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 :		Rep File			CAND	IDATE		СОМ	1ITTEE	AITTEE / LOBBYIST		BYIST					
Name of Filing C	Committee, Candid	ate or L	obbyist:	•	PSP/	A-P	OLITIC	CAL SUP	PORT F	OR P	OLITIC	AL ACTI	ON				
Street Address:	600 THIRD A	VE															
City:	KINGSTON							State:	PA			Zip Cod	ie: 18	3704-5	815		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY F PRIMARY	30 DA		POST- 3. X			AMENDM REPORT?		Yes	No	~				
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5	5.	30 DA		POST- 6.			TERMINA REPORT?		Yes	No	Y	
report type)	ANNUAL REPORT	7.	Year 2005					IG METH CHECK O				PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candida	te:	-					DATE ()F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code	,
	· ,							МО	DAY	YE	AR	rumber	Toode			Couc	
								11		8	2005		(SEE IN	ISTRUCTI	ONS FOR C	ODES)	
	Receipts and	МО	DAY YE	EAR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	s trom:		1 1		1	Т	0	6	5	6	2005						
A. Amount Bro	ught Forward Froi	n Last R	eport				\$			5,4	65.67						
B. Total Moneta	ary Contributions	And Rec	eipts (From So	che	dule	I)	\$				0.00						
C. Total Funds	Available (Sum Of	f Lines A	and B)				\$			5,4	65.67						
D. Total Expend	ditures (From Sch	edule II	I)				\$			1,5	00.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			3,9	65.67						
F. Value Of In-	Kind Contributions	s Receiv	ed (From Sche	edul	e II	:)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			•			
			А	۱FF	IDA	\VI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign her	re. 1	f thi	is is	a Car	ndidate r	eport, e	candio	late sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sched	lules	filed	d on	paper	or by elec	tronic m	edium	are to t	he best o	f my kno	wledge	and belie	f , true	3
Sworn to and subs	cribed before me this day of	5	20							s	ignature	of Perso	n Submit	ting Rep	ort		
	Signatu	re					- -					Prin	ted Nam	e			-
My Commission Ex	kpires											Ema	il				•
	мо	D	AY	YR					Ar	ea Cod	е	Daytim	e Telep	hone Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Co	mm	itte	e, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of r	ny knowl	edge and belief	this	polit	tical	comm	ittee has ı	not viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	1333,	l
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	late			•
-	day of						_					Printe	d Name				۱.
	Signature						-										.
My Commission Exp	pires											Ema	II				
	МО	D	AY	YR			-		Area	Code		Da	aytime 1	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	T		
Name of Filing Committee or Candidate	Reporting Period		
PSPA-POLITICAL SUPPORT FOR POLITICAL ACTION	From:	То:	6/6/2005
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reportin	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 Reportin	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 Reportin	g Period (3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reportin	g Period (4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add at totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1		\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE 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 Filling Committee of Candidate					Reporting Period From: To:					
			l		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 Candidate				Period					
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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	Reporting Period								
	Fr					To	То:		
				D	ATE		А	MOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plu	s 4)						
Employer Name		•		Occupa	tion		•		
Employer Mailing Address/Principal Plac Business	e of	City		•	State		Zip Cod	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	, Secti	on 3.			P \$	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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		А	MOUNT
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 T. Detailed	l Summary Page.	Section	4.			P	AGE TOTAL
	2, 2000		22300				\$	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>6/6/2005</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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	ame of Filing Committee or Candidate Re					Reporting 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	ge,		PAGE TOTAL				
Section 2.						\$	0.00				

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Reporting	Period				
					From:			То:		
						DAT	E			AMOUNT
Full Name of Contributor					мо	DAY	,	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus	4)						
Employer of Contributor					Оссир	ation				
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zi 4)	p Code(Pl)	us	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	Name of Filing Committee or Candidate							
PSPA-POLITICAL SUPPORT FOR POLITICAL ACTION							То:	6/6/2005
					DATE	AMOUNT		
To Whom Paid FRIENDS OF PETRILLA					DAY	YEAR		
Mailing Address C/O ROBERT POWELL 10 FOX RUN ROAD				5	11	2005	\$	1,000.00
City DRUMS		State PA	Zip Code (Plus 4) 18222		otion of Exp	penditure		
To Whom Paid FRIENDS OF DENNY O'BRIEN				МО	DAY	YEAR		
Mailing Address C/O MARK PHENICIE PA TRIAL LAWYERS ASSOC 800 N THIRD ST			5	28	2005	\$	500.00	
City HARRISBURG State Zip Code (Plus 4) PA 17102					otion of Exp	enditure		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

\$ 1,500.00