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 79	00271				port ed B		CANDI	DIDATE COMMITTEE \(\square \) LOBBYIST							
Name of Filing C	Committee, Cand	idate or L	obbyist:		DEN	M ST	ATE S	ENATE C	AMPA	IGN C	ОМ					
Street Address:	PO BOX 379	92														
City:	HARRISBUR	.G						State:	PA			Zip Cod	ie: 17	7105		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRI	E-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	~
report type)	ANNUAL REPOR	7. X	Year 2005					IG METHO				PAPER	DISKE	TTE		
Name of Office S	Sought by Candid	date:	•					DATE O	F ELE	CTIO	N	District Office Party Code Number Code				
								МО	DAY	YE	AR	Number	code			Code
								11		8	2005		(SEE IN	STRUCTI	ONS FOR (CODES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR			_	МО	DAY	YI	AR	FO	R OFFI	CE USE	ONLY	
			1 1		1	. 1	0	12	:	31	2005					
A. Amount Bro	ught Forward Fr	om Last F	Report				\$			66,6	509.06					
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 21,790.00																
C. Total Funds Available (Sum Of Lines A and B) \$ 88,399.06																
D. Total Expenditures (From Schedule III) \$ 21,553.31																
E. Ending Cash	Balance (Subtra	act Line D	From Line	C)			\$			66,8	45.75					
F. Value Of In-	Kind Contribution	ns Receiv	ed (From S	chedu	le II	I)	\$				0.00					
G. Unpaid Debt	s And Obligation	ns (From	Schedule IV	')			\$:	256,0	00.00			•		
				AFF	IDA	AVI	T SE	CTION								
PART I - If this is	s a Committee re	eport, trea	asurer sign	here.	If th	nis is	a Can	ididate re	port, c	andi	date sig	ın here.				
I swear (or affirm) correct and comple		ncluding th	e attached sc	hedule	s file	ed on	paper o	or by electi	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , true
Sworn to and subs	cribed before me t day of	his	20							S	ignature	of Perso	n Submit	ting Rep	ort	
							-					Prin	ted Name	e		
My Commission Ex	Signa opires	ture										Ema	il			
•		D	AY	YR			_		Are	ea Cod	le		e Telepi	none Nu	mber	
Part II- If this is	a report of a ca	ndidate's	authorized	Comr	nitte	ee, C	andida	ate shall :	sign he	ere.						
I swear (or affirm) No 320) as amende		f my knowl	edge and beli	ef this	poli	itical	commi	ittee has n	ot viola	ted an	y provisi	ions of th	e act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me th	is									Si	ignature o	of Candid	ate		
	day of						_									
	Cianator						_					Printe	d Name			
My Commission Exp	Signatur ires	E										Ema	il			
	мо	D	AY	YR	ł		•		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		
DEM STATE SENATE CAMPAIGN COM	From:	То:	12/31/2005
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	g Period (1)	\$	230.00
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)		\$	560.00
TOTAL for the Reporting	g Period (2)	\$	560.00
3. Contributions Received Over \$250.00 (From Part C and Part D)			
Contributions Received From Political Committees (Part C)		\$	20,000.00
All Other Contributions (Part D)		\$	1,000.00
TOTAL for the Reporting	g Period (3)	\$	21,000.00
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		\$	21,790.00

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		Reporting Period						
			From:			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 Filing Committee or Candidat	value of Filling Committee of Candidate			orting Pe	eriod			
DEM STATE SENATE CAMPAIGN COM			Froi	m:		To	: <u>1</u>	2/31/2005
					DATE		АМ	IOUNT
Full Name of Contributor BRUCE D. CAMPBELL				МО	DAY	YEAR		
Mailing Address 12 DARLINGTON C	Г.						\$	200.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15217	12	1	2005			
Full Name of Contributor CHARLES M. TOCCI					DAY	YEAR		
Mailing Address 615 HALDEMAN BOULEVARD				12	10	2005	\$	30.00
City NEW CUMBERLAND	State PA	Zip Code (Plus 4) 17070		12	10	2005		
Full Name of Contributor CHARLES M. TOCCI				мо	DAY	YEAR		
Mailing Address 615 HALDEMAN BO	ULEVARD						\$	30.00
City NEW CUMBERLAND	State PA	Zip Code (Plus 4) 17070		12	1	2005		
Full Name of Contributor MICHAEL A. PALOMBO				МО	DAY	YEAR		
Mailing Address 682 FRUITHURST D				12	1	2005	\$	150.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15228			_	2000		
Full Name of Contributor RICHARD D. MILLER				МО	DAY	YEAR		
Mailing Address U45 BRUNO DRIVE				10		2025	\$	150.00
City CHESWICK	State PA	Zip Code (Plus 4) 15024		12	1	2005		

