Campaign Finance Report

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

Filer Identificat Number :	ion 80	00661			Report Filed E		CANDI	DATE		СОМ	MITTEE	✓	LOB	BYIST		
Name of Filing	Committee, Cano	lidate or L	obbyist:			-	CO REP CO	ОМ		-						
Street Address:	1105 DEW	EY AVE														
City:	NEW CASTI	E					State:	PA			Zip Co	de: 16	e: 16101-6817			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.					AY F ARY	POST- 3.			AMENDI REPORT		Yes	N)	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					AY F TION	POST-	6.		TERMIN REPORT		Yes	N)	/
report type)	ANNUAL REPO	RT 7.	Year 200)3			NG METHO CHECK O				PAPER		\checkmark	DISK	TTE	
Name of Office	L Sought by Candi	date:					DATE O	F ELE	CTIC	N	District Number		Par	ty Code	Count	y
							мо	DAY	YI	EAR			I		1	
			11		4	2003		(SEE INS	TRUCTI	ONS FOR	CODES)					
	Receipts and	мо	DAY	YEAR			мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY		
Expenditure	s from:		1	1	1 T	0	5		5	2003	_					
A. Amount Bro	ought Forward F	rom Last R	leport			\$			11,	144.01						
B. Total Monet	ary Contributior	ns And Rec	eipts (Fro	om Sche	dule I)	\$	\$ 725.38									
C. Total Funds	Available (Sum	Of Lines A	and B)			\$;		11,8	869.39						
D. Total Exper	iditures (From S	chedule II	I)			\$	5		1,5	566.07						
E. Ending Cast	n Balance (Subtr	act Line D	From Lin	e C)		\$	5		10,3	303.32						
F. Value Of In-	-Kind Contributio	ons Receiv	ed (From	Schedu	le II)	\$;			0.00	-					
G. Unpaid Deb	ts And Obligatio	ns (From S	Schedule	IV)		\$				0.00						
				AFF	IDAVI	t se	CTION									
PART I - If this i	is a Committee r	eport, trea	asurer sig	n here. I	lf this is	a Ca	ndidate re	eport, c	andi	date sig	gn here.					
I swear (or affirm correct and comp	i) that this report, i lete.	ncluding th	e attached	schedules	s filed on	paper	or by elect	ronic me	edium	, are to i	the best o	of my knov	vledge	and bel	ief , tru	e _.
Sworn to and sub	scribed before met day of	this	20						5	Signature	e of Perso	on Submitt	ing Rep	oort		-
		ature				_					Prir	ited Name				-
My Commission E	-										Ema	nil				-
	мо	D	AY	YR		_		Are	ea Coo	le	Daytin	ne Teleph	one Nu	mber		-
Part II- If this is	a report of a ca	andidate's	authorize	ed Comm	nittee, C	andid	late shall	sign he	ere.							
I swear (or affirm No 320) as amend) that to the best o ed.	of my knowl	edge and b	elief this	political	comm	nittee has n	ot violat	ted ar	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 1333,	,
Sworn to and subs	cribed before me th day of	nis	20							s	ignature	of Candida	ite			-
	Printed Name									-						
My Commission Ex	Signatu	re				-					Ema	nil				-
						_										
	МО	D	AY	YR				Area	Code		D	aytime Te	elephor	e Numl	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** LAWRENCE CO REP COM From: To: <u>5/5/2003</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 725.38 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 725.38 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate				porting I	Period			
			Fre	om:		То	•	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

0.00

\$

PAGE 3

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 Candidat	e		Rep Froi	orting P m:	eriod	тс):	
					DATE			AMOUNT
								AMOUNT
Full Name of Contributor				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								

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:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Com	mittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section							\$	0.00

I

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	Name of Filing Committee or Candidate			ing Perio	od				
From:				m: To:					
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description	•						-		
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	ſAL
	nter Grand Total of Part E on Schedule I, Detailed Summary Page, Sectio						\$		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:	То:	<u>5/5/2003</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	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		АМС	DUNT		
Full Name of Contributor			мо	DAY	YEAR				
Mailing Address	Mailing Address					\$	0.00		
City	State	Zip Code (Plus 4)							
Description of Contribution:									
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Deta Section 2.				mary Pag	je,	PAGE	TOTAL		
					4	5	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate					Rej	porting P	eriod			
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business				Zip Code(Plus 4) Description of C			Contribution			

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
LAWRENCE CO REP COM			From			То:	<u>5/5/2003</u>
				DATE			AMOUNT
To Whom Paid PA. N.W. REP. CAUCUS			мо	DAY	YEAR		
Mailing Address 18 WILSON AVE.			1	10	2003	\$	105.00
City MEADVILLE	State PA	Zip Code (Plus 4) 16335	Descrip DUES F	tion of Exp OR '03	penditure		
To Whom Paid NORMAN DEGIDIO			мо	DAY	YEAR		
Mailing Address 13 E EDISON AVE.			1	31	2003	\$	144.38
CityNEW CASTLEStateZip Code (Plus 4)PA16101				tion of Exp	penditure	I	
To Whom Paid NICK RISKO			мо	DAY	YEAR		
Mailing Address 120 MARTIN AVE			1	31	2003	\$	37.85
City ELLWOOD CITY	State PA	Zip Code (Plus 4) 16117		tion of Exp	penditure	I	
To Whom Paid QUICKPRINT			мо	DAY	YEAR		
Mailing Address 703 WILMINGTON A	VE		2	12	2003	\$	42.35
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101		tion of Exp RSHIP CA			
To Whom Paid NORMAN DEGIDIO			мо	DAY	YEAR		
Mailing Address 13 E. EDISON AVE			3	3	2003	\$	192.36
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101		otion of Exp	benditure	-	

