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 9000)297			Rep File			CAI	NDI	DATE		СОМІ	MITTEE	~	L	JBB1	131	
Name of Filing C	Committee, Candid	late or L	obbyist:	,	PSP/	A-P	OLITI	CAL S	UPF	PORT F	OR P	OLITIC	AL ACT	ION				
Street Address:	600 THIRD A	VE											,					
City:	KINGSTON							State	e:	PA			Zip Co	de: 1	8704	4-58	15	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDA PRIMARY	Y PRE-	- 2	2.	30 DA		F	POST-	3.		AMENDI REPORT		Ye	es	No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5	5.	30 DA		F	POST-	6.		TERMIN REPORT		Ye	es	No	\
report type)	ANNUAL REPORT	7.	Year 2004					NG ME					PAPER		V		DISKET	TE
Name of Office S	- Sought by Candida	te:	-					DAT	ΕO	F ELE	СТІС	N	District Number	Office Code		Party	Code	County Code
								МО		DAY	YI	AR		•	•		•	
									11		2	2004		(SEE II	NSTRU	CTION	IS FOR CO	DDES)
	Receipts and	МО	DAY	YEAR	1			МО		DAY	ΥI	AR	FC	OR OFFI	CE U	JSE C	NLY	
Expenditures	s from:		1 1		1	Т	0		3		8	2004						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				8	365.67						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule	I)	\$					0.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$				8	365.67						
D. Total Expend	ditures (From Sch	edule II	1)				\$				5	00.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$				3	65.67						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)	\$					0.00						
G. Unpaid Debt	ts And Obligations	(From	Schedule I\	/)			\$					0.00			1			
				AFF	IDΑ	۱VI	T SE	CTIC	NC									
	s a Committee rep) that this report, inc	-	_									_		of may lene	sulad	laa ar	d balia	f true
correct and comple		luaing th	e attached sc	nedules	riied	ı on	рарег	ог ву е	electi	ronic m	ealum	, are to	the best c	и ту кис	owied	ige ar	ia belle	r , true
Sworn to and subs	cribed before me this day of	S	20								S	ignature	e of Perso	n Submi	tting	Repo	rt	
	Signatu	ıre					-						Prin	ited Nam	ie			
My Commission Ex	cpires						_						Ema	il				
	МО	D	AY	YR						Ar	ea Cod	le	Daytin	ne Telep	hone	Num	ber	
Part II- If this is	a report of a can	didate's	authorized	Comm	nitte	e, C	andid	ate sł	nall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowl	edge and bel	ief this	polit	ical	comm	ittee h	as n	ot viola	ted an	y provis	ions of th	e act of 3	June :	3,193	37 (P.L.	1333,
Sworn to and subso	ribed before me this day of		20									s	ignature	of Candid	date			
			-				-						Printe	ed Name				<u> </u>
My Commission Exp	Signature						-						Ema	il				—
	МО	D	AY	YR			-			Area	Code		D	aytime 1	Telep	hone	Numbe	 r

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
PSPA-POLITICAL SUPPORT FOR POLITICAL ACTION	From:	То:	<u>3/8/2004</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	g 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	g 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	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		\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value		\$2) in the			
Nume of Fining Comm	intec of cumulate			om:	renou	То	:	
					DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	!	I	!		<u> </u>			DAGE TOTAL

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 Filing Committee or C	andidate		Rep Fro	oorting P m:	eriod	To) :	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	1					

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			
				Fror	n:		То):	
					D	ATE		A	MOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•	•			Occupa	tion			
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip Cod	le (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	O.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		Report	ting Perio	od			
			From:			To:		
				D	ATE		АМ	IOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	•	
Enter Grand Total of Part E	on Schedule I. Detailed	d Summary Page.	Section	4.			PA	GE TOTAL
Stand 1 stand of 1 are 2		a cammary rage,					\$	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		
PSPA-POLITICAL SUPPORT FOR POLITICAL ACTION	From:	То:	<u>3/8/2004</u>
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)	\$	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 Candid	ate		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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting	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	ation		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	n-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period		
PSPA-POLITICAL SUPPORT FOR POLITICAL ACTION	From	То:	<u>3/8/2004</u>

			DA				AMOUNT
To Whom Paid KEVIN BLAUM FOR REPRESENTATIVE COMMITTEE			мо	DAY	YEAR		
Mailing Address 244 SCOTT STREET			2	23	2004	\$	500.00
City WILKES-BARRE	State PA	Zip Code (Plus 4) 18702	Description of Expenditure CONTRIBUTION				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	500.00