PAGE TOTAL

\$ 560.00

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

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.

lame of Filing Committee or Candidate			Reporting	Period			
DEM STATE SENATE CAMPAIGN COM			From:			То:	12/31/2005
				DA	TE		AMOUNT
Full Name of Contributing Committee AIA PENN PAC				мо	DAY	YEAR	
Mailing Address 213 MARKET STREET	, 8TH FLOOR						\$ 500.00
City HARRISBURG	State Zip Code (Plus 4) PA 17101			12	1	2005	
Full Name of Contributing Committee BUCHANAN INGERSOLL COMM FOR EFFECTIVE STATE GOV					DAY	YEAR	
Mailing Address 301 GRANT STREET City PITTSBURGH	State Zip Code (Plus 4) PA 152191410		12	1	2005	\$ 500.00	
Full Name of Contributing Committee ECKERT SEAMANS PA GOVERNMENT PA	AC			МО	DAY	YEAR	
Mailing Address 600 GRANT STREET,	44TH FLOOR						\$ 500.00
City PITTSBURGH	State PA	Zip Code 15219	e (Plus 4)	12	1	2005	
Full Name of Contributing Committee FIRST ENERGY PAC				МО	DAY	YEAR	
Mailing Address 76 SOUTH MAIN STR	EET						\$ 1,000.00
City AKRON	State OH	Zip Code 443081	(Plus 4) 890	12	1	2005	
Full Name of Contributing Committee LAWPAC				МО	DAY	YEAR	
Mailing Address 800 NORTH THIRD S	TREET						\$ 1,000.00
City HARRISBURG	State PA	Zip Code	e (Plus 4)	12	1	2005	