To Whom Paid NICK RISKO					DAY	YEAR		
Mailing Address 120 MARTIN AVE.					3	2003	\$	46.25
City FLLWOOD		State	Zip Code (Plus 4)	Descrip	tion of Exp			
City ELLWOOI		РА	16117		(PENSES	penditure		
To Whom Paid CIALELLAN CARNEY					DAY	YEAR		
Mailing Address 1006 SO. MILL ST.				3	3	2003	\$	42.40
City NEW CAS		Zip Code (Plus 4)	Descrip	Description of Expenditure				
		РА	16101	FLOWERS FOR COMM. GRAHAM				
To Whom Paid NORMAN DEGIDIO					DAY	YEAR		
Mailing Address	13 E. EDISON AVE			4	3	2003	\$	155.96
City NEW CAS	STI F	State	Zip Code (Plus 4)	Descrip	tion of Exp	Denditure		
		РА	16105		EXPENSE			
To Whom Paid NICK RISKO								
				мо	DAY	YEAR		
	120 MARTIN AVE			мо 4	DAY 3	YEAR 2003	\$	48.52
NICK RISKO Mailing Address		State	Zip Code (Plus 4)	4	3	2003		48.52
NICK RISKO Mailing Address		State PA	Zip Code (Plus 4) 16117	4 Descrip		2003 penditure		48.52
NICK RISKO Mailing Address				4 Descrip	3 Dition of Exp	2003 penditure		48.52
NICK RISKO Mailing Address City ELLWOOD To Whom Paid				4 Descrip MARCH	3 btion of Exp EXPENSE	2003 penditure S		48.52
NICK RISKO Mailing Address City ELLWOOD To Whom Paid JOYCE'S CAFE Mailing Address	D CITY FIFTH ST.			4 Descrip MARCH MO	3 btion of Exp EXPENSE DAY 4	2003 Penditure S YEAR 2003	\$	
NICK RISKO Mailing Address City ELLWOOD To Whom Paid JOYCE'S CAFE Mailing Address	D CITY FIFTH ST.	РА	16117	4 Descrip MARCH MO 4 Descrip	3 extion of Exp EXPENSE DAY	2003 penditure S YEAR 2003 penditure	\$	
NICK RISKO Mailing Address City ELLWOOD To Whom Paid JOYCE'S CAFE Mailing Address	D CITY FIFTH ST.	PA	16117 Zip Code (Plus 4)	4 Descrip MARCH MO 4 Descrip	3 extion of Exp EXPENSE DAY 4	2003 penditure S YEAR 2003 penditure	\$	
NICK RISKO Mailing Address City ELLWOOD To Whom Paid JOYCE'S CAFE Mailing Address City ELLWOOD To Whom Paid	D CITY FIFTH ST.	PA	16117 Zip Code (Plus 4)	4 Descrip MARCH MO 4 Descrip COMM.	3 extion of Exp EXPENSE DAY 4 extion of Exp MEMBERS	2003 Penditure S YEAR 2003 Penditure 5 BKFST.	\$	
NICK RISKO Mailing Address City ELLWOOD To Whom Paid JOYCE'S CAFE Mailing Address City ELLWOOD To Whom Paid POSTMASTER	D CITY FIFTH ST. D CITY SEVENTH ST.	PA	16117 Zip Code (Plus 4)	4 Descrip MARCH MO 4 Descrip COMM. MO	3 expense EXPENSE DAY 4 extion of Exp MEMBERS DAY	2003 Penditure S YEAR 2003 Penditure 5 BKFST. YEAR 2003	\$	125.00

To Whom Paid QUICK PRINT	мо	DAY	YEAR					
Mailing Address 703 WILMINGTON AVE				18	2003	\$	31.75	
City NEW CASTLE	State	Zip Code (Plus 4)	Descrir	tion of Exr	enditure			
	РА	16101	Description of Expenditure PRINTED CARDS					
To Whom Paid HUDSON LUNCH				DAY	YEAR			
Mailing Address E. WASHINGTON ST.				26	2003	\$	259.70	
City NEW CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Ex	Denditure			
	РА	16101	Description of Expenditure ELECTION COMMITTEE MTG.					
To Whom Paid								
NORMAN DEGIDIO			мо	DAY	YEAR			
Mailing Address 13 E. EDISON AVE				30	2003	\$	218.55	
City NEW CASTLE	State	Zip Code (Plus 4)	Descrip	otion of Exp	penditure			
	PA	16101	APRIL I	EXPENSES				
To Whom Paid NICK RISKO				DAY	YEAR			
Mailing Address 120 MARTIN AVE				30	2003	\$	36.60	
City ELLWOOD CITY	State	Zip Code (Plus 4)	Description of Expenditure					
	РА	16117	APRIL EXPENSES					
To Whom Paid CIALELLAN CARNEY				DAY	YEAR			
Mailing Address 1006 S. MILL ST				30	2003	\$	42.40	
City NEW CASTLE	STLE State Zip Code (Plus 4)			Description of Expenditure				
	РА	16101	FLOWERS-JOSEPH					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL	
							1,566.07	