

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		8000661		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> LAWRENCE CO REP COM												
<b>Street Address:</b> 1105 DEWEY AVE												
<b>City:</b> NEW CASTLE						<b>State:</b> PA			<b>Zip Code:</b> 16101-6817			
<b>TYPE OF REPORT</b>  (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. X	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2005	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>				
						11	8	2005	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		1	1	1		9	19	2005				
<b>A. Amount Brought Forward From Last Report</b>						\$ 6,968.10						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 2,571.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 9,539.10						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 2,607.83						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 6,931.27						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 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>9/19/2005</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	<b>\$ 2,171.00</b>

<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>	<b>\$ 0.00</b>
<b>All Other Contributions (Part B)</b>	<b>\$ 400.00</b>
<b>TOTAL for the Reporting Period (2)</b>	<b>\$ 400.00</b>

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

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

<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>	<b>\$ 2,571.00</b>
---	--------------------



# 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>9/19/2005</u>

				DATE		AMOUNT	
Full Name of Contributor DAVID BARENSFELD				MO 8	DAY 12	YEAR 2005	\$  100.00
Mailing Address     PETRIE ROAD							
City     MEW BRIGHTON	State PA	Zip Code (Plus 4) 15066					
Full Name of Contributor NICK RISK0				MO 8	DAY 17	YEAR 2005	\$  100.00
Mailing Address     120 MARTIN AVE							
City     ELLWOOD CITY	State PA	Zip Code (Plus 4) 16117					
Full Name of Contributor DONALD W. FOX				MO 8	DAY 24	YEAR 2005	\$  100.00
Mailing Address     441 PETERSHORE RD							
City     ENON VALLEY	State PA	Zip Code (Plus 4) 16102					
Full Name of Contributor ANTHONY CIOFFI				MO 8	DAY 29	YEAR 2005	\$  100.00
Mailing Address     113 VINE ST							
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>
\$ 400.00

## 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
	<b>From:</b> <b>To:</b>

			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.**

<b>PAGE TOTAL</b>	
\$	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>	<b>Reporting Period</b>  <b>From:</b> <b>To:</b>
--	--

			DATE			AMOUNT	
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name			Occupation				
Employer Mailing Address/Principal Place of Business		City		State		Zip Code (Plus 4)	

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

<b>PAGE TOTAL</b>	
\$	0.00

## 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: <span style="float: right;">To:</span>
---------------------------------------	--

			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> 9/19/2005
<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>
---------------------------------------	--

			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

7/1/2025 12:45:21 PM

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
LAWRENCE CO REP COM	From To: <u>9/19/2005</u>

				DATE		AMOUNT	
To Whom Paid L.O.O.M. #51				MO	DAY	YEAR	\$ 300.00
Mailing Address 35 S. MERCER ST.				6	25	2005	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16105	Description of Expenditure BKFST. FOR MAYOR & STAFF				
To Whom Paid NORMAN DEGIDIO				MO	DAY	YEAR	\$ 200.00
Mailing Address 13 E. EDISON AVE				6	27	2005	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16105	Description of Expenditure JUNE EXPENSES				
To Whom Paid LAWR COUNTY FAIR				MO	DAY	YEAR	\$ 250.00
Mailing Address HARLENSBURG RD				7	19	2005	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16105	Description of Expenditure 2005 BOOTH				
To Whom Paid NICK RUSKO				MO	DAY	YEAR	\$ 44.61
Mailing Address 120 MARTIN AVE				7	2	2005	
City ELLWOOD CITY	State PA	Zip Code (Plus 4) 16117	Description of Expenditure JUNE EXPENSES				
To Whom Paid HESS COMM. PRINTING				MO	DAY	YEAR	\$ 40.81
Mailing Address 703 WILMINGTON AVE				7	12	2005	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure PRINTED POST CARDS FOR MTG.				
To Whom Paid FIFTH ST. GRILLE				MO	DAY	YEAR	\$ 16.93
Mailing Address FIFTH STREET				7	15	2005	
City ELLWOOD CITY	State PA	Zip Code (Plus 4) 16117	Description of Expenditure EXEC. COMM. BKFST MTG.				

To Whom Paid HESS COMM. PRINTING			MO	DAY	YEAR	\$ 73.41
Mailing Address 703 WILMINGTON AVE			7	23	2005	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16107	Description of Expenditure PRINT TICKETS FOR PICNIC			

To Whom Paid POSTMASTER			MO	DAY	YEAR	\$ 37.00
Mailing Address 7TH ST			7	23	2005	
City ELLWOOD CITY	State PA	Zip Code (Plus 4) 16117	Description of Expenditure STAMPS			

To Whom Paid NORMAN DE GIDIO			MO	DAY	YEAR	\$ 185.54
Mailing Address 13 E. EDISON AVE			8	2	2005	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure JULY EXPENSES			

To Whom Paid NICK RISKI			MO	DAY	YEAR	\$ 34.77
Mailing Address 120 MARTIN AVE			8	2	2005	
City ELLWOOD CITY	State PA	Zip Code (Plus 4) 16117	Description of Expenditure JULY EXPENSES			

To Whom Paid GEORGE FREED			MO	DAY	YEAR	\$ 350.00
Mailing Address 2616 WILMINGTON ROAD			8	11	2005	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16107	Description of Expenditure DONATION			

To Whom Paid LAWR. CO. FAIR			MO	DAY	YEAR	\$ 99.00
Mailing Address HARLENSBURG ROAD			8	13	2005	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure (33) TICKETS			

To Whom Paid KEYSTONE SPECIALTY			MO	DAY	YEAR	\$ 61.02
Mailing Address 1029 S. MILL ST.			8	26	2005	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16107	Description of Expenditure PICNIC SUPPLIES			

To Whom Paid GIANT EAGLE			MO	DAY	YEAR	\$ 65.97
Mailing Address 1700 NEW BUTLER ROAD			8	27	2005	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16105	Description of Expenditure PICNIC SUPPLIES			

<b>To Whom Paid</b> GIANT EAGLE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 29.64
<b>Mailing Address</b> 1700 NEW BUTLER ROAD			8	27	2005	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105	<b>Description of Expenditure</b> PICNIC SUPPLIES			

<b>To Whom Paid</b> HUDSON LUNCH			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 491.00
<b>Mailing Address</b> 1021 E. WASHINGTON ST.			8	29	2005	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105	<b>Description of Expenditure</b> CATER PICNIC			

<b>To Whom Paid</b> NORMAN DE GIDIO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 204.73
<b>Mailing Address</b> 13 E. EDISON AVE			9	6	2005	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	<b>Description of Expenditure</b> AUGUST EXPENSES			

<b>To Whom Paid</b> CIALELLA & CARNEY			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 42.40
<b>Mailing Address</b> 1006 S. MILL ST.			9	6	2005	
<b>City</b> NEW CASTLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105	<b>Description of Expenditure</b> BOB SESSIONS FUNERAL			

<b>To Whom Paid</b> NICK RISKO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 44.00
<b>Mailing Address</b> 120 MARTIN AVE			9	6	2005	
<b>City</b> ELLWOOD CITY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16117	<b>Description of Expenditure</b> AUGUST EXPENSES			

<b>To Whom Paid</b> POSTMASTER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 37.00
<b>Mailing Address</b> 7TH ST.			9	13	2005	
<b>City</b> ELLWOOD CITY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16117	<b>Description of Expenditure</b> STAMPS			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 2,607.83