Full Name of Contributing Committ	ee		мо	DAY		YEAR	
Mailing Address 800 NORTH TH	IRD STREET						\$ 1,000.00
City HARRISBURG	State	Zip Code (Plus 4)	12		1	2005	
	PA	17102					
Full Name of Contributing Committ	ee		мо	DAY		YEAR	
LAWPAC							
Mailing Address 800 NORTH TH	IRD STREET						\$ 10,000.00
City HARRISBURG	State	Zip Code (Plus 4)	12		9	2005	
, HARRISBURG	PA	17102					
		-					
Full Name of Contributing Committee PA ASSOC. OF NURSE ANESTHETE	МО	DAY		YEAR			
Mailing Address 908 NORTH SE						\$ 500.00	
City HARRISBURG	State	Zip Code (Plus 4)	12		1	2005	
	PA	17102					
Full Name of Contributing Committee							
Full Name of Contributing Committee	ee		МО	DAY		ΥFΔR	
Full Name of Contributing Committee PABAR PAC	ee		МО	DAY		YEAR	
	ree		МО	DAY		YEAR	\$ 500.00
PABAR PAC Mailing Address P.O. BOX 186	State	Zip Code (Plus 4)	MO	DAY	1	YEAR 2005	\$ 500.00
PABAR PAC Mailing Address P.O. BOX 186		Zip Code (Plus 4) 17108		DAY	1		\$ 500.00
PABAR PAC Mailing Address P.O. BOX 186	State PA		12		1	2005	\$ 500.00
PABAR PAC Mailing Address P.O. BOX 186 City HARRISBURG	State PA			DAY	1		\$ 500.00
PABAR PAC Mailing Address P.O. BOX 186 City HARRISBURG Full Name of Contributing Committee	State PA ee		12		1	2005	\$ 500.00 \$ 1,000.00
PABAR PAC Mailing Address P.O. BOX 186 City HARRISBURG Full Name of Contributing Committed PAMD PAC Mailing Address P.O. BOX 1184	State PA ee		12		1	2005	
PABAR PAC Mailing Address P.O. BOX 186 City HARRISBURG Full Name of Contributing Committed PAMD PAC	State PA eee	17108	12 MO			2005 YEAR	
PABAR PAC Mailing Address P.O. BOX 186 City HARRISBURG Full Name of Contributing Committed PAMD PAC Mailing Address P.O. BOX 1184	State PA State PA State PA	17108 Zip Code (Plus 4)	MO 12	DAY		2005 YEAR 2005	
PABAR PAC Mailing Address P.O. BOX 186 City HARRISBURG Full Name of Contributing Committed PAMD PAC Mailing Address P.O. BOX 1184. City HARRISBURG	State PA State PA PA PA	17108 Zip Code (Plus 4)	12 MO			2005 YEAR	
PABAR PAC Mailing Address P.O. BOX 186 City HARRISBURG Full Name of Contributing Committed PAMD PAC Mailing Address P.O. BOX 1184 City HARRISBURG Full Name of Contributing Committed PAMD PAC Mailing Address P.O. BOX 1184	State PA State PA PA PA	2ip Code (Plus 4) 17108	MO 12	DAY		2005 YEAR 2005	
PABAR PAC Mailing Address P.O. BOX 186 City HARRISBURG Full Name of Contributing Committed PAMD PAC Mailing Address P.O. BOX 1184 City HARRISBURG Full Name of Contributing Committed PENN NATIONAL INSURANCE INSU	State PA State PA State PA EEE EERVCO PAC	2ip Code (Plus 4) 17108	MO 12	DAY		2005 YEAR 2005	\$ 1,000.00
PABAR PAC Mailing Address P.O. BOX 186 City HARRISBURG Full Name of Contributing Committed PAMD PAC Mailing Address P.O. BOX 1184 City HARRISBURG Full Name of Contributing Committed PAMD PAC Mailing Address P.O. BOX 1184	State PA State PA State PA STATE PA STATE STREET, 14TH FLOCK	Zip Code (Plus 4) 17108 DR	мо 12 мо	DAY	1	2005 YEAR 2005	\$ 1,000.00

Full Name of Contributing Committee PPL PEOPLE FOR GOOD GOVERNMENT	L PEOPLE FOR GOOD GOVERNMENT					
Mailing Address TWO NORTH NINTH	STREET					\$ 1,000.00
City ALLENTOWN	State	Zip Code (Plus 4)	12	1	2005	
	PA 18101					
Full Name of Contributing Committee RELIANT ENERGY PAC	МО	DAY	YEAR			
Mailing Address P.O. BOX 4567	Mailing Address P.O. BOX 4567					\$ 1,000.00
City HOUSTON	State	Zip Code (Plus 4)	12	1	2005	
	TX	772104567				
Full Name of Contributing Committee WASTE MANAGEMENT PAC	-					
Mailing Address 601 PENNSYLVANIA AVE., N.W. STE. 300 NORTH BLDG.						\$ 1,000.00
ty WASHINGTON State Zip Code (Plus 4		Zip Code (Plus 4)	12	1	2005	

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

PAGE TOTAL \$ 20,000.00

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	ame of Filing Committee of Candidate								
DEM STATE SENATE CAMPAIGN COM			Fron	n:			To:		12/31/2005
				D	ATE			Al	MOUNT
Full Name of Contributor KIRKPATRICK & LOCKHART				мо	DAY		YEAR		
Mailing 535 SMITHFIELD STR Address	EET							\$	1,000.00
City PITTSBURGH	State	Zip Code (Plus	(4)	12		1	2005		
	15222								
Employer Name SELF				Occupat	tion	AT	TORNE	Y	
Employer Mailing Address/Principal Place	e of	City		•	State			Zip Cod	e (Plus 4)
545655		PITTSBU	RGH		PA				
Enter Grand Total of Part C on Sche	dule T. Detailed Su	mmary Page	Section	nn 3				P	AGE TOTAL
Lines Grand Fotal of Part C on Sche	udic 1, Detailed 3u	iiiiiai y Fage,	Section).i. J.			\$		1,000.00

