State PA	Zip Code (Plus 4) 15701		otion of Exp		R ELECTION	I
To Whom Paid W.D.A.D				МО	DAY	YEAR		
Mailing Address	5TH ST.			10	28	2003	\$	246.56
City INDIANA		State PA	Zip Code (Plus 4) 15701		otion of Exp			
To Whom Paid RENDA RADIO				МО	DAY	YEAR		
Mailing Address	PO BOX 1020			10	28	2003	\$	326.00
City INDIANA		State PA	Zip Code (Plus 4) 15701		otion of Exp			
To Whom Paid MARTIN'S				мо	DAY	YEAR		
Mailing Address	RT 286			11	1	2003	\$	33.70
City INDIANA		State PA	Zip Code (Plus 4) 15701	1	otion of Exp		ON NIGHT	
To Whom Paid BIG LOTS	_	_	_	МО	DAY	YEAR		
Mailing Address	RT 422			11	1	2003	\$	17.31
City INDIANA		State PA	Zip Code (Plus 4) 15701		otion of Exp ATIONS FO		ION NIGHT	-

						PAG	E 12	
To Whom Paid JO-ANN FABRICS			МО	DAY	YEAR			
Mailing Address RT 286 REGENCY MALL				2	2003	\$	60.56	
City INDIANA	State PA	Zip Code (Plus 4) 15701	Description of Expenditure DECORATIONS, TABLECLOTHS ETC FOR ELECTION NIGHT					
To Whom Paid MARTIN'S			МО	DAY	YEAR			
Mailing Address RT 286			11	3	2003	\$	44.19	
City INDIANA	State PA	Zip Code (Plus 4) 15701	Description of Expenditure FOOD FOR ELECTION NIGHT					
To Whom Paid BILO			МО	DAY	YEAR			
Mailing Address 4TH ST.			11	4	2003	\$	26.00	
City INDIANA	State PA	Zip Code (Plus 4) 15701	Description of Expenditure ICE, ROLLS, HOT DOG BUNS ELECTION NIGHT					
To Whom Paid HOLIDAY BEVERAGES			МО	DAY	YEAR			
Mailing Address WATER ST.			11	4	2003	\$	51.17	
City INDIANA	State PA	Zip Code (Plus 4) 15701		Description of Expenditure BEER & ICE FOR ELECTION NIGHT				
To Whom Paid MISTRETTA'S			МО	DAY	YEAR			
Mailing Address RT. 119			11	4	2003	\$	28.25	
City HOMER CITY	State PA	Zip Code (Plus 4) 15701		otion of Exp				
To Whom Paid BALLOONS OF INDIANA			МО	DAY	YEAR			
Mailing Address CHURCH ST			11	13	2003	\$	117.66	
City INDIANA	State PA	Zip Code (Plus 4) 15701				L & PICKUP	FOR FAIR	

To Whom Paid VICKI ROBBINS			мо	DAY	YEAR				
Mailing Address 276 CHURCH ST			11	13	2003	\$	81.71		
City INDIANA	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	PA 15701 REIMBURSEMENT FOR EL FOOD, DEC. ETC.					ECTION NIGHT ITEMS-		
							PAGE TOTAL		
Enter Grand Total of Expe	enditures on Page 1, Re	port Cover Page, Item D				\$	PAGE TOTAL 1,080.44		
Enter Grand Total of Expe	enditures on Page 1, Re	port Cover Page, Item D				\$			
Enter Grand Total of Expe	enditures on Page 1, Re	port Cover Page, Item D	-			\$			
Enter Grand Total of Expe	enditures on Page 1, Re	port Cover Page, Item D				\$			