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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Summary r uge,	Section	••			\$	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							
DEM STATE SENATE CAMPAIGN COM	From:	To:	12/31/2005					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candidate	3		Reporting	9 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 Sch	odulo II. In Vir	d Contributions Data	ilad Sum	mary Dag			DAGE TOTAL	
Section 2.	edule II, III-KIN	iu Contributions Deta	ilieu Sum	шагу Рас	je,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	ame of Filing Committee or Candidate				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State	Zip Code(Plus 4)								
Employer of Contributor	•		•			Occupa	tion		•	
Employer Mailing Address/Principal Place of Business City State						Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.								PAGE TOTAL 0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period						
			keporting Period						
DEM STATE SENATE CAMPAIGN COM			From			То:	12/31/2005		
				DATE		AMOUNT			
To Whom Paid ALLEGHENY COUNTY			мо	DAY	YEAR				
Mailing Address 542 FORBES AVE.			12	8	2005	\$	20.00		
City PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure		enditure				
	PA	15219	OPERA ⁻						
To Whom Paid ANTHONY W. LEPORE			мо	DAY	YEAR				
Mailing Address 1717 N. 4TH ST.			12	1	2005	\$	159.29		
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure						
PA 17102				TRAVEL AND MEALS					
To Whom Paid AT&T			мо	DAY	YEAR				
Mailing Address P.O. BOX 09001309			12	20	2005	\$	32.36		
			1						
City LOUISVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
City LOUISVILLE	State KY	Zip Code (Plus 4) 402901309	1	l otion of Exp IONE SERV					
To Whom Paid BENNETT, PETTS & BLUMENTHAL	КҮ		1	-					
To Whom Paid BENNETT, PETTS & BLUMENTHAL	КҮ	402901309	TELEPH	IONE SERV	ICE	\$	14,400.00		
To Whom Paid BENNETT, PETTS & BLUMENTHAL Mailing Address 1010 WISCON	KY -	402901309	MO 12	DAY	YEAR 2005	\$	14,400.00		
To Whom Paid BENNETT, PETTS & BLUMENTHAL Mailing Address 1010 WISCON	KY - NSIN AVE., NW, STE.	402901309	MO 12	DAY 14	YEAR 2005	\$	14,400.00		
To Whom Paid BENNETT, PETTS & BLUMENTHAL Mailing Address 1010 WISCON	NSIN AVE., NW, STE.	402901309 208 Zip Code (Plus 4)	MO 12 Descrip	DAY 14	YEAR 2005	\$	14,400.00		
To Whom Paid BENNETT, PETTS & BLUMENTHAL Mailing Address 1010 WISCON City WASHINGTON To Whom Paid	NSIN AVE., NW, STE. State DC	402901309 208 Zip Code (Plus 4)	MO 12 Descrip CONSU	DAY 14 btion of Exp	YEAR 2005 penditure	\$	14,400.00 555.11		

17032

PΑ

TRAVEL AND MEALS

To Whom Paid BRIAN EURY Mailing Address 930 ANDERSON AVE 12 13 2005	
Mailing Address 220 ANDEDCON AVE	
Mailing Address 930 ANDERSON AVE. 12 13 2005 \$	3,000.00
City DREXEL HILL PA State PA Zip Code (Plus 4) 19026 Description of Expenditure CONSULTING	
To Whom Paid FEDEX MO DAY YEAR	
Mailing Address P.O. BOX 271461 12 13 2005 \$	9.31
City PITTSBURGH State PA Zip Code (Plus 4) Description of Expenditure	
To Whom Paid KYLE FITZSIMMONS MO DAY YEAR	
Mailing Address 317 RENO AVE. 12 20 2005 \$	1,028.10
City NEW CUMBERLAND PA State PA 17070 Description of Expenditure OPERATING EXPENSES	
NEW COMBERLAND Description of expenditure	
PA 17070 OPERATING EXPENSES To Whom Paid MO DAY YEAR	322.66
To Whom Paid MARK MCKILLOP Mo DAY YEAR Mailing Address	322.66
To Whom Paid MARK MCKILLOP Mailing Address 521 LAMP POST LANE State To Whom Paid MARK MCKILLOP Mo DAY YEAR 12 20 2005 \$ City CAMP HILL State Zip Code (Plus 4) Description of Expenditure OPERATING EXPENSES	322.66
To Whom Paid MARK MCKILLOP Mailing Address 521 LAMP POST LANE State PA 17011 To Whom Paid MO DAY YEAR Lip Code (Plus 4) Description of Expenditure TRAVEL AND MEALS To Whom Paid MO DAY YEAR MO DAY YEAR MO DAY YEAR	322.66 280.45
To Whom Paid MARK MCKILLOP Mo DAY YEAR Mo DAY YEAR Mo DAY YEAR City CAMP HILL State PA Zip Code (Plus 4) 17011 To Whom Paid MARK MCKILLOP Mo DAY YEAR 12 20 2005 \$ To Whom Paid MARK MCKILLOP Mo DAY YEAR And Description of Expenditure TRAVEL AND MEALS Mo DAY YEAR	
To Whom Paid MARK MCKILLOP State PA 17011 To Whom Paid MARK MCKILLOP To Whom Paid MARK MCKILLOP MO DAY YEAR 12 20 2005 \$ City CAMP HILL To Whom Paid MARK MCKILLOP MO DAY YEAR 12 20 2005 \$ To Whom Paid MARK MCKILLOP TRAVEL AND MEALS To Whom Paid MARK MCKILLOP MO DAY YEAR MO DAY	
To Whom Paid MARK MCKILLOP State PA	

To Whom Paid PETER CAPATAIDES			МО	DAY	YEAR		
Mailing Address 132 MT. VIEW DRIVE			12	22	2005	\$	700.00
City ENOLA	State PA	Zip Code (Plus 4) 17025	Description of Expenditure CONSULTING				
To Whom Paid UNITED STATES POSTAL SERVICE	:		МО	DAY	YEAR		
Mailing Address FEDERAL SQUARE STATION			12	6	2005	\$	740.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure POSTAGE				
To Whom Paid VERIZON			МО	DAY	YEAR		
Mailing Address P.O. BOX 28000			12	15	2005	\$	70.71
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 180028000	Description of Expenditure TELEPHONE SERVICE				
Enter Grand Total of Expenditu	ires on Page 1, Re	eport Cover Page, Item D				\$	PAGE TOTAL 21,553.31

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate Repo				ng Period				
DEM STATE SENATE CAMPAIGN	СОМ		From:			То:	1	<u>2/31/2005</u>
					DATE			Outstanding Balance of Debt
Name of Creditor AFFLERBACH FOR SENATE COMMITTEE				МО	DAY	YEAR		
Mailing Address 1222 LEHIGH STREET				10	23	2000	\$	2,000.00
City ALLENTOWN	State PA	Zip Code (Pl 18103	us 4)	Description of Debt LOAN				
		•			DATE			Outstanding Balance of Debt
Name of Creditor CONSTANCE H. WILLIAMS				мо	DAY	YEAR		
Mailing Address 307 BRENTFORD ROAD				3	22	2005	\$	250,000.00
City HAVERFORD	State Zip Code (Plus 4) PA 190411718			Description of Debt LOAN				
				Outstanding DATE Balance of De				
Name of Creditor RE-ELECT STEWART COMMITTEE			МО	DAY	YEAR			
Mailing Address R.D. 5, BOX 2			10	23	2005	\$	4,000.00	
City JOHNSTOWN	N State Zip Code (Plus 4) PA 15905			Description of Debt LOAN				
Enter Grand Total of Unpa	id Debts on Page 1	, I, Report Cover Pa	ige, Item	G.			\$	PAGE TOTAL 256,000